



043.1

1. APPROVING COMPETENT AUTHORITY/COUNTRY: LUFFFAHRT-BUNDESAMT GERMANY		AUTHORISED RELEASE CERTIFICATE EASA FORM 1				3. FORM TRACKING NUMBER: 00741175469 01/02	
4. APPROVED ORGANIZATION NAME AND ADDRESS:  AIRBUS AIRBUS 1 Rond Point Maurice Bellonte 31707 Maignac Cedex, France		<input type="checkbox"/> AIRBUS SPARES SUPPORT AND SERVICES Weg beim Jaeger 150, 22335 Hamburg, Germany <input checked="" type="checkbox"/> AIRBUS NORTH AMERICA CUSTOMER SERVICES 21760 Filigree Court, Ashburn, VA 20147, USA <input type="checkbox"/> HUAOU AVIATION SUPPORT CENTER Tianzhu Donglou 5, Beijing 101312, PR of China <input type="checkbox"/> AIRBUS ASIA/PACIFIC SPARES SUPPORT AND SERVICES 3 Changi North Street 2, Singapore				5. WORK ORDER, CONTRACT, INVOICE: 175970	
6. ITEM:	7. DESCRIPTION:	8. PART NUMBER:	9. ELIGIBILITY:	10. QUANTITY:	11. SERIAL/BATCH NUMBER:	12. STATUS/WORK:	
001	SECTION-PROTECTION	D2557154120400	See Block 13	2	N/A 877543004	MANUFACTURED	
002	SECTION-PROTECTION	D2557154120400	See Block 13	2	N/A 877543005	MANUFACTURED	
003	SECTION-PROTECTION	D2557154120600	See Block 13	1	N/A 849950013	MANUFACTURED	
13. REMARKS POS: 001 Eligibility: A318, A319, A320, A321 POS: 002 Eligibility: A318, A319, A320, A321 POS: 003 Eligibility: A318, A319, A320, A321							
14. CERTIFIES THE ITEMS IDENTIFIED ABOVE WERE MANUFACTURED IN CONFORMITY TO: <input checked="" type="checkbox"/> APPROVED DESIGN DATA AND ARE IN CONDITION FOR SAFE OPERATION <input type="checkbox"/> NON-APPROVED DESIGN DATA SPECIFIED IN BLOCK 13			19. <input type="checkbox"/> PART-145.A.50 RELEASE TO SERVICE <input type="checkbox"/> OTHER REGULATION SPECIFIED IN BLOCK 13: Certifies that unless otherwise specified in Block 13, the work identified in Block 12 and described in Block 13 was accomplished in accordance with PART 145 and in respect to that work, the items are approved for release to service.				
15. AUTHORISED SIGNATURE: 		16. APPROVAL/AUTHORISATION NUMBER: DE.21G.0009		20. AUTHORISED SIGNATURE:		21. CERTIFICATE/APPROVAL REF. NUMBER:	
17. NAME: WILLIAM SPEAKMAN		18. DATE (D/M/Y): 25/MAY/07		22. NAME:		23. DATE (D/M/Y):	

Form 0001 07/04 Hamburg

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* Installer must cross check eligibility with applicable technical data

