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|  | FORM FORM-M-PEL 003-3**August, 2019** |

**APPLICATION FORM FOR ISSUE OR RENEWAL OF COMMERCIAL PILOT LICENCE (BALLOONS)**

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| **Application Type (Please tick the appropriate box)** |
| I am applying for; Commercial Pilot Licence  |
| **☐** Initial Issue  |
| **☐** Renewal Licence No:  |
| **☐** Conversion Foreign Licence No: Issuing State: |

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| **Applicant details:** |
| Name (as it appears on ID/Passport): |
| Date of Birth:  | Age (Min.18): |
| Gender: ☐ Male ☐ Female  | Postal Address: |
| Email address: |
| ID/Passport No: | Nationality: |
| Licence held | Phone Number: |
| **Medical Certificate Details:** |
| **Class of Medical:** | **Date of Medical:** | **Expiry date:** | **Name of AME:** |
|  |  |  |  |
| **Technical Experience**  | **PEL Inspector** |
| **For Initial Issue:**  | **Standard** | **Actual**  | **S** | **N/S** | **N/A** |
| Total Flight Time  | 35 hours |  |  |  |  |
| **For Gas Balloon: The Training Hours should be:** |  |  |  |  |  |
| PIC flight time  | 10 hours |  |  |  |  |
| Flights involving a controlled ascent to five thousand feet (5000ft) above the launch site | 2 flights |  |  |  |  |
| **For a balloon with an airborne heater** |  |  |  |  |  |
| Flights of 2 hours each in the appropriate areas of operation within 60 days prior to application for the rating; | 2 training flights |  |  |  |  |
| PIC flight time  | 10 hours |  |  |  |  |
| Flights involving a controlled ascent to five thousand feet (5000ft) above the launch site | 2 flights |  |  |  |  |
| **Credit towards 35 h of flight time for a pilot licensed in another category** |
| Flight time as pilot-in-command in a category other than balloons | 10 hours |  |
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| **For Renewal:** | **Standard** | **Actual** | **S** | **N/S** |
| Total Flight Time |  |  |  |  |
| PIC or co-pilot hours within the last 6 months preceding the date of application for renewal | 3 |  |  |  |
| Number of launches and landings | 3 |  |  |  |
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| **Attachments: Tick only if you have attached;** |
| **☐ For Initial Issue:** | **☐ For Renewal:** |
| ☐ A copy of Medical certificate  | ☐ A copy of Medical certificate  |
| ☐ Two Passport size photos (3cm\*2.5cm)  | ☐ Copies of the last 2 pages of the logbook  |
| ☐ A copy of ID/Passport  |  |
| ☐ Copies of the last 2 pages of the logbook  |  |
|  |
| **☐** **For Conversion:** |
| ☐ A copy of Kenyan Medical certificate  | ☐ A copy of ID/Passport  |
| ☐ A copy of Foreign Medical certificate  | ☐ Copies of the last 2 pages of the logbook  |
| ☐ Two Passport size photos (3cm\*2.5cm)  | ☐ A copy of the foreign licence  |
|  |
| **Declaration**: |
| I declare to the best of my knowledge and belief, that the information given in this application and attachments are complete and correct. |
| Signature: Date:  |
| **For Official Use Only:** |
| Fees: Receipt No.:  |
| Date: **☐ HQ ☐ WAP ☐ MSA** |
| PEL Inspector’s Name: Signature: |

**Note: S- Satisfactory, N/S- Unsatisfactory, N/A- Not Applicable**