Application for Issue and Renewal of Additional Ratings in Accordance with Part-FCL (not including class, type rating or night rating)

Civil Aviation Authority

Please complete this form online (preferred method) then print, sign and submit as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink.

Unique No. (to be completed by CAA)

Please read attached Guidance Notes before completing this form.

European Commission Regulation (EU) 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 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			sible for payment of CAA charges) To be completed by the Applicant	
	CAA Personal reference number	(if known):			
	Title: Forename(s):		Surname:		
	Date of birth (dd/mm/yyyy):	Nationality:			
	Town of birth:		Country of birth:		
	Permanent Address:				
			Pc	stcode:	
	Telephone:	Alter	native telephone Number:		
	E-mail:		Fax Number:		
2.	ADDRESS FOR CORRESPOND	ENCE (If different from	above)	To be completed by the Applicant	
	Postal Address:				
			Pc	stcode:	
3.	MEDICAL FITNESS			To be completed by the Applicant	
С	Class of Medical Certificate held	Date of last Medical	Date of Expiry	CAA use only	
	Note: Your Medical Certificate m 14 days after the date of applica		•	cal Certificate is due to expire within ng	
	My medical examination will tak	e place at:		on:	
	held by an Aeromedical Centre lo	ocated in the United King dual has all of their licenc	dom. European Commissions administered by the Na	neir Part-MED medical certificate are on Regulation (EU) No. 1178/2011as tional Aviation Authority that holds	

Form SRG 2157 Issue 01 Page 1 of 7

4. P/	PARTICULARS OF UK OR THIRD COUNTRY ICAO LICENCES HELD					To be	To be completed by the Applicant			
Issuing Authority			Type/Class of I	Licence		Licence Numb	oer	Expiry Dat	te	
5. R/	ATINGS HELD							To be	completed by the A	Applicant
Please give the date of the most recent Skill Test (LST), Licensing Proficiency Check (LPC) or Revalidation by Experience for each type and/or class rating, and any Instructor certificate to be endorsed on your Part-FCL Licence.									xperience	
Rating	g or Certificate held	Single-P (SP) o Multi-P (MP)	or ilot	Date of Test	Date of IR (if applicab		Expiry Date of Rating		rs Licence Number and Name	CAA Use Only
6. Al	PPLICATION (T	ick as ap	prop	priate)				To be	completed by the A	Applicant
l a	am applying fo	r the:								
Ae	Aerobatic Rating for Aeroplanes for Sailplanes									
Ва	anner Towing R	ating (Aeı	opla	nes) S	ailplane Tow	/ing F	Rating (Aeroplane	es)		
М	lountain Rating	(Aeroplar	nes)							
Fli	ight Test Rating	for Aero	plane	es			for Helicop	oters		
Re	enewal									
М	lountain Rating	(Aeroplar	nes)							

