



US 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. §44701). 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 USA N47815	Serial No. 34-7870004	
	Make Piper	Model PA-34-200T	Series
2. Owner	Name (As shown on registration certificate) Fino Plane Co.	Address (As shown on registration certificate) Address 34730 Oakland St.	
		City Farmington	State Mi
		Zip 48335-3337	Country USA

THE DATA IDENTIFIED HEREIN CONFORMS WITH THE APPLICABLE AIRWORTHINESS REQUIREMENTS AND IS APPROVED FOR THE ABOVE DESCRIBED AIRCRAFT SUBJECT TO CONFORMITY INSPECTION BY A PERSON AUTHORIZED BY CFR PART 43, SECTION 43.7
DATE 5-22-2017 FAA INSPECTOR *[Signature]*

COORDINATED WITH Chicago ACO,
SCOTT FARMAN, 5-16-17.

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	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>		Manufacturer	_____	_____

6. Conformity Statement	
A. Agency's Name and Address	B. Kind of Agency
Name Nu Sky Aviation	<input checked="" type="checkbox"/> U. S. Certificated Mechanic
Address 4313 Stockemer	<input type="checkbox"/> Foreign Certificated Mechanic
City White Lake State Mi	<input type="checkbox"/> Certificated Repair Station
Zip 48383 Country USA	<input type="checkbox"/> Certificated Maintenance Organization
	C. Certificate No. 369544480

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>Gregory E. Smith 5/19/2017</i>
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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	Inspection Authorization <input checked="" type="checkbox"/>	

Certificate or Designation No. 369544480	Signature/Date of Authorized Individual <i>Gregory E. Smith 5/24/2017</i>
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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.)

USA N47815

5/19/2017

Nationality and Registration Mark

Date

Removal of the 7th seat and seat belt if they exist and install placard
" MAXIMUM NUMBER OF OCCUPANTS 6 "

END