



US Department of Transportation  
Federal Aviation Administration

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

Form Approved  
OMB No. 2120-0020  
11/30/2007

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. §44701). Failure to report can result in a civil penalty for each such violation. (49 U.S.C. §46301(a))

<b>1. Aircraft</b>	Nationality and Registration Mark <b>USA N22RL</b>	Serial No. <b>AA5A-0856</b>	
	Make <b>Grumman-American</b>	Model <b>AA-5A</b>	Series
<b>2. Owner</b>	Name (As shown on registration certificate) <b>Ronald B. Levy</b>		Address (As shown on registration certificate) Address <b>6397 Oliver Drive</b>
			City <b>Salisbury</b> State <b>MD</b> Zip <b>21801-1724</b> Country <b>USA</b>

### 3. For FAA Use Only

*The technical data/alteration/repair identified herein complies with the applicable airworthiness requirements and is approved for use only on the above described aircraft, subject to conformity inspection by a person authorized in CFR 43.7.*

Date 09/17/07 Signature of FAA Inspector, AEA-PJSDO-07  
*David S. [Signature]*

4. Type		5. Unit Identification			
Repair	Alteration	Unit	Make	Model	Serial No.
<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		

### 6. Conformity Statement

A. Agency's Name and Address		B. Kind of Agency	
Name <b>Thomas Prasek</b>		<input checked="" type="checkbox"/> U. S. Certificated Mechanic	Manufacturer
Address <b>P.O. Box 872</b>		<input type="checkbox"/> Foreign Certificated Mechanic	C. Certificate No.
City <b>Georgetown</b> State <b>DE</b>		<input type="checkbox"/> Certificated Repair Station	<b>1777725</b>
Zip <b>19947</b> Country <b>USA</b>		<input type="checkbox"/> Certificated 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 <i>[Signature]</i> <b>17 SEPT. 2007</b>
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### 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  Approved  Rejected

BY	FAA Fit. Standards Inspector	Manufacturer	Maintenance Organization	Persons Approved by Canadian Department of Transport
	FAA Designee	Repair Station	<input checked="" type="checkbox"/> Inspection Authorization	Other (Specify)

Certificate or Designation No. <b>1777725</b>	Signature/Date of Authorized Individual <i>[Signature]</i> <b>17 SEPT. 2007</b>
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