

NOTICE

Weight and balance or operating limitation changes shall be entered in the appropriate aircraft record. An alteration must be compatible with all previous alterations to assure continued conformity with the applicable airworthiness requirements.

8. Description of Work Accomplished

(If more space is required, attach additional sheets. Identify with aircraft nationality and registration mark and date work completed.)

N45967

10-31-2012

Nationality and Registration Mark

Date

REMOVED ARC RT 385A AND ARC IN 385A.

INSTALLED OWNER'S SERVICEABLE GARMIN GNS 430W, S/N: 23420639, IN ACCORDANCE WITH STC SA01933LA-D AND AML AND GARMIN INSTALLATION MANUAL 190-00356-02, REV. G. DEC 2008.

INSTALLED OWNER'S SERVICEABLE GARMIN GI-106A, S/N: E22450 FOR STEERING INFORMATION.

MOUNTED GARMIN GA 35, S/N: 86218, ANTENNA ON THE UPPER FORWARD FUSELAGE AND CONNECTED TO THE GNS 430W BY RG 400 OF SUFFICIENT LENGTH TO MEET THE LOSS REQUIREMENT. INSTALLED AD-9 TRIPLEXER.

ALTITUDE INFORMATION WAS PROVIDED BY EXISTING AMERI-KING AK 350 #41875 ENCODER.

ALL WORK WAS ACCOMPLISHED IN ACCORDANCE WITH THE MANUFACTURER'S INSTALLATION MANUAL; AC 43.13-1B CHAPTER 11 AND AC 43.13-2A, CHAPTERS 2 & 3.

A GROUND TEST WAS PERFORMED AND WAS FOUND TO OPERATE SATISFACTORILY WITH NO INTERFERENCE NOTED.

A FLIGHT CHECK WAS PERFORMED 10-31-2012 WITH NO DISCREPENCIES NOTED.

INSTRUCTIONS FOR CONTINUED AIRWORTHINESS ARE FOUND IN GARMIN DOCUMENT P/N: 190-00356-65, REV B.

FAA APPROVED AFM SUPPLEMENT P/N: 190-00356-03 REV B DATED JULY 2009 WAS INSTALLED.

WEIGHT AND BALANCE WAS COMPUTED, EQUIPMENT LIST UPDATED AND LOGBOOK ENTRY MADE.

WORK ORDER# 101912.

=====END=====

☐ Additional Sheets Are Attached



U.S. Department of
Transportation
Federal Aviation
Administration

MAJOR REPAIR AND ALTERATION
(Airframe, Powerplant, Propeller, or Appliance)

Form Approved
OMB No. 2120-0020
2/28/2011

Electronic Tracking Number

For FAA Use Only

INSTRUCTIONS: Print or type all entries. See Title 14 CFR §43.9, Part 43 Appendix B, and AC 43.9-1 (or subsequent revision thereof) for instructions and disposition of this form. This report is required by law (49 U.S.C. 1421). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

1. Aircraft	Nationality and Registration Mark N45967		Serial No. 15282965		
	Make CESSNA		Model 152		Series
2. Owner	Name (As shown on registration certificate) ROSS FRANKLIN K		Address (As shown on registration certificate) Address <u>221 WATTS RD</u> City <u>LUMBERTON</u> State <u>NC</u> Zip <u>28360-1733</u> Country <u>US</u>		
	3. For FAA Use Only				
4. Type					
Repair	Alteration	Unit	Make	Model	Serial Number
<input type="checkbox"/>	<input checked="" type="checkbox"/>	AIRFRAME	_____	(As described in Item 1 above)	_____
<input type="checkbox"/>	<input type="checkbox"/>	POWERPLANT			
<input type="checkbox"/>	<input type="checkbox"/>	PROPELLER			
<input type="checkbox"/>	<input type="checkbox"/>	APPLIANCE	Type		
			Manufacturer		
5. Unit Identification					
6. Conformity Statement					
A. Agency's Name and Address			B. Kind of Agency		
Name <u>POWELL AVIONICS, INC.</u>			<input type="checkbox"/> U.S. Certified Mechanic <input type="checkbox"/> Manufacturer		
Address <u>PO BOX 106</u>			<input type="checkbox"/> Foreign Certified Mechanic C. Certificate No.		
City <u>FAYETTEVILLE</u> State <u>NC</u>			<input checked="" type="checkbox"/> Certified Repair Station <u>PL4R444M</u>		
Zip <u>28302-0106</u> Country <u>US</u>			<input type="checkbox"/> Certified Maintenance Organization		
D. I certify that the repair and/or alteration made to the unit(s) identified in item 5 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 43 of the U.S. Federal Aviation Regulations and that the information furnished herein is true and correct to the best of my knowledge.					
Extended range fuel per 14 CFR Part 43 App. B <input type="checkbox"/>		Signature/Date of Authorized Individual <u>[Signature]</u> <u>10-31-2012</u>			
7. Approval for Return to Service					
Pursuant to the authority given persons specified below, the unit identified in item 5 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is <input checked="" type="checkbox"/> APPROVED <input type="checkbox"/> REJECTED					
BY	<input type="checkbox"/> FAA Fit Standards Inspector	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Maintenance Organization	<input type="checkbox"/> Person Approved by Canadian Department of Transport	
	<input type="checkbox"/> FAA Designee	<input checked="" type="checkbox"/> Repair Station	<input type="checkbox"/> Inspection Authorization	Other (Specify)	
Certificate or Designation No. PL4R444M		Signature/Date of Authorized Individual <u>[Signature]</u> <u>10-31-2012</u>			