

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

1. AIRCRAFT	MAKE TAYLORCRAFT	MODEL BC12D	SERIAL NO. 6564	NATIONALITY AND REGISTRATION MARK N39911
2. OWNER	NAME (First, middle, last) SOLAR FLYING CLUB, Inc.		ADDRESS (Street and number, city, zone and State) 4613 S.W. 8th DES MOINES, IOWA	

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)			<input checked="" type="checkbox"/>	
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)*
STANDARD	753#	16.21" <i>by record log FAA-337 dated 7-15-64</i>	447#

5. CONFORMITY STATEMENT (Complete and check)

a. AGENCY'S NAME AND ADDRESS ROBERT L. NELSON NEVADA FLYING SERVICE NELSON AIRPARK NEVADA, IOWA	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&P 1262135
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d. 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.

11-6-56

(Date repair and/or alteration completed)

Robert L. Nelson
Robert L. Nelson (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**

11-8-56

(Date of approval or rejection)

Paul J. Howard
Paul J. Howard (Signature of authorized individual; title or identification number)

7. TO BE COMPLETED ONLY BY CAA PERSONNEL

Forwarded for engineering comment See attached memorandum

b. Accepted _____ (Date) Reinspected _____ (Date) Spot Checked _____ (Date)

(CAA designation number)

(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.

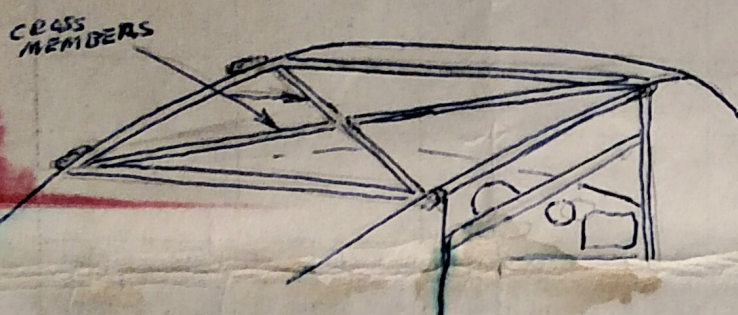
See CAM 18 for detailed instructions concerning the information to be furnished with this form and instructions concerning its preparation.

8. DESCRIPTION OF WORK ACCOMPLISHED.*

Removed bent 1A90-CF7443 McCauley Met-L-Prop and sent to ^(Approved repair station #3725) MAXWELL AIRCRAFT SERVICE Robbinsdale, Minnesota. (See their repair information stapled to rear of engine log)

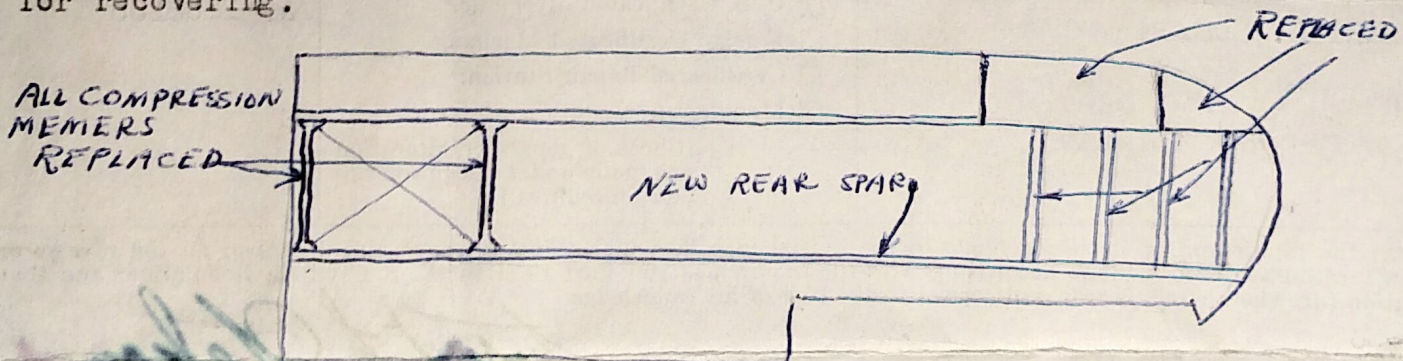
Removed fabric from top of fuselage and cabin upholstery. Straightened the cross members cold. (No dents or kinks.) Sanded metal tubing, zinc chromated, and recovered.

All work accomplished according to Manual 18. Negligible weight change.



Removed fabric from both wings. Knocked dents out of left wing leading edge and reinforced. Revarnished the spars and placed tape over rivet and/or screw heads ready for recovering.

Removed damaged spar from right wing and replaced with new. Removed all compression members and replaced with good used. Removed three outer large ribs and replaced with new. Straightened wing bow and zined. Removed curved leading edge mould toward wing tip, and replaced with good used. Replaced outer four feet of wing leading edge metal with good used. Varnished both spars good. Trammelled each wing bay starting from root end and working out. Replaced rear spar wing-to-fuselage fitting with good used. Placed tape over rivet and/or screw heads ready for recovering.



Used Grade "A" Slip covers on wings and Grade "A" fabric on all other repairs. Used #6 Rib stitching cord. Grade "A" pinked tapes. Eight coats of clear nitrate dope. Four coats silver on top sides of wings and three coats on bottom sides. Four coats of cream pigmented nitrate dope on top sides of wings and three on the bottom sides.

Straightened and repaired top of rudder, zinked, and recovered.

All work accomplished according to Manual 18 of the C.A.R.

Other routine maintenance discribed ~~the~~ in the log books.

*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.