This application form can only be used to apply for a national PPL licence under the UK ANO. To apply for a UK Part-FCL PPL, LAPL or an FRTOL, please use online application <a href="SRG1105">SRG1105</a>. Please note this form has not been updated so some references will not be applicable to your application.

## **Application for Private Pilot Licence (Aeroplanes) under UK ANO 2016/765.**



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 the technical sections of this form.							
A licence will not be issued to any person unless their medical records supporting their Part-MED medical certificate are held by an Aeromedical Centre located in the United Kingdom. European Commission Regulation (EU) No. 1178/2011as amended, requires that an ndividual 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 256 of the Air Navigation Order 2016 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.							
I. APPLICANT DETAILS (The Applicant is responsible for payment of CAA charges)  To be completed by the Applicant							
CAA Personal reference number (if known):  Title: Forename: Surname:							
2. ADDRESS FOR CORRESPONDENCE (if different from above)  To be completed by the Applicant							
Postal Address:  Postcode:							
3. MEDICAL FITNESS To be completed 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.							

4.	4. PARTICULARS OF UK OR NON-UK LICENCES HELD  To be completed by the Applicant					y the Applicant			
Issuing Authority		Type/Class of Licence			Licenc	e No.	Expiry Date		
5.	RATINGS HELD						To be FUI	LY completed b	y the Applicant
	Please give the date and/or class rating,							tion by Experienc	e for <b>each</b> type
Ri	ating or Certificate held	Single P (SP) or M Pilot (M	ulti- l	Date of Test	Date of IR Test (if applicable)	Expiry Date of Rating	Examiners Licer Na	nce Number and ime	CAA Use Only
6.	APPLICATION (tid	k as appro	pria	te)			То	be completed b	y the Applicant
	I am applying for a	a:							
	PPL	LAPL		UK F	RTOL				
	PPL Aeroplane:								
	Single-engine pistor	n (Land)	Г	Single	-engine piston	(Sea)	TMG		
	Multi-engine piston		F	- -	engine piston (		_	_	
	LAPL Aeroplane:	,			<i>3</i> , ,	· / <del>-</del>			
		n (Land)	Г	7 Single	-engine niston	(Sea)			
	Single-engine piston (Land) Single-engine piston (Sea)						chargo		
	Note: Any additional rating applied for, other than those mandatory for licence issue, will incur an additional charge.								
7.	7. THEORETICAL KNOWLEDGE TRAINING AND EXAMINATIONS  To be completed by the Applicant								
I ar	I am applying for a credit in respect of theoretical knowledge training because:								
I ar	n applying for a cred	it in respe	ct of t	theoretical knowl	edge examinat	ions because:			

7. THEORETICAL KNOWLEDGE TRAINING AND EXAMINATIONS (continued)							
To be complete	d by the approve	ed training provid	ler for PPL The	oretical Knowledge	training		
				dge examinations.	has satisfa	ctorily complete	d a course of
Name of Approve	ed Training Provide	r:			ATO Approval No:		
Competent Author	ority issuing Appro	val:					
Name of Head of	of Training:						
Signature of Head	d of Training:				Date:		
To be complete different ground	ed by ground exa nd examiner).	aminer who has o	conducted the t	heoretical knowled	lge examinations	. (one to be co	mpleted per
	•				has satisfa	ctorily passed tl	ne PPL
theoretical know	vledge examinatio	ns.					Γ
Examination Paper	Exam Date	Paper No.	Mark (%)	Examination Paper	Exam Date	Paper No.	Mark (%)
Air Law				Operational Procedures			
Human Performance				Flight Planning & Performance			
Meteorology				Aircraft General Knowledge			
Navigation				Communications			
Principles of Flight							l
Name of ground	d examiner:						
Ground examine	r certificate numbe	r:			Expiry date:		
Competent Author (if applicable)	ority issuing certific	cate:					
Name of Approve	ed Training Provide	r:					
Approval number	r:						
0 a ELVING EV	DEDIENCE DDI	AEDODI ANES			Tob	a commissed by	the Annlicent
IMPORTANT N Any flight entrie Dual will only be Please see guid	8.a. FLYING EXPERIENCE - PPL AEROPLANES  IMPORTANT NOTE:  Any flight entries recorded within a pilot log, for the same flight as Pilot in Command and Dual will only be countable as Dual flight for licensing purposes.  Please see guidance in CAP 804, in relation to the logging of flight experience in						
accordance with Supervised Solo						10	
Solo cross-coun						5	
		no less than 270kr ent from the aero			e. Date:		1
landings at two aerodromes different from the aerodrome of departure have been made.  Date:							
Credit for PIC ex	perience in aircra	ft				10 (max)	
Experience in simulator (Identification no. of FTD 2/3, FNPT I/II/III or flight simulator used which is printed on the Qualifications Certificate issued in accordance with Commission Regulation (EU) 1178/2011).							