Form SRG 2157 Issue 01 Page 2 of 7

7.	COURSE COMPLETION CERTIFICATE (To be used if ATO does not issue a Certificate) To be completed by the Approved Training Organisation conducting the training
	I certify that (name)
	course of training for the issue or renewal of a (please specify course):
	I further certify that I have examined the applicants flying log(s) and the entries in them meet in full the pre-course and flying experience requirements for the issue of the above Additional Rating in accordance with Part-FCL.
	Date Training commenced: Date Training completed:
	Number of Aircraft training hours completed on course:
	Aircraft Type or Class and Registration used:
	Number of theoretical training hours completed on course:
	Recommended for Skill Test by (name): Licence No:
	Approved Training Organisation (ATO):
	Competent Authority issuing approval:
	Name of Head of Training:
	Signature (Head of Training): Date:
	PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1
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8.	CONFIRMATION OF SKILLS TEST (For Mountain Rating only) To be completed by the Applicant
8.	CONFIRMATION OF SKILLS TEST (For Mountain Rating only) I have completed a Skill Test or Proficiency Check for the Issue or Renewal of a Mountain Rating.
8.	I have completed a Skill Test
8.	I have completed a Skill Test
8.	I have completed a Skill Test
	I have completed a Skill Test or Proficiency Check for the Issue or Renewal of a Mountain Rating. Skill Test Pass Date: Aircraft Type and Registration: Name of Examiner: Examiners Authorising Number: Note:- Applicants are advised that the licence will not be issued until the corresponding Examiner's Report
	I have completed a Skill Test
	I have completed a Skill Test or Proficiency Check for the Issue or Renewal of a Mountain Rating. Skill Test Pass Date: Aircraft Type and Registration: Name of Examiner: Examiners Authorising Number: Note:- Applicants are advised that the licence will not be issued until the corresponding Examiner's Report Form is received. DECLARATION OF APPLICANT (Tick as appropriate) I declare that the information provided on this form is correct. I agree to receive:
	I have completed a Skill Test
	I have completed a Skill Test or Proficiency Check for the Issue or Renewal of a Mountain Rating. Skill Test Pass Date: Aircraft Type and Registration: Name of Examiner: Examiners Authorising Number: Note:- Applicants are advised that the licence will not be issued until the corresponding Examiner's Report Form is received. DECLARATION OF APPLICANT (Tick as appropriate) I declare that the information provided on this form is correct. I agree to receive:
	I have completed a Skill Test or Proficiency Check for the Issue or Renewal of a Mountain Rating. Skill Test Pass Date: Aircraft Type and Registration: Examiners Authorising Number: Name of Examiner: Examiners Authorising Number: Note:- Applicants are advised that the licence will not be issued until the corresponding Examiner's Report Form is received. DECLARATION OF APPLICANT (Tick as appropriate) To be completed by the Applicant I declare that the information provided on this form is correct. I agree to receive: Flight Crew Safety material from the CAA only or Safety material from authorised sources I have fully reviewed all Guidance Notes and have submitted all of the necessary paperwork for my application to be
	I have completed a Skill Test
9.	I have completed a Skill Test
9.	I have completed a Skill Test
9.	I have completed a Skill Test
9.	I have completed a Skill Test

Form SRG 2157 Issue 01 Page 3 of 7

Note to all applicants: All original documents submitted by the customer and CAA issued documents, will be sent 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 the use of normal postal services.
If you wish to opt out of document return by secure courier, please tick box.
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.
2. CHARGES
The charge(s) required as calculated in accordance with the CAA Personnel Licensing Scheme of Charges (published in CAA Official Record Series 5) (www.caa.co.uk/ors5) to be paid on application are enclosed herewith. NB: This application will not be processed until the applicable charges have been received.
Total charges included are: £
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.
3. FINANCIAL DECLARATION
I declare that to the best of my knowledge the particulars entered in Section 19 of this application are accurate.
I enclose payment for the charges payable on 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 under the Scheme of Charges.
Name of Applicant:

11. COURIER CHARGES

Form SRG 2157 Issue 01 Page 4 of 7

Date:

Signature of Applicant:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

14. SUBMISSION INSTRUCTIONS (See Guidance Notes)

Please send your completed application and supporting documentation (see Guidance Notes) to the following address:

Licensing and Training Standards, Licensing Department Aviation House Gatwick Airport South West Sussex

RH6 0YR

CAA USE ONLY	Applicant's name			Date of	of application				
Department:		Cont	act Name:						
Job No:	Folio No:	CAA	Account Nu	mber:					
Nominal Code:	Cost Centre:			Date received	d				
If payment is received I	by cheque, attach a copy to the	his applicatio	n form.						
The sum of £	has been receive	ed by:	Date:						
Amount paid by:	Cheque	Cash		Card	Electronic Transfer*				
£	£		£		£				
* Receipt of Electronic	Transfer to be verified by Trea	asury.							
Cheque drawn against	account of:								
Bank Account No:		Sort	Code:						
Is this part of a Compa	ny payment? Yes	No 📗	If Yes - To	tal amount pa	aid:£				
Amount to be deducted	d from NATS account: £								
Enclosures:	FedEx	paid Yes/No	Loaded by	: Si	gned/Despatched:				
Legal Entity Details									
Company – Date of inc	corporation of Company:								
If declaration is signed	on behalf of a Company:								
is declaration signed	is declaration signed by a Director or Company Secretary?								
if not, then does sign	if not, then does signatory have authority to sign?								
Individual – Identificati	on Document Details e.g. Pa	assport/Drivir	g Licence.						
Type of identification:									
Signature on ID checke	d against Form Signature:	. A	opropriately	certified:					

