CERTIFICATE OF LANDING COMPLETION

Complete in BLOCK CAPITALS using black or dark blue ink after reading the guidance.



FALSE REPRESENTATION STATEMENT

It is an offence under Article 231 of the Air Navigation Order 2009 to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine up to £5000, and on conviction on indictment with an unlimited fine or up to two years imprisonment or both.

1. APPLICANT DETAILS	To be completed by the Applicant
CAA Personal reference number (if known):	
Title: Forename(s): Surname:	
Date of birth (dd/mm/yyyy):	
2. AIRCRAFT DETAILS	To be completed by the Applicant
Aircraft type being applied for:	
Previous Experience on similar type(s) (specify type(s)):	Hours:
3. CONFIRMATION OF FLIGHTS	To be completed by the Instructor
This is to certify that the above named Pilot has completed: Landings to a satisfactory standard in the above type following the completion of a Part-ORA Approved Type Rating Course and the application is now made for the grant of the Aircraft Rating. The details of the flight are as follows:	
In accordance with Part-FCL.720.A, a pilot with more than 500 hours MPA in aeroplanes of similar size and performance, should complete at least 4 landings including at least one full stop landing, unless otherwise specified in the OSD established in accordance with Regulation (EC) 1702/2003. In all other cases, a pilot should complete at least 6 landings.	
Date of Aircraft Training:	
Aircraft Registration:	
Start Time: Finish Time:	Total Flight Time:
Number of Take Offs/Landings: /	
Airport(s) used:	
Approved Training Organisation (ATO) Name:	
ATO Approval Number:	
Details of Instructor: Forename:	name:
Licence Number:	
Note - The Instructor must have privileges to conduct aircraft take-off and landings or be specifically authorised by the UK CAA. A copy of the instructor rating authorisation/certificate must accompany this form.	
Instructor's Signature:	Date:
PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON ABOVE	
4. DECLARATION OF APPLICANT	To be completed by the Applicant
I declare that the information provided on this form is correct.	
Signature: Date:	
PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON ABOVE	

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