

MAJOR REPAIR AND ALTERATION FORM (AIRFRAME, POWERPLANT, PROPELLER OR APPLIANCE)

1. AIRCRAFT	MAKE Chase	MODEL Y3 123-C	SERIAL NO. 49-2884A	NATIONALITY AND REGISTRATION MARK N-1238
-------------	----------------------	--------------------------	-------------------------------	--

2. OWNER	NAME (First, middle, last) Chris D. Stoltzfus	ADDRESS (Street and number, city, zone and State) Box 470 Coatsville, Penna.
----------	---	--

3. COMPLETE ONLY FOR UNIT REPAIRED AND/OR ALTERED. DESCRIBE WORK ACCOMPLISHED ON REVERSE IN ACCORDANCE WITH CIVIL AERONAUTICS MANUAL 18.

UNIT	MAKE	MODEL	SERIAL NO.	NATURE OF WORK (Check)	
				MAJOR REPAIR	MAJOR ALTERATION
a. AIRFRAME	***** (As described in item 1 above) *****			XX	
b. POWERPLANT					
c. PROPELLER					
d. APPLIANCE	TYPE AND MANUFACTURER				

4. AIRCRAFT WEIGHT AND BALANCE DATA *This item must be completed by repair or alteration agency. However, in the case of a spare component, it will not be completed until such component is installed in an aircraft. At this time, it will be completed by the installing agency, if applicable.*

**AFTER the repairs and/or alterations described below were made.*

CATEGORY	EMPTY WEIGHT (Pounds)*	EMPTY CENTER OF GRAVITY (Inches from datum)*	USEFUL LOAD (Pounds)*
Restricted R Part 8	23064	220	10,690

CONFORMITY STATEMENT (Complete and check)

a. AGENCY'S NAME AND ADDRESS Thurman S. Alphin 2613 Penna. Ave. Hagerstown, Maryland	b. KIND OF AGENCY <input checked="" type="checkbox"/> U. S. Certificated Mechanic. <input type="checkbox"/> Foreign Certificated Mechanic. <input type="checkbox"/> Certificated Repair Station. <input type="checkbox"/> Manufacturer. <input type="checkbox"/> (Check if repair or alteration was made under delegation option procedures.)	c. CERTIFICATE NO. A & R 176878
--	--	---

I certify that the repair and/or alteration made to the unit(s) identified under item 3 above and described on the reverse or attachments hereto have been made in accordance with the requirements of Part 18 of the U. S. Civil Air Regulations and that the information furnished herein is true and correct to the best of my knowledge.

August 27, 1967

(Date repair and/or alteration completed)

Thurman S. Alphin
Thurman S. Alphin A & E 176878

(Signature of authorized individual)

6. APPROVAL FOR RETURN TO SERVICE (Check and complete appropriate items)

Pursuant to the authority specified below the unit identified in item 3 was inspected in the manner prescribed by the Administrator and is

APPROVED } BY { CAA Designee Manufacturer Canadian Department of Transport Inspector of Aircraft
 REJECTED } CAA Aviation Safety Agent Repair Station Other (Specify) **INSPECTION AUTHORIZATION**

Thurman S. Alphin **A & E 176878**

(Signature of authorized individual; title or identification number)

TO BE COMPLETED ONLY BY CAA PERSONNEL

Forwarded for engineering comment See attached memorandum
 Accepted _____ Reinspected **9-4-57** Spot Checked _____
(Date) (Date) (Date)

Reg. 1 NY
ASDO 3
(CAA designation number)

