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

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 violation (Section 901 of Federal Aviation Act of 1958).

1. Aircraft
   Make: TAYLORCRAFT
   Serial No.: 033

2. Owner
   Name (As shown on registration certificate): UWE KALENKA
   Address (As shown on registration certificate): HCO 1BOX1713
   GLENALLEN AK 99588

3. For FAA Use Only
   The date/alteration identified herein complies with the applicable airworthiness requirements and is approved for the above described aircraft, subject to conformity inspection by a person authorized in FAR Part 43.

4. Unit Identification
<table>
<thead>
<tr>
<th>Unit</th>
<th>Make</th>
<th>Model</th>
<th>Serial No.</th>
<th>Repair</th>
<th>Alteration</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIRFRAME</td>
<td></td>
<td>(As described in item 1 above)</td>
<td>XXX</td>
<td></td>
<td></td>
</tr>
<tr>
<td>POWERPLANT</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PROPELLER</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>APPLIANCE</td>
<td>Type</td>
<td>Manufacturer</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. Type

6. Conformity Statement
   A. Agency's Name and Address
      Timothy J. Popp
      P.O. Box 4619
      Palmer, AK 99645
   B. Kind of Agency
      U.S. Certified Mechanic
      Foreign Certified Mechanic
      Certified Repair Station
      Manufacturer
      X
   C. Certificate No.
      33705201

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 is true and current to the best of my knowledge.

Date: 20 Jan 99
Signature of Authorized Individual: [Signature]

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 XX Approved [X] Rejected

   BY
   FAA Fit Standards Inspector
   Manufacturer
   Inspection Authorization
   XX
   Other (Specify)
   FAA Designee
   Repair Station
   Person Approved by Transport Canada

Date of Approval or Rejection: 16 APR 99
Certificate or Designation No.: 375544444
Signature of Authorized Individual: Clifford A. Stockton

FAA Form 337 (12-97)