**IMPORTANT**

Before completing this form, its contents should be read carefully. Completed applications should be sent to the Civil Aviation Authority of Fiji, Private Mail Bag (NAP 0354), Nadi Airport, Fiji, together with the documents required and personal Flying Log Book. Your attention is drawn to the provisions of the Air Navigation Regulations in respect of Regulation 128 *Forgery, etc., of documents,* of the Air Navigation Regulations.

|  |  |
| --- | --- |
| **SECTION 1** | **PERSONAL PARTICULARS OF APPLICANT (in BLOCK CAPITALS please)** |

|  |
| --- |
| Full Name (Surname first) |
| Flying Training Permit/Validation Number |
| Personal Residential or Postal Address |
| and contact number |
| Personal E-mail |
| Operator/ Training Institute |

|  |  |
| --- | --- |
| **SECTION 2** | **APPLICATION** |

I hereby apply to convert my foreign helicopter  FIJI PPL(H)FIJI CPL(H)

licence to FIJI ATPL(H)

Evidence of the following is also attached in support of this application:

# Medical Fitness

a current class 1 or 2 (for PPL) medical examination conducted by a CAAF approved DME (including audiogram, electro-cardiogram and any other test deemed necessary by the medical examiner)

# Knowledge

a pass in the Fiji Air Law Examination

Produce evidence of language proficiency assessment level minimum 4 and above.

Hold a valid Foreign Licence & Medical Validation issued by the PEL Office

hold a current **PPL(H) or CPL(H) or ATPL(H)** issued by an ICAO contracting State.

**Fees** (Refer to Civil Aviation (Fees and Charges) Regulation)

Conversion Flight Test Fee  Licence Issue Fee

**Photograph**

2 passport size colour photographs (signed and dated on the back)

**Proof of Identification**

Passport, or  Birth Certificate together with Photo ID

**Police Clearance**

Police Clearance

# Consent

I consent to CAAF obtaining confirmation about the authenticity of my foreign pilot licence from the relevant issuing Authority

**ALLOW 5 WORKING DAYS FROM RECEIPT DATE OF THIS APPLICATION AS PER CAAF SERVICE CHARTER**

|  |  |
| --- | --- |
| **SECTION 3** | **FIT AND PROPER PERSON** |

**THE INFORMATION SOLICITED HEREUNDER IS REQUIRED PURSUANT TO ANR REGULATION 53 (2) OF THE AIR NAVIGATION REGULATIONS 1981 WHICH PROVIDES FOR THE REQUIREMENT FOR FIT AND PROPER PERSON.**

1. Have you previously had an application for an Aviation Document rejected or have you been the holder of an aviation document which has been suspended or revoked (other than a licence that has been superseded by a replacement or a higher licence?

1. Have you been convicted on any criminal charge or are you presently facing charges for a transport safety offence?

1. Have you been convicted on any criminal charge or are you presently facing charges for a criminal offence?

1. Have you any history of physical or mental health or serious behavioural problems?

If answering “YES” to questions b, c or d above, please provide details on separate sheets enclosed in a sealed envelope marked ***“Confidential, Chief Executive, Civil Aviation Authority of Fiji, include name, client No (if known), organisation name***, and attach to this application.

|  |
| --- |
| Note: The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 17A(5)(b) of the Civil Aviation Authority Act 1979 and Regulation 128 of the Air Navigation Regulations 1981 and the applicant is subject to prosecution as well as the revocation, suspension or cancellation of their aviation document or in the event of initial issue, the rejection of the application. |

I hereby certify that to the best of my knowledge and belief the statements made and the information supplied on this form is true and correct and that the enclosed copies of my personal documents are authentic and that information shown on them is true and correct.

I hereby consent to the Civil Aviation Authority of Fiji obtaining confirmation about the authenticity of my foreign pilot licence from the relevant issuing Authority.

I hereby authorise the Civil Aviation Authority of Fiji to use the information concerning me on this form or attached hereto for any purpose as required or authorised by Law and I authorise such information to be disclosed by the CAAF to any person who requires such information to carry out any function as lawfully directed by the CAAF. I consent to the disclosure by any court of law of any details of any convictions I may have pursuant to this application, to the Chief Executive, Civil Aviation Authority of Fiji.