B. L. Pfeiffer
(Signature Aviation Safety Agent)

INSTRUCTIONS

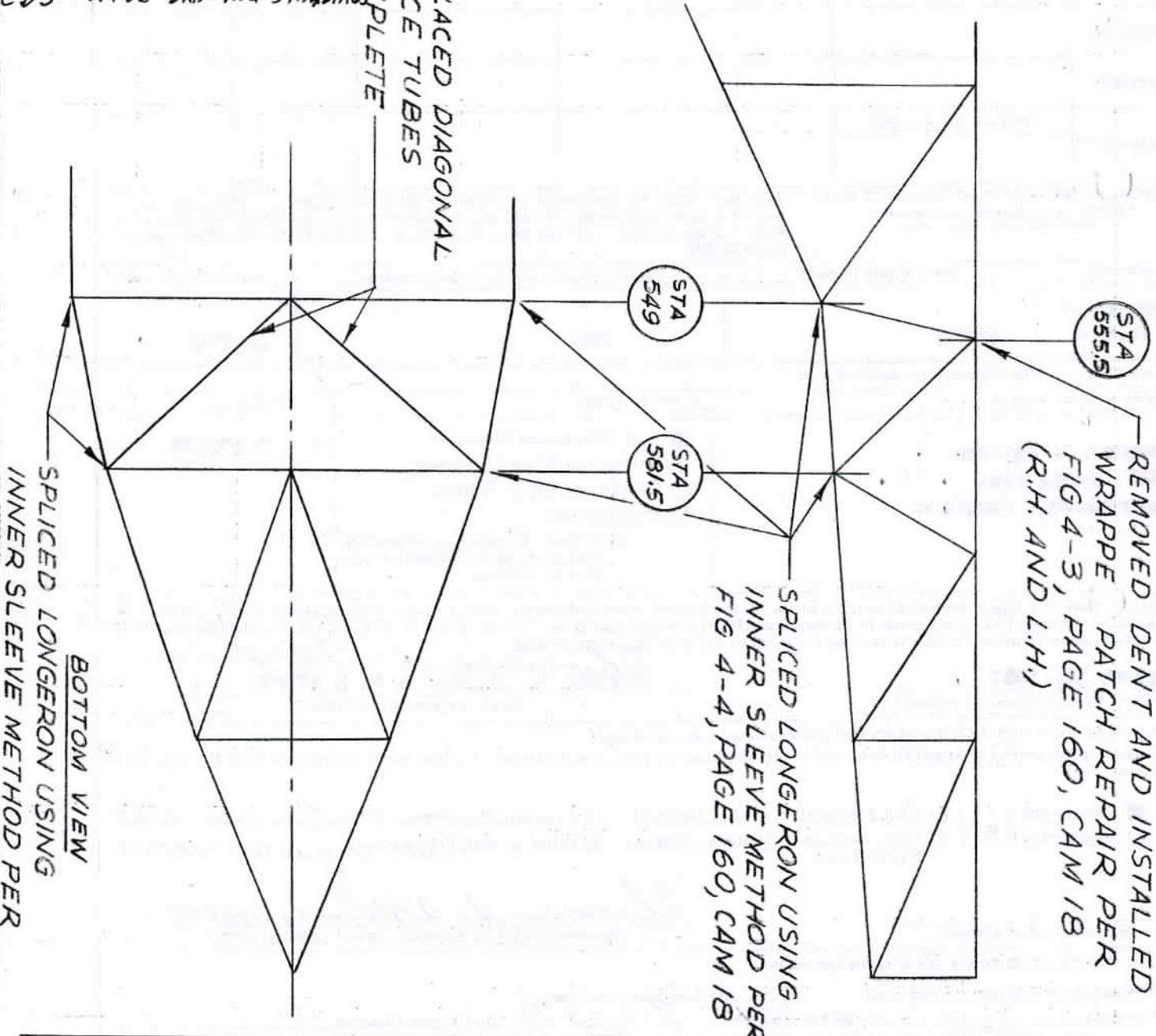
This form must be completed in duplicate each time a major repair and/or alteration is made of an aircraft, airframe, power-plant, propeller or appliance. After the repair and/or alteration has been inspected and item 6 completed, the original copy of this form will be made available to the aircraft owner for retention as part of the aircraft records. The duplicate copy is retained by the CAA for administrative purposes.

See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

8. DESCRIPTION OF WORK ACCOMPLISHED.*

**Repaired aircraft as shown on sketches showing tube structure repairs.
 Repaired skin covering using standard CDS standard splice method of splicing stringers, skin replaced as per original. Installed flap control stop to prevent flaps going into air-brake position.**

CDS - CHASE DRAWING STANDARD



*If additional space is needed attach additional sheets bearing aircraft nationality and registration mark and date work completed.

Check block if additional sheets are attached.