

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 [SRG1105](#). Please note this form has not been updated so some references will not be applicable to your application.

Helicopter - Application for Private Pilot Licence (Helicopters) 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.

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 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.

1. 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:

Date of birth (dd/mm/yyyy): Nationality:

Town of birth: Country of birth:

Permanent Address:

Postcode:

Telephone: Mobile telephone:

E-mail:

A certified copy of your valid Passport or Full UK Photographic Driving Licence (see Guidance Note 1) must accompany your application as proof of identification.

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. If your Medical Certificate is due to expire within 14 days after the date of application for licence issue, please complete the following

My medical examination will take place at: on:

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 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).

4. PARTICULARS OF UK OR NON-UK LICENCES HELD			To be completed by the Applicant
Issuing Authority	Type/Class of Licence	Licence No.	Expiry Date

5. RATINGS HELD						To be FULLY completed by the 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.						
Rating or Certificate held	Single Pilot (SP) or Multi-Pilot (MP)	Date of Test	Date of IR Test (if applicable)	Expiry Date of Rating	Examiners Licence Number and Name	CAA Use Only

6. APPLICATION (tick as appropriate)			To be completed by the Applicant
I am applying for Helicopter:			
PPL	LAPL	UK FRTOL	
PPL Helicopter:			
Single-Engine Piston	(please specify type).....		
Single-Engine Turbine	(please specify type).....		
Multi-Engine Turbine	(please specify type).....		
LAPL Helicopter:			
Single-Engine Piston	(please specify type).....		
Note: Any additional rating applied for, other than those mandatory for licence issue, will incur an additional charge.			

7a. FLYING EXPERIENCE – PPL HELICOPTER		To be completed by the Applicant	
	Hours Claimed	Qualifying Hours	CAA use only
Supervised Solo flight time		10	
Solo Cross-Country flight time		5	
Date of solo cross-country flight no less than 185km/100NM during which full stop landings at two aerodromes different from the aerodrome of departure have been made	Date:		
Dual instruction		25	
Credit for PIC experience in aircraft		6 (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).	No.....	5 (max)	
Total Hours		45	

7b. FLYING EXPERIENCE – LAPL HELICOPTER		To be completed by the Applicant	
	Hours Claimed	Qualifying Hours	CAA use only
Supervised Solo flight time		10	
Solo Cross-Country flight time		5	
Date of solo cross-country flight no less than 150km/80NM during which full stop landings at one aerodrome different from the aerodrome of departure have been made	Date:		
Date of pre-entry flight test (if applicable)	Date:		
Credit for PIC experience in aircraft after ATO assessment (if applicable)			
Dual Instruction		20	
Total Hours		40	

CAA use only

8. ATO CERTIFICATION/REGISTERED FACILITY (Tick as appropriate) To be completed by the ATO

I certify that (name)..... has satisfactorily completed a course of training for the grant of a Private Pilot's Licence or Light Aircraft Pilot Licence

I further certify that I have examined the applicants flying log and the entries in them meet in full the flying experience requirements for the grant of a Private Pilot's Licence or Light Aircraft Pilot Licence in accordance with Part-FCL, CAP804 and sections 7a or 7b of this application form.

Recommended for Skill Test by (name):..... Licence No:.....

Approved Training Organisation (ATO):..... ATO Approval No:.....

Competent Authority issuing Approval:

Name of Head of Training:.....

Signature (Head of Training): Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

9. THEORETICAL KNOWLEDGE EXAMINATIONS To be completed by the ATO (Ground Examiner)

Examination Paper	Exam Date	Paper No.	Mark (%)	Examination Paper	Exam Date	Paper No.	Mark (%)
Air Law				Operational Procedures Helicopter			
Human Performance				Flight Performance and Planning Helicopter			
Meteorology				Aircraft General Knowledge Helicopter			
Communications				Navigation Helicopter			
Principles of Flight Helicopter							

I certify that (name)..... has satisfactorily completed all of the required theoretical examinations for the grant of a Private Pilot's Licence or Light Aircraft Pilot Licence in accordance with Part-FCL.

