Airship - Application for Part-FCL Private Pilot Licence



Please read the included guidance notes before completing. Submission instructions can be found at the end of the form.

Unique No. (to be completed by CAA)

UK (EU) Regulation No. 1178/2011 as amended, requires that an individual has all of their licences administered by the National Aviation Authority that holds their medical records (Part MED.A.030 and Part FCL.015).

If your medical records are not held by the UK CAA, your application will be rejected.

FALSE REPRESENTATION STATEMENT

It is an offence under the UK Air Navigation Order to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, license, approval, permission or other document. This offence is punishable on summary conviction by a fine, and on conviction on indictment with an unlimited fine or imprisonment or both.

1.	APPLICANT DETAILS	(The Applica	nt is responsible for payr To be compl	nent of CAA charges) eted by the Applicant			
	CAA Personal reference nun	ober (if known):]				
		, , , , , , , , , , , , , , , , , , , ,	1				
	Title: Forename:	Sui	rname:				
	Date of birth (dd/mm/yyyy):	Nationality:					
	Town of birth:	Country of	f birth:				
	Permanent Address:						
	relepnone:	Mobile tel	epnone:				
		Passport or Full UK Photographic Driving	g Licence (see Guidance N	ote 1) must			
	accompany your application	as proof of identification.					
2.	ADDRESS FOR CORRESP	ONDENCE (if different from above)	To be comple	eted by the Applicant			
			•	, ,,			
	Postcode:						
3.	MEDICAL FITNESS		<u>-</u>	eted by the Applicant			
	State of Issue	Class of Medical Certificate held	Date of last Medical	CAA use only			
	Note: Your Medical Certificate must be valid on the licence issue date. If your Medical Certificate is due to expire within 14 days after the date of application for licence issue, please complete the following						
	My medical examination will	take place at:	on:				
	held by an Aeromedical Cent	o any person unless their medical records re located in the United Kingdom. UK (EL s all of their licences administered by the A.030 and Part-FCL.015).	J) Regulation No. 1178/2011	as amended,			

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4. PARTICULARS C	F UK OR	NON-	UK LICENCI	S HELD		To be	completed by	the Applicant
Issuing Authori	ty	Type/Class of Licence			Licence No.		Expiry Date	
5. RATINGS HELD						To be FULLY	completed by	the Applicant
Please give the da								by Experience
Rating or Certificate held	Single Pi (SP) or Multi-Pil (MP)	r	ate of Test	Date of IR Test (if applicable)	Expiry Date of Rating		ence Number Name	CAA Use Only
6. APPLICATION (t	ick as apr	propria	nte)			To be	completed by	the Applicant
I am applying fo				irships):			, , , , , , , , , , , , , , , , , , , ,	
UK FRTOL								
Aircraft type (plea	ase specif	y):						
Note: Any additi	onal ratii	ng app	olied for, oth	er than tho	se mandatory f	or licence issu	e, will incur aı	n additional

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7.	FLYING EXPERIENCE		То І	be completed by tl			
				PPL Airship	CAA use only		
		As pilot-in-command (PIC)					
		Supervised Solo Flight		(min 8 hrs)			
Α	Total Flight Time	Dual instruction		(min 25 hrs)			
		FSTD		(min 5 hrs)			
			Section A Total Hours	(min 35 hrs)			
		As pilot-in-command (PIC)					
В	Cross Country and Overseas	Dual instruction					
	Flying		Section B Total Hours	(min 3 hrs)			
		Date of 65KM 35NM flight (A	Airship) (dd/mm/yyyy)	Date:			
		Dual instruction (In flight)					
			FNPT I/ FTD 1				
С	Instrument Flying	Instrument ground time	FNPT II/ FTD2				
C	mstrament rying		Flight Simulator				
			FNPT III/ FTD 3				
			Section D Total Hours	(min 3 hrs)			
	Total Take offs and Landings (including masting and						
		un-masting procedures if app (Number of)	olies) at an aerodrome	(min No. 8)			
Fo	CAA use only			(111111110. 6)			
10	O/ V Cube offing						
0	ATO CERTIFICATION	LANGUATERED FACILITY /T:	de a a annua viata)	To be completed	l bu the ATO		
		I/REGISTERED FACILITY (Tie		To be completed	•		
	•		has satisfactorily com	pleted a course of t	raining for the		
gra	ınt of a Private Pilot's L	icerice.					
	•		ng log and the entries in them mee	• =	•		
rec	quirements for the gran	t of a Licence in accordance v	vith Part-FCL, CAP804 and section	7 of this application	n form.		
Re	commended for Skill Te	est by (name block capitals):		Licence No:			
Ар	proved Training Organi	sation (ATO):	ATO A	pproval No:			
Со	mpetent Authority issu	ing Approval:					
Na	me of Head of Training	·					
Sig	nature (Head of Trainin	g):		Date:			

