

United States of America
Department of Transportation -- Federal Aviation Administration

Supplemental Type Certificate

Number **SA02161AK**

This certificate issued to:

McFarlane Aviation, Inc.
696 E. 1700 Rd
Baldwin City, KS 66006

certifies that the change in the type design for the following product with the limitations and conditions therefore as specified hereon meets the airworthiness requirements of Part 3 of the Civil Air Regulations.

Original Product - Type Certificate Number:

3A13

Make:

Cessna

Model:

182, 182A, 182B, 182C, 182D

Description of Type Design Change: Fabrication and installation of Stabilizer Jack-Screw Actuator in accordance with North Pacific Welding Drawing Number C-0712500, dated March 31, 2000 and Cessna 100 Series 1962 and prior Service Manual, dated February 1, 1962; or McFarlane Aviation, Inc., Drawing 1111-1, revision original, dated June 1, 2010 or later FAA approved revisions.

Limitations and Conditions: Compatibility of this design change with previously approved modification must be determined by the installer. 14 CFR Part 43 is adequate to ensure continued airworthiness of this modification.

If the holder agrees to permit another person to use this Certificate to alter the products, then the holder shall give that person written evidence of that permission.

This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.

Date of application: June 4, 1999

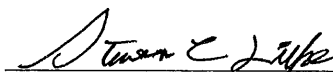
Date reissued: September 23, 2009

Date of issuance: August 11, 2000

Date amended: May 13, 2011



By direction of the Administrator



(Signature)

Steven C. Litke
Program Manager
Wichita Aircraft Certification Office

(Title)

INSTRUCTIONS: *The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.*

The FAA will reissue the certificate in the name of the transferee and forward it to him.

TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number _____

to *(Name of transferee)* _____

(Address of transferee) _____

(Number and street)

(City, State, and Zip code)

from *(Name of grantor) (Print or type)* _____

(Address of grantor) _____

(Number and street)

(City, State, and Zip code)

Extent of Authority *(if licensing agreement)*: _____

Date of Transfer: _____

Signature of grantor *(in ink)*: _____