Signature of Applicant  Date: Click or tap to enter a date.

|  |  |
| --- | --- |
| **SECTION 4** | **DETAILS OF PRINCIPAL FOREIGN PILOTS LICENCE HELD (IN BLOCK CAPITALS PLEASE)** |

|  |  |  |  |
| --- | --- | --- | --- |
| State of issue: |  | Date of issue: | Click or tap to enter a date. |
| Type of licence and number: |  | Date of expiry of Licence | Click or tap to enter a date. |
| Date and place of last medical examination: | | Date: Click or tap to enter a date. | |
| Date of expiry of medical (Class 1 or 2): Click or tap to enter a date. | | | |
| Details of any endorsements/limitations: | | | |
| **Details of other licences held (if any)** | | | |

**FOR OFFICIAL USE ONLY**

|  |  |  |
| --- | --- | --- |
|  |  | **Calculation** |
| **Fee** |  |  |
| Part: |  |  |
| Item: |  |  |
| Time: From |  |  |
| To |  |  |
| Travel: From |  |  |
| To |  |  |
| Transport |  |  |
| Accommodation |  |  |
| Overhead |  |  |
| Receipt No. |  |  |
| Date : Click or tap to enter a date. | | |

|  |
| --- |
| Examiner authority checked |
|  |
| ACCEPT |
|  |
|  |
| REJECT because |
|  |
|  |
| Signature: |
|  |
| Date: Click or tap to enter a date. |

|  |  |  |
| --- | --- | --- |
| **SECTION 5** |  | **CERTIFICATE OF TEST FOR CONVERSION OF A FOREIGN LICENCE TO A FIJI LICENCE (HELICOPTERS)** |

|  |  |  |
| --- | --- | --- |
| Surname: | First Names: | Location: |
|  | | |
| Helicopter:  Type: | Registration: | Flight Time: |

I, being a person duly authorised in writing by the Civil Aviation Authority of Fiji to conduct Foreign Licence conversion, hereby certify that I have flown in a Helicopter with       at the controls and that the applicant carried out satisfactorily\* and unassisted, under the conditions stated, the manoeuvres and drills against which my signature appears below:

\*See Note 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PHASE 1** | |  | **VISUAL TEST CONTINUED** | |
| 1. A/C Documentation |  |  | 10. 180\* autorotation **(Note 3)** |  |
| 2. A/C Performance |  |  | 11. Hovering autorotation **(Note 4)** |  |
| 3. Weight and Balance |  |  | 12. Hydraulic Failure |  |
| 4. Fuel |  |  | 13. Governor Failures |  |
| 5. Emergency Equipment |  |  | 14. Anti torque failures |  |
| 6. Weather Interpretation |  |  | 15. Confined area landings |  |
| **PHASE 2** | |  | 16. Slope operations |  |
| **PILOTING TECHNIQUE - VISUAL** | |  | 17. Shutdown checks |  |
| 1. Pre-flight inspection |  |  | 18. ATC Compliance |  |
| 2. Engine Start/Checks |  |  | 19. Airmanship |  |
| 3. Take-off and taxi |  |  |  |  |
| 4. Sideways and backwards |  |  |  |  |
| 5. Spot turns |  |  |  |  |
| 6. Normal take-off and landing |  |  |  |  |
| 7. Limited power operations |  |  |  |  |
| 8. Quick stops |  |  |  |  |
| 9. Straight in autorotation’s **(Note 3)** |  |  |  |  |

Assessment Code: ✓ = Pass × = Fail NT = Not Tested

ADDITIONAL COMMENTS:

|  |  |  |
| --- | --- | --- |
| Name of Flight Examiner (Print): | Licence: | Number: |
| Certified that this report is an accurate assessment of the test carried out | | |
| Signature:  Date: Click or tap to enter a date. | | |

|  |  |
| --- | --- |
| **SECTION 6** | **FLYING EXPERIENCE** |

I have had the following flying experience in a Helicopter as recorded in my personal Pilot’s Flying Logbook:

# 6.1 Totals

Helicopter Simulator

|  |  |  |
| --- | --- | --- |
|  | Hours | Hours |
| * Total Flight Time |  |  |
|  |  |  |
| * Co-pilot |  |  |
|  |  |  |
| * PIC under supervision |  |  |
|  |  |  |
| * Pilot in Command |  |  |

Signed:  Date:Click or tap to enter a date.

|  |  |
| --- | --- |
| Flight times Certified correct | by Training Manager/Chief Flight Instructor of |
| Name in BLOCK CAPITALS | Licence number and type |

# GENERAL NOTES

1. ‘A circuit’ is the flight path around an aerodrome at a specified height which facilitates an aircraft’s positioning from a point on the take-off path of a given runway to a point, on the approach path of the same runway, from which a landing can be made.

1. ‘Satisfactorily’ means that the applicant is in full control of the helicopter at all times, and that the successful outcome of a manoeuvre is never in doubt. ‘Unassisted’ means without verbal prompting or physical assistance with the flying controls.

1. Simulated engine failures for practice may be carried out provided the area is suitable for an autorotative landing, and that the fuel flow control will not be retarded.

1. During a hovering autorotation the fuel flow control will be retarded by the examiner.

1. Endorsement of the licence will date from the completion of these tests.

1. Only persons holding written authorisation from the Civil Aviation Authority of Fiji in respect of the helicopter used for this test may sign for the satisfactory completion of any test on this form.

1. This issue of CAAF **PL 104A** is for use in respect of **Conversion of a Foreign Licence -Helicopters**. Applications for the supply of this form should be made to the Civil Aviation Authority of Fiji, Private Mail Bag (NAP 0354), Nadi Airport, Fiji, telephone (679) 8923155.

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