**Total Hours** 

8.b FLYING EXPERIENCE - LAPL AEROPLANES	To be	completed by	the Applicant
IMPORTANT NOTE: Any flight entries recorded within a pilot log, for the same flight as Pilot in Command and	Hours	Qualifying	
Dual will only be countable as Dual flight for licensing purposes.  Please see guidance in CAP 804, in relation to the logging of flight experience in	claimed	Qualifying hours	CAA use only
accordance with Part-FCL.			
Supervised Solo Flight time		6	
Solo cross-country flight time		3	
Date of solo cross-country flight of at least 270km/150NM during which one full stop landing at an aerodrome different from the aerodrome of departure shall be made.	Date:		
Dual instruction		15	
Date of pre-entry flight test (if applicable)	Date:		
Credit for PIC experience in aircraft after ATO assessment (if applicable)	Hrs:	10 (max)	
Total Hours		30	
0 ATO CERTIFICATION/RECISTERED FACILITY /Tiels on appropriate)		To be commiss	and by the ATO
9. ATO CERTIFICATION/REGISTERED FACILITY (Tick as appropriate)			ed by the ATO
I certify that (name)	eted a course of f	flying training fo	or the grant of
a Private Pilot's Licence a Light Aircraft Pilots Licence.			
I further certify that I have examined the applicants flying log and the entries in them me the grant of a Licence in accordance with Part-FCL, CAP804 and section's 8a or 8b of this	•	-	quirements for
The applicant has attended a reduced course of training on the basis of:			
Date course started:			
Recommended for Skill Test by (name block capitals):	Liceno	ce No:	
Approved Training Organisation (ATO):	. ATO Approval	No:	
Competent Authority issuing Approval:			
Name of Head of Training:			
Signature (Head of Training):	Date	e:	
10. CONFIRMATION OF SKILL TEST			
To be completed by the holder of an examiner cert	ificate issued in	accordance w	ith PART-FCL
I certify that (name)	has satisf	factorily comple	atad a Skill Tost
for the grant of a Private Pilots Licence or Light Aircraft Pilots Licence in acco			
applicants flying log and application form and can confirm that they meet in full the requirem			
accordance with Part-FCL.  PPL Skill Test Pass Date: LAPL Skill Tes	h. Docc	date:	
Aircraft Type and Registration:			
	xaminers Numbe		
Authorising Competent Authority:			
Signature (Examiner):		Date:	
Note - Examiners are reminded that they must complete the Examiner's Report Form and Standards, within 14 working days from the skill test.  Applicants are advised that the licence will not be issued until the corresponding Examine.		_	raining

II. UK FLIGHT RADIOTELEPHONY OF	To be completed by the UK 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						
The above examinations were comple  NOTE: Form SRG1199 must be comple					(Test location)	
12. DECLARATION OF APPLICANT (					d by the Applicant	
I have not held any personnel licence issued in another member State;	e, certificate, ra	ting, authori	isation or attest	cation with the same scope and in t	he same category	
I have not applied for any personnel category in another member State; a		ate, rating, a	authorisation or	attestation with the same scope a	nd in the same	
I have never held any personnel licer issued in another member State whi					the same category	
I understand that any incorrect informauthorisation or attestation.	mation could di	squalify me	from being grar	nted a personnel licence, certificate	, rating,	
I have reviewed all Guidance Notes a	and have submi	tted all the i	necessary pape	rwork for my application to be con-	sidered.	
I agree to receive:						
Flight Crew Safety material from the	CAA only		or			
Safety material from authorised sour	ces					
I have fully reviewed all Guidance Notes and have submitted all of the necessary paperwork for my application to be considered.						
Signature of Applicant:				Date:		
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.						
If you wish to opt out of document	t return by sec	ure courier	, please tick bo	ox.		
Please note: The CAA is not liable for damage to products received by you product(s). You must also return the reimburse the cost of postage. The C financial loss. Such claims will be limi	must be notified damaged produ CAA will assist y	ed in writing uct(s) to the ou with you	to the CAA no CAA no later the r claim from the	later than 24 hours from the time nan one week from the receipt and e Secure Courier Service provider t	of signing for the in return, we will o recover your	

Re	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.							
То	Total charges included are: £							
W	here charges are to be paid other than by the applicant, please enter the name of the person/company who is paying:							
 IM	PORTANT NOTES:							
•	<b>Additional Charges:</b> 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.							
•	<b>Overseas Visits:</b> 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 <a href="https://www.caa.co.uk/refunds">www.caa.co.uk/refunds</a> 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.							
16.	FINANCIAL DECLARATION							
	I hereby declare that to the best of my knowledge the particulars entered on this application are accurate.							
	I enclose 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:

### 17. SUBMISSION INSTRUCTIONS

**15. CHARGES** 

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

Signature of Applicant: \_\_\_\_\_\_

Licensing and Training Standards, Licensing Department Aviation House Gatwick Airport South West Sussex RH6 0YR Date: .....

