



US Department of Transportation  
Federal Aviation Administration

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

Form Approved  
OMB No. 2120-0020

**For FAA Use Only**

Office Identification

INSTRUCTIONS: Print or type all entries. See FAR 43.9, FAR 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. 1421). Failure to report can result in a civil penalty not to exceed \$1,000 for each such violation (Section 901 Federal Aviation Act of 1958).

<b>1. Aircraft</b>	Make <b>PIPER</b>	Model <b>PAZBERT-201T</b>
	Serial No. <b>ZBR-8331035</b>	Nationality and Registration Mark <b>N4303G</b>
<b>2. Owner</b>	Name (As shown on registration certificate) <b>JUNEAU JAMES J</b>	Address (As shown on registration certificate) <b>5801 MCCALL DR. PLANO TX 75093-5934</b>

**3. For FAA Use Only**

The alteration identified hereto complies with applicable airworthiness requirements and is approved only for the above described aircraft subject to conformity inspection by a person authorized in 14 CFR Section 43.7.

**MAR 10 2005** *Paul Vercellino*  
Date **FAA Inspector, AEW-FSDO**

**4. Unit Identification**

**5. Type**

Unit	Make	Model	Serial No.	Repair	Alteration
AIRFRAME	~~~~~ (As described in Item 1 above) ~~~~~				XX
POWERPLANT					
PROPELLER					
APPLIANCE	Type				
	Manufacturer				

**6. Conformity Statement**

<b>A. Agency's Name and Address</b> <b>THOMAS E. ROBERTS</b> <b>1505 SHIRLEY WAY</b> <b>BEDFORD TX 76022</b>	<b>B. Kind of Agency</b> <input checked="" type="checkbox"/> U.S. Certified Mechanic <input type="checkbox"/> Foreign Certified Mechanic <input type="checkbox"/> Certificated Repair Station <input type="checkbox"/> Manufacturer	<b>C. Certificate No.</b> <b>271600441</b>
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D. I certify that the repair and/or alteration made to the unit(s) identified in item 4 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.

Date <b>3/10/05</b>	Signature of Authorized Individual <i>Thomas Roberts</i>
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**7. Approval for Return To Service**

Pursuant to the authority given persons specified below, the unit identified in item 4 was inspected in the manner prescribed by the Administrator of the Federal Aviation Administration and is  APPROVED  REJECTED

<b>BY</b>	FAA Fit. Standards Inspector	Manufacturer	<input checked="" type="checkbox"/>	Inspection Authorization	Other (Specify)
	FAA Designee	Repair Station	<input type="checkbox"/>	Person Approved by Transport Canada Airworthiness Group	
Date of Approval or Rejection <b>3/17/05</b>		Certificate or Designation No. <b>271600441</b>		Signature of Authorized Individual <i>Thomas Roberts</i>	

## 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.)

INSTALLED CO GUARDIAN CARBON MONOXIDE DETECTOR IN ACCORDANCE WITH DRAWING 01-552-01, SHEETS 1, 2, & 3, DATED 3-25-04 - REV 1R. CONSULTED APPLICABLE CHAPTERS IN AC 43.13-1B FOR WIRING - SECTION 4/7, & 8. EQUIPMENT LIST AND WEIGHT AND BALANCE AMENDED.

THE FOLLOWING ICA REQUIREMENTS OUTLINED AS FOLLOWS:

1) THIS UNIT MONITORS THE FOLLOWING:

- FEATURES INCLUDE AUDIBLE ALERT FOR THE PRESENCE OF CARBON MONOXIDE VIA AN 85 DB ALERT.
- CLOCK
- AUTOMATIC FLIGHT TIME RECORDER
- STOP WATCH
- BATTERY VOLTAGE DISPLAY
- IN/OUTSIDE TEMP DISPLAY
- CABIN ALTITUDE DISPLAY
- CARBON MONOXIDE LEVEL INDICATOR

2) UNIT INTERFACES WITH AUDIO PANEL TO PROVIDE AUDIBLE ALERT THROUGH HEADSET

3) SEE ITEM 1

4) N/A

5) TEST BEFORE EACH FLIGHT, REPLACE SELF CONTAINED BATTERY UPON DEPLETION I/A/W MFR INSTRUCTIONS

6) UNIT IS SELF CONTAINED AND REQUIRES REPAIR FROM MFR

7) REMOVE & REPLACE BY REMOVING UNIT AND DISCONNECTING PLUG

8) N/A

9) N/A

10) N/A

11) N/A

12) N/A

13) N/A

14) NO ADDITIONAL OVERHAUL TIME LIMITATIONS

15) N/A

16) UNIT SHOULD BE INSPECTED FOR OPERATION, SECURITY, (WIRING & UNIT) AT EACH SCHEDULED INSPECTION REF FAR 91.409 AND FAR 43 APP D

END

R/N N43039

S/N 28R-8331035

Additional Sheets Are Attached