



U.S. Department
of Transportation
**Federal Aviation
Administration**

800 Independence Ave., S.W.
Washington, D.C. 20591

February 12, 2010

Jeffrey Clark
Coastal Aircraft Maintenance (CONN036C)
404 Moffett Road
Goleta, CA 93117

Dear Mr. Clark:

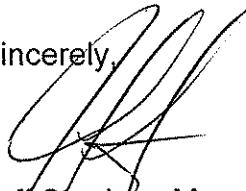
The Federal Aviation Administration (FAA) Drug Abatement Division has received your request for a Drug and Alcohol Testing Program Registration. Your Drug and Alcohol Program Registration number is **CONN036C**, which is also located at the bottom of your Program Registration form. Please use your assigned number in any correspondence regarding your Drug and Alcohol Testing Program.

Your Registration number is valid for three years and will expire February 12, 2013. Thirty (30) days prior to the expiration date please complete a new Registration form, indicate renewal, and submit it to the FAA Drug Abatement Division at the address above.

In our continuing effort to improve the level of service we provide, the FAA's Office of Aerospace Medicine would appreciate any comments you may have about our Registration process. Your participation in meeting our goals for continuous improvement is greatly appreciated. Please provide your comments at: http://www.faa.gov/about/office_org/headquarters_offices/avs/stakeholder_feedback/aam/aam800/. In the area of "What service was provided:" use the drop down menu to select "Registration".

If you have questions about this matter, please call (202) 267-8442.

Sincerely,



Jeff Stookey, Manager
Program Administration Branch
Drug Abatement Division
Office of Aerospace Medicine

Enclosure

DRUG AND ALCOHOL TESTING PROGRAM REGISTRATION FORMAT

(Form is at: http://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/drug_alcohol/starting/media/AAM810-002-F3.doc)

Indicate if this is a: New Registration
 Registration Renewal
 Registration Amendment FAA Registration Number _____

Type of Company: Contractor (if you are a part 145 certificate holder, list all certificate numbers covered under this registration)
 Air traffic control facility not operated by the FAA or by or under contract to the U.S. Military

Company Name: Coastal Aircraft Maintenance

Physical Address: 404 Moffett Road
Goleta, CA 93117

Mailing Address: 404 Moffett Road
Goleta, CA 93117

If this is where your program records are kept, check box If this is where your program records are kept, check box

If your program records are not kept at either address above, please indicate address and telephone number where the records are kept (this should be the location where an inspection of your program would be held and would not be the address of a service agent):

Address _____ City _____ State _____ Zip _____
Please list dba's and/or part 145 certificate numbers covered by this registration, if applicable:

Identify the type of safety-sensitive function(s) you perform or intend to perform for an employer:

- Flight crewmember duties
- Flight attendant duties
- Flight instruction duties
- Aircraft dispatcher duties
- Ground security coordinator duties
- Maintenance or preventive maintenance duties (as defined in 14 CFR part 43)
- Air traffic control duties
- Aviation screening duties

Indicate whether you have: 50 or more safety-sensitive employees. 49 or fewer safety-sensitive employees.

Indicate whether you are: A Staffing Company Not A Staffing Company

Certification Statement:

I certify that I/my company will comply with 14 CFR part 120 and 49 CFR part 40. If I am a contractor, I certify that I intend to provide safety-sensitive functions, directly or by contract, to a Part 119 certificate holder with authority to operate under part 121 or part 135, an air traffic control facility not operated by the FAA or by or under contract to the U.S. military, or an Air Tour Operator conducting flights under Part 91.147.

Signature: Jeffrey L. Clark Date: 2-3-2010
Authorized Representative (Service Agents are not authorized to sign on behalf of the company)

Print Name: Jeffrey L. Clark Title: Manager

Business Telephone: 805 450 5050 Facsimile Telephone: 805 964 9377

E-mail address: jclark500@cox.net

Send this information in duplicate to:

FAA/Office of Aerospace Medicine
Drug Abatement Division (AAM-810)
800 Independence Avenue, S.W., Room 806
Washington, DC 20591

Fax: 202-267-5200
Phone: 202-267-8442

FAA Registration Number: CONND36C **FOR FAA USE ONLY**
Registered by: ROB HILL
Date Registered/Amended: FEB. 12, 2010 Registration Expiration Date: FEB. 12, 2013

AAM 810-002-F3 rev6 (11-04-09) For more information on the FAA drug and alcohol testing program please visit:
http://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/drug_alcohol/