CAA USE ONLY	Applicant's name		Date of applic	ation
Department:		Contact Name:		
Job No:	Folio No:	CAA Account Number:.		
Nominal Code:	Cost Centre:	Date	received	
If payment is received by	cheque, attach a copy to this app	plication form.		
The sum of £	has been received by:		Date:	
Amount paid by:	Cheque Casl	h Ca	ard E	Electronic Transfer*
£	£	£	£	
* Receipt of Electronic Tra	ansfer to be verified by Treasury.			
Cheque drawn against acco	ount of:			
Bank Account No:		Sort Code:		
Is this part of a Company				
Amount to be deducted from	om NATS account: £			
Enclosures:	FedEx paid Y	es/No Loaded by:	Signed/Des	spatched:
Legal Entity Details				
Company – Date of incorp	poration of Company:			
If declaration is signed on	behalf of a Company:			
is declaration signed by	a Director or Company Secretary	/?		
if not, then does signate	ory have authority to sign?			
Individual – Identification	n Document Details e.g. Passport	t/Driving Licence.		
Type of identification:				
Signature on ID checked a	against Form Signature: .	Appropriately certif	fied:	

# Aeroplane - Application for Part-FCL Private Pilot Licence and Light Aircraft 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 1: Which sections of the application form to complete			
Application applied for	Sections to be fully completed		
Part-FCL PPL (A) without FRTOL	1, 2, 3, 4, 5, 6, 7, 8(a), 9, 10, 12, 14, 15, 16		
Part-FCL PPL (A) with FRTOL	1, 2, 3, 4, 5, 6, 7, 8(a), 9, 10, 11, 12, 14, 15, 16		
Part-FCL LAPL (A) without FRTOL	1, 2, 3, 4, 5, 6, 7, 8(b), 9, 10, 12, 14, 15, 16		
Part-FCL LAPL (A) with FRTOL	1, 2, 3, 4, 5, 6, 7, 8(b), 9, 10, 11, 12, 14, 15, 16		
Part –FCL PPL(A) upgrade from Part-FCL LAPL	1, 2, 3, 4, 5, 6, 7, 8(a), 9, 10, 11, 12, 14, 15, 16		
Part-FCL LAPL(A) on basis of UK military credit	1, 2, 3, 4, 5, 6, 7, 8(b), 9, 10, 11, 12, 14, 15, 16		
Part-FCL PPL(A) on basis of credit from third country ISAO licence or UK military	1, 2, 3, 4, 5, 6, 7, 8(b), 9, 10, 11, 12, 14, 15, 16		

		-	h the applic	1			
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(A) or LAPL Medical for LAPL(A)	Examiners Report form (applicants or copy for Competent Authority) EXAMINER'S COPY	Original third country ICAO Licence and Medical or certified copy by ATO (if applicable). See guidance note (i).	Copy of Part-FCL Examiner's Approval certificate and licence (if Examiner is not approved by the UK CAA) See guidance note (i).	Copy of Part-ORA Approved Training Organisations (ATO) Approval certificate (if ATO is not approved by the UK CAA) See guidance note 1.
PPL (A)	✓	✓	✓	✓		✓	✓
LAPL(A)	✓	✓	✓	✓		✓	✓
ICAO Conversion PPL(A)	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>	<b>√</b>

<sup>(</sup>i) Applicants applying on the basis of a credit from holding a current, valid, third country licence will also need to meet the third-country verification requirement and submit application form SRG2142.

<sup>(</sup>ii Applicants applying on the basis of the Military Accreditation Scheme will also need to submit fully completed military credit scheme form SRG2133 along with copies of the military logbook certified by the commanding officer or Head of Training.

### **Payment Authorisation**

This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink



. APPLICANT DETAILS (The Applicant is the pers	son responsible for payment of CAA charges)					
	Dated:					
	or, Application form number (i.e SRGxxxx)					
, ,	ole)					
Contact Telephone Number:						
2. PAYMENT DETAILS  a) Payment type (please tick your chosen n	sothed of payment)					
Visa Mastercard Debit Card  The maximum single transaction using a Visa/Mas We do not accept American Express, Diners Club Gatwick. Please do not send cash by post.	Cheque/Banker's Draft Bank Transfer Cash (max.£1000)  Stercard or Debit Card is limited to £25,000.  or JCB cards. <b>Cash payments</b> will only be accepted in person at Aviation House,					
Cheques shall be made payable to 'Civil Aviation cheque.	Authority'. Please write the CAA Application Form No. on the reverse of your					
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/ASN Reference*:						
number followed by the application date (i.e. SRG Submission Number (ASN) (i.e. CAI-123).	* When making a bank transfer please instruct your bankers to quote, i) in relation to an offline application, the CAA Application Form number followed by the application date (i.e. SRGXXXX ddmmyyyyy) or ii) in relation to an online application, the Automatic Submission Number (ASN) (i.e. CAI-123).  Payer:					
b) Card Details (for payment by Credit/Debit						
Card number:						
Expiry date: // / Security C	ode (last 3 digits on signature strip on reverse of card)					
Debit cards only: Start date: / (if applicable)	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:					

Do not send credit card details by email. If sending this form electronically, please leave this section blank and we will call you to confirm your card details at the time.