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

9. THEORETICAL KNOWLEDGE EXAMINATIONS To be completed by the ATO (Ground Examiner)									
Examination Paper	Exam Date	Paper No.	Mark (%)	Examination Paper	Exam Date	Paper No.	Mark (%)		
Air Law				Operational Procedures Airship					
Human Performance				Flight Performance and Planning Airship					
Meteorology				Aircraft General Knowledge Airship					
Communications	Navigation Airship								
Principles of Flight Airship									
I certify that (name)									
Signature (Head of Trair	ning):				Date:				
PLEASE REFER TO FA	LSE REPRESE	NTATION S	TATEMENT	ON PAGE 1					
10. CONFIRMATION O			lder of an e	examiner certificate iss	sued in accord	ance with P	ART-FCL		
I certify that (name)									
Examiner's Name: Examiners Number:									
Authorising Competent	Authority:			. Date of Examiners I	Briefing (if appli	cable):			
Signature (Examiner):					Date:				
Training Standards, with Applicants are advised	nin 14 working that the licence	days from the	ne skill test. issued unti	I the corresponding Exa					
PLEASE REFER TO FA	LSE REPRESE	NTATION S	TATEMENT	ON PAGE 1					

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11. UK FLIGHT RADIOTELEPHONY	To be completed by the U	K RT Examiner			
	Date passed	Paper No.	Mark (%)	Examiner's name & signature	Examiner's CAA reference number
A) UK Communications (Written)					
B) HF theory (Written) (if applicable)					
C) Radiotelephony Practical Test					
D) ICAO English Language	Date	Level	Pass	Examiner's name & signature	Examiner's CAA reference number
Proficiency		6	Yes No		
The above examinations were cor	npleted at				(Test location)
PLEASE REFER TO FALSE REP	RESENTATION	I STATEN	IENT ON PAC	GE 1	
12. DECLARATION OF APPLICANT	(tick as appro	opriate)		To be completed by	the Applicant
I declare that the information prov	vided on this fo	orm is cori	rect.		
I agree to receive:					
Flight Crew Safety material from	the CAA only		or		
Safety material from authorised s	ources				
I have fully reviewed all Guidance considered.	Notes and ha	ve submit	ted all of the	necessary paperwork for my app	lication to be
Signature of Applicant:				Date:	
PLEASE REFER TO FALSE REP	RESENTATION	I STATEN	IENT ON PAC	GE 1	
13. CAA USE ONLY					
Date of Issue				Enclosures	
Checked by					
Loaded by				Despatch/collection details	
Signed by					

14. COURIER CHARGES

Note to all customers: All original documents submitted by the customer and CAA issued documents, will be returned by secure courier and are subject to the appropriate charge as detailed on our website; please click attached link "Courier Charge". The courier charge will be added to the relevant charge as per the Personnel Licensing Scheme of Charges and payable with application.

Should you decide that you do not wish to use the courier option, please tick the box below and all documents will be returned by normal post (Second Class). If the documents sent by normal post fail to arrive at your postal address, we will only be able to re-issue the CAA documents, 15 working days after the original date of despatch from our office. A written request and secure courier fee will also be required. The CAA is not liable for any direct or consequential loss or delay that is caused by normal postal service.

ii you wish to opt out of document return by secure couner, please tick box.	If you wish to opt out of document return by secure courier, please tick box.	
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Please note: The CAA is not liable for any direct or consequential loss or delay that is caused by the Secure Courier Service. Any damage to products received by you must be notified in writing to the CAA no later than 24 hours from the time of signing for the product(s). You must also return the damaged product(s) to the CAA no later than one week from the receipt and in return, we will reimburse the cost of postage. The CAA will assist you with your claim from the Secure Courier Service provider to recover your financial loss. Such claims will be limited to the price of replacement product(s) in line with the courier terms and conditions.

1	5.	Cł	ΗA	ιR	G	ES	
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Where charges are to be paid other than by the applicant, please enter the name of the person/company who is paying:

IMPORTANT NOTES:

- Additional Charges: Where the cost of the CAA investigations exceeds the application charge payable, the
 applicant shall pay additional charges to recover those excess costs incurred by the CAA in accordance with the
 Scheme of Charges.
- Overseas Visits: If a Member or employee of the CAA is required to travel overseas in respect of this application you are advised to read the CAA Scheme of Charges to which this application relates and the section entitled 'Additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by virtue of travelling overseas will be payable by the applicant on demand.
- Withdrawal/Cancellation of Application: In the event that this application is withdrawn by the applicant, a cancellation charge may be levied. The cancellation charge reflects the work carried out by the CAA on behalf of the applicant up to the point of cancellation. Please see the CAA Refunds Policy at www.caa.co.uk/refunds for more information. Where sufficient funds remain from the original application charge, this charge will be deducted from any refund made in respect of the application following cancellation.

NB: This application will not be processed until the applicable charges have been received.

