



FORM

FORM-M-PEL 017-2

August 2019

APPLICATION FORM FOR BOOKING COMMERCIAL PILOT LICENCE GENERAL FLIGHT TEST

Application Type (Please tick the appropriate box);		
I am applying for GFT for		
<input type="checkbox"/> Aeroplanes	<input type="checkbox"/> Helicopters	<input type="checkbox"/> Balloons

Applicant details:			
Name (as it appears on ID/Passport):			
Date of Birth:		Age:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		Phone Number:	
Postal Address:			
Email address:			
ID/Passport No:		Nationality:	
Other Licence already held:			
ATO/Company:			
Medical Certificate Details:			
Class of Medical:	Date of Medical:	Expiry date:	Name of AME (Doctor):

Aeronautical Experience	PEL Inspector				
For Initial Issue for CPL(A):	Standard	Actual	S	N/S	N/A
Total Flight Time	200 hours				
Synthetic flight trainer hours	10 hours				
Solo PIC flight time	100 hours				
Solo cross-country flight time	20 hours				
One cross-country flight (300nm)	1 flight				
Full-stop landings at different aerodromes	2				
Date of this flight:					

Instrument Instruction time	10 hours				
Instrument time in the synthetic flight trainer;	< 5 hours				
Night flight time;	5 hours				
Number of Take offs and landings as PIC	5				
For Initial Issue of CPL(H):	Standard	Actual	S	N/S	N/A
Total Flight Time	150 hours				
Total Flight Time if from an ATO	100 hours				
Synthetic flight trainer hours	10 hours				
PIC flight time	35 hours				
PIC cross-country flight time	10 hours				
Number of cross-country flights (300nm)	1 flight				
Full-stop landings at different aerodromes	2				
Date of this flight:					
Instrument Instruction time	10 hours				
Instrument ground time;	< 5 hours				
Night flight time;	5 hours				
Number of take offs & landings as PIC	5				
For Initial Issue CPL(B):	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				
Flights of 2 hours each in the appropriate areas of operation within 60 days prior to application for the rating	2 training 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				
Examinations:	Date of Exam	Expiry date			
CPL Knowledge test					

Attachments: Tick only if you have attached;	
<input type="checkbox"/> Copies of relevant pages of logbook	
<input type="checkbox"/> Copy of the knowledge test results slip (For a re-take)	
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:

Instructor:	
I certify that this applicant is well prepared and ready to sit for the flight test.	
Stamp of ATO:	
Name of Instructor:	
Signature:	Date:

For Official Use Only:	
Fees:	Receipt No.:
Date:	<input type="checkbox"/> HQ <input type="checkbox"/> WAP <input type="checkbox"/> MSA
PEL Inspector's Name:	Signature:

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