

## INFORMATION FOR APPLICANT

## APPLICATION FOR TYPE CERTIFICATE, PRODUCTION CERTIFICATE, OR SUPPLEMENTAL TYPE CERTIFICATE

## **Paperwork Reduction Act Statement:**

This collection of information is for the purpose of issuing a U.S. Type Certificate, Production Certificate, or Supplemental Type Certificate to any applicant meeting the criteria established in 14 CFR part 21. The FAA uses the information to evaluate an applicant's application for a U.S. Type Certificate, Production Certificate, or Supplemental Type Certificate. The information on FAA Form 8110-12, Application for Type Certificate, Production Certificate, or Supplemental Type Certificate is solicited under the authority of 49 U.S.C. 44702 as implemented by 14 CFR part 21. The burden associated with completing FAA Form 8110-12 is 48 minutes. Providing this information is mandatory if an applicant wishes to obtain a Type Certificate, Production Certificate, or Supplemental Type Certificate. Confidentiality is neither provided nor necessary. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection of information is 120-0018.

Tear off this cover sheet before submitting this form.

FAA Form 8110-12 (4-03) Supersedes Previous Edition

U.S. DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION

FORM APPROVED O.M.B. No. 2120-0018

| APPLICATION FOR TYPE CERTI<br>CERTIFICATE, OR SUPPLEMENT  | •  |  |  |  |
|---|--|--|--|--|
| 1. Name and address of applicant:   | 2. Application made for:  Type Certificate Production Certificate Supplemental Type Certificate        | 3. Product Involved :  Aircraft Engine Propeller |  |  |
| 4. TYPE CERTIFICATE (Complete item 4a below)  |  | •  |  |  |
| a. Model designation (s) (All models listed are to be completely design, material, specifications, construction, and performance of a second seco |  |  |  |  |
| 5. PRODUCTION CERTIFICATE: (Complete items 5a-c below. Submit with this form, in manual form, one copy of quality control data or   |  |  |  |  |
| changes thereto coveting new products, as required by applicable FAR.)  |  |  |  |  |
| a. Factory address: (if different from above)   | b. Application is for:  New production certificate Additions to production Certificate (Give P.C. No.) | P.C. No.   |  |  |
| c. Applicant is holder of or a licensee under a Type Certificate or a Supplemental Type Certificate:  (Attach evidence of licensing agreement and give certificate number)  T.C./S.T.C. No.                             |  |  |  |  |
| 6. SUPPLEMENTAL TYPE CERTIFICATE: (Complete items 6a-d below)   |  |  |  |  |
| a. Make and model designation of product to be modified:  |  |  |  |  |
| b. Description of modification:   |  |  |  |  |
| c. Will data be available for sale or release to other persons?  d. Will parts be manufactured for sale? (Ref. FAR 21.303)  |  |  |  |  |
| ☐ Yes ☐ No  | ☐ Yes ☐ No   |  |  |  |
| 7. CERTIFICATION - I certify that the above statements are true.  |  |  |  |  |
| Signature of Certifying Official  | Title  | Date   |  |  |

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