I hereby declare that to the best of my knowledge the particulars entered on this application	n are accurate.
I agree to pay the charges for this application in accordance with the Scheme of Charges (www.caa.co.uk/ors5).
I agree to pay any additional charges which may become payable in respect of this application of Charges.	ation under the Scheme
Name of Applicant:	
Signature of Applicant:	Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

17. APPLICATION FORM SUBMISSION SERVICE (SUBMIT & PAY)

16. FINANCIAL DECLARATION

Once you have completed your application form, please save a copy to your device. Click on the button below to submit your application, supporting documentation (if applicable) and to make payment by credit/debit card. You will be required to upload a copy of the completed application form as part of the submission.

The button will direct you to the CAA Customer Portal. The first time you access the CAA Customer Portal you will need to create a user account, there are instructions provided and it only takes a few minutes to register. If you have used the CAA Customer Portal before, please log in to your existing user account.

Please note: Your application will not be processed until you have submitted it via the CAA Customer Portal and paid the relevant fee

The charge(s) required will be calculated in accordance with the current CAA Scheme of charges <u>List of Official Record Series 5</u> - <u>Scheme of Charges (caa.co.uk)</u>

Important: Please save your completed form before proceeding.

Application Form Submission Service

If you prefer, you can access the service by logging onto the CAA Customer Portal via https://portal.caa.co.uk and selecting the Application Form Submission Service.

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CAA USE ONLY	Applicant's nan	ne	Da	ate of application						
Department:		Conta	ct Name:							
Job No:	Folio No:	CAA A	Account Number:							
Nominal Code:	Cost Centr	e:	Date rec	eived						
The sum of £	has been rec	eived by:		Date:						
Amount paid by:	Card Ele	ectronic Transfer*								
£	£									
* Receipt of Electronic	Transfer to be verified by	Treasury.								
Bank Account No:		Sort C	ode:							
Is this part of a Compa	any payment? Yes	No	If Yes - Total amou	nt paid:£						
Amount to be deducte	ed from NATS account: £ .									
Enclosures:	Fe	dEx paid Yes/No	Loaded by:	. Signed/Despatched:						
Legal Entity Details										
Company – Date of in	corporation of Company:									
If declaration is signed	I on behalf of a Company:									
is declaration signed	d by a Director or Compar	ny Secretary?								
if not, then does sig	gnatory have authority to s	sign?								
Individual – Identifica	Individual – Identification Document Details e.g. Passport/Driving Licence.									
Type of identification: .										
Signature on ID checke	ed against Form Signature	е: Ар	propriately certified:							

Airship - Application for Part-FCL Private Pilot Licence – GUIDANCE NOTES

Having a clear application form and pilots' log(s) (where appropriate) will enable L&TS to issue licences and ratings more efficiently, with less risk of errors or rejections with subsequent delays to your application.

Please note that failure to submit a correctly completed application form with the required supporting documents will lead to the formal rejection of your application. In this instance we will issue you with a 30 day notice to meet the outstanding requirements and failure to meet this deadline will result in your application being cancelled and a fee for assessment and refund will be deducted as per our scheme of charges and our CAA refund policy.

IMPORTANT INFORMATION

In order to exercise the privileges of a Pilot licence where the operations of the aircraft require the use of radio communications equipment, the individual must hold a valid Flight Radiotelephony Operator's Licence. Such a licence will only be granted if the applicant holds a valid Language Proficiency Certificate in English in accordance with Appendix 2 of Part-FCL.055 prior to licence application. Should you not hold a valid Language Proficiency in English your application will be rejected.

NIGHT RATINGS

If the PPL course includes the endorsement of a Night Rating, please also complete form SRG 1126 and pay the appropriate additional fee as per the Scheme of Charge.

GUIDANCE NOTE 1: Certifiers of ID

The following people can act as 'certifiers':

Head of Approved Training Organisation.

Instructions for the certifier of your ID document are as follows:

- 1. Insert on the copy to be enclosed with the application: 'I have seen the original document and I certify that this is a complete and accurate copy of the original'.
- 2. Insert signature and date.
- 3. Certifier's name must be printed in block capitals.
- 4. Must include position or capacity, e.g. Head of Approved Training Organisation.

GUIDANCE NOTE 2: Which sections of the application form to complete						
Application applied for	Sections to be fully completed					
Part-FCL PPL (As) without FRTOL	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 12					
Part-FCL PPL (As) with FRTOL	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12					

GUIDANCE NOTE 3: Supp	Supporting documentation required with the application							
Application	Original flying log(s)	A certified copy of your valid Passport or full UK Photographic Driving Licence. (See guidance note 1)	Certified copy of Part-MED Medical Certificate (Class1 or 2 for PPL(AS)	Examiners Report form (applicants or copy for Competent Authority)	Original Qualifying Cross- Country Certificate	Original third country ICAO Licence and Medical or certified copy by ATO (if applicable). See guidance note 1	Copy of Part-FCL Examiner's Approval certificate and licence (if Examiner is not approved by the UK CAA) See guidance note 1	Copy of Part-ORA Approved Training Organisations (ATO) Approval certificate (if ATO is not approved by the UK CAA) See guidance note 1
PPL (As)	✓	✓	✓	✓	✓		✓	✓
ICAO Conversion PPL (As)	✓	✓	✓	✓	✓	✓	✓	✓