Form SRG 2157 Issue 01 Page 5 of 7

PLEASE ENTER PAYMENT DETAILS ON FOLLOWING PAGE

Form SRG 2157 Issue 01 Page 6 of 7

15. PAYMENT DETAILS								
a) Payment type (please tick your chosen method of payment).								
Visa Mastercard Debit Card Cheque/Banker's Draf	t Electronic Transfer Cash (max. £200)							
We do not accept American Express, Diners Club or JCB cards. Please	do not send cash by post.							
b) Bank Details (for payment by Cheque/Banker's Draft)								
Cheques or Postal Orders should be made payable to ' Civil Aviation Authority '. Please write the CAA Application Form No. on the reverse of your cheque.								
Please note that any refund applicable will be paid directly to the bank a	account stated below by BACS transfer.							
Name in which Bank Account held:								
Account Number:	Sort Code:							
If overseas: IBAN Number:	Swift Code:							
c) CAA Bank Account Details (if paying by Electronic Transfer)								
National Westminster Bank plc Bloomsbury Parr's Branch PO Box 158 214 High Holborn London WC1V 7BX	Account Name: Civil Aviation Authority Account Number: 36029769 Sort Code: 60-30-06 Swift Code: NWBK GB 2L IBAN: GB90 NWBK 6030 0636 0297 69							
Please supply the following information:								
Amount: £ BACS/CHAPS Reference*:								
* When making an electronic transfer please instruct your bankers to quote the CAA Application Form number followed by the application date in the description field (i.e. SRG 2157ddmmyyyy).								
Payer: Date of Tran	sfer:							
d) Card Details (for payment by Credit/Debit Card)								
Card number: Security Code (last 3 digits on si	gnature strip on reverse of card)							
Start date: /	Amount: £							
Name (as written on card): (BLOCK CAPS)								
Full postal address of card holder:								
	Postcode:							
Card holder's signature:								
Please tick box if paying with Company Card Company Name:								

This information is provided at the applicant's risk and will be used by the CAA for this payment only and will not be used for any other purpose.

Form SRG 2157 Issue 01 Page 7 of 7

Application for Issue and Renewal of Additional Ratings in Accordance with Part-FCL (not including class, type rating or night rating) – GUIDANCE NOTES

GUIDANCE NOTE 1 and Submission Instructions

Having a clear application form and pilots' log (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.

Please send your completed application and supporting documentation (see Guidance Notes) to the following address:

Licensing & Training Standards - Licensing Department Civil Aviation Authority Aviation House, Gatwick Airport South West Sussex, RH6 0YR United Kingdom

GUIDANCE NOTE 2: Important Information

Please note the following important information for all applications.

Application for the issue of an Instructor Certificate to a JAR-FCL licence will be issued in accordance with Part-FCL after the 17th September 2012. For National Licences (except NPPL) aircraft types specified as EASA aircraft can only be endorsed onto a Part FCL Licence after 17th September 2012.

European Commission Regulation (EU) No. 1178/2011 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.

In order to exercise the privileges of a Pilot licence were 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 returned.

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.

GUIDANCE NOTE 3: Certifiers of Documentation

The following people can act as 'certifiers':

Head of Approved Training Organisation.

Instructions for the certifier of your documentation 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 4: Which sections of the application form to complete					
Application	Sections to be completed				
Aerobatic Rating	1, 2, 3, 4, 5, 6, 7*, 9				
Towing Rating (Banner/Sailplane)	1, 2, 3, 4, 5, 6, 7*, 9				
Flight Test	1, 2, 3, 4, 5, 6, 7*, 9				
Mountain Rating	1, 2, 3, 4, 5, 6, 7*, 8, 9				

^{*} Optional

GUIDANCE NOTE 4: Supporting documentation required with the application							
Application	Certified copy of the applicants Certificate of Revalidation page from licence. (see guidance note 3)	Original pilots' flying log(s).	Certified copy of Part-FCL Examiner's Approval certificate and licence (if Examiner is not approved by the UK CAA) (see guidance note 3)	Competent Authorities copy of the Mountain Rating Skill Test and Proficiency Check Report Form	Certified copy of Part-ORA Approved Training Organisations (ATO) Approval certificate (if ATO is not approved by the UK CAA) (see guidance note 3)		
Aerobatic Rating	✓	✓	N/A	N/A	✓		
Banner Towing Rating	✓	✓	N/A	N/A	✓		
Sailplane Towing Rating	✓	✓	N/A	N/A	✓		
Flight Test Rating	✓	✓	N/A	N/A	✓		
Mountain Rating	✓	✓	✓	✓	✓		
Renewal of Mountain Rating	✓	N/A	✓	✓	✓		