Approved Training Organisation (ATO):..... ATO Approval No:

Competent Authority issuing Approval:

Name of Head of Training's name or Ground Examiner:

Ground Examiner Approval Number:

Signature (Head of Training): Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

10. CONFIRMATION OF SKILLS TEST

To be completed by the holder of an examiner certificate issued in accordance with PART-FCL

I certify that (name)..... has satisfactorily completed a Skills Test for the grant of a Private Pilot's Licence or Light Aircraft Pilot Licence in accordance with FCL.1030 I have examined the applicants flying log and application form and can confirm that meet in full the requirements for the grant of Licence in accordance with Part-FCL.

PPL Skill Test Pass Date:

LAPL Skill Test Pass Date:

Aircraft Type and Registration:

Examiner's Name: Examiners Number:

Authorising Competent Authority: Date of Examiners Briefing (if applicable):

Signature (Examiner): Date:

Note - Examiners are reminded that they must complete the Examiner's Report Form and submit this to Licensing and Training Standards, within 14 working days from the skill test.

Applicants are advised that the licence will not be issued until the corresponding Examiner's Report Form is received.

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

11. UK FLIGHT RADIOTELEPHONY OPERATOR'S LICENCE (FRTOL) 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					
D) ICAO English Language Proficiency	Date	Level	Pass	Examiner's name & signature	Examiner's CAA reference number
		6	Yes <input type="checkbox"/> No <input type="checkbox"/>		

The above examinations were completed at (Test location)

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

12. 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 considered.

Signature of Applicant: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

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 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.

15. 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.

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:

Signature of Applicant: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1

17. SUBMISSION INSTRUCTIONS (See Guidance Notes)

After thoroughly reviewing the 'Which sections of the application form to complete' and 'What documents to submit' please send your completed application and supporting documentation 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 application

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 application form.

The sum of £ has been received by: Date:

Amount paid by: Cheque Cash Card Electronic Transfer*
 £ £ £ £

* Receipt of Electronic Transfer to be verified by Treasury.

Cheque drawn against account of:

Bank Account No: Sort Code:

Is this part of a Company payment? Yes No If Yes - Total amount paid:£

Amount to be deducted from NATS account: £

Enclosures: FedEx paid Yes/No Loaded by: Signed/Despatched:

Legal Entity Details

Company – Date of incorporation of Company:

If declaration is signed on behalf of a Company:

is declaration signed by a Director or Company Secretary?

if not, then does signatory have authority to sign?

Individual – Identification Document Details e.g. Passport/Driving Licence.

Type of identification:

Signature on ID checked against Form Signature: . Appropriately certified:

PLEASE ENTER PAYMENT DETAILS ON FOLLOWING PAGE

18. PAYMENT DETAILS**a) Payment type** (please tick your chosen method of payment).

Visa	Mastercard	Debit Card	Cheque/Banker's Draft	Electronic Transfer	Cash (max. £200)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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 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 1105Hddmmyyy).

Payer: Date of Transfer:

d) Card Details (for payment by Credit/Debit Card)

Card number:

Expiry date: / Security Code (last 3 digits on signature strip on reverse of card)

Debit cards only:

Start date: /

Issue No: (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:

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.

Helicopter - 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 (H) without FRTOL	1, 2, 3, 4, 5, 6, 7(a), 8, 9, 10, 12
Part-FCL PPL (H) with FRTOL	1, 2, 3, 4, 5, 6, 7(a), 8, 9, 10, 11, 12
Part-FCL LAPL (H) without FRTOL	1, 2, 3, 4, 5, 6, 7(b), 8, 9, 10, 12
Part-FCL LAPL (H) with FRTOL	1, 2, 3, 4, 5, 6, 7(b), 8, 9, 10, 11, 12

GUIDANCE NOTE 2: Supporting documentation required with the application								
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(H) or LAPL Medical for LAPL(H)	Examiners Report form (applicants or copy for Competent Authority) EXAMINER'S COPY	Original Qualifying Cross-Country Certificate	Original third country ICAO Licence and Medical or certified copy by ATO (if applicable). See guidance note 1.	Copy of Part-FCL Examiner's Approval certificate and licence (if Examiner is not approved by the UK CAA) See guidance note 1.	Copy of Part-ORA Approved Training Organisations (ATO) Approval certificate (if ATO is not approved by the UK CAA) See guidance note 1.
PPL (H)	✓	✓	✓	✓	✓		✓	✓
LAPL(H)	✓	✓	✓	✓	✓		✓	✓
ICAO Conversion PPL(H)	✓	✓	✓	✓	✓	✓	✓	✓