# IMPORTANT

Before completing this form, the notes of page 3 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 licence. Your attention is drawn to the provisions of the Air Navigation Regulations in respect of documents, records and the personal flying logbook.

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

|  |
| --- |
| Full Name (Surname first)       |
| Licence Number       | and type of licence       |
| Address to which licence is to be returned,       |
| and telephone number       |

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

I apply for:

# [ ]  Issue of an Airline Transport Pilot’s Licence (aeroplanes)

[ ]  Inclusion of **ATR 42/72-600**Aircraft Type Rating into my Pilot’s Licence

 [ ]  Pilot

 [ ]  Co-Pilot

I certify that the information provided on this form is true to the best of my knowledge and belief. The following is also attached in support of this application.

**Airline Transport Pilot’s Licence Issue**

# Medical Fitness

 [ ]  a current class 1 medical examination conducted by a CAAF approved DME (including chest x-ray, audiogram, electro-cardiogram and any other test deemed necessary by the medical examiner)

# Knowledge

[ ]  a pass in the Fiji Air Law examination, and, **either;**

[ ]  produce evidence of having passed all written examinations required for the issue of an **Airline Transport Pilot’s Licence** by CAAF or the Civil Aviation Authorities of Australia, New Zealand or the United Kingdom. A combination of papers set by these Authorities, or papers set by any other State is not acceptable, **OR**;

[ ]  hold a current **Airline Transport Pilot’s Licence** issued by an ICAO contracting State.

# Skill

**EITHER** (for applicants **not** holding a current **Airline Transport Pilot’s Licence** issued by an ICAO contracting State)

[ ]  a pass in the **Airline Transport Pilot’s Licence** Flight Test under Section 5 of this form conducted by a CAAF authorised flight examiner, or

[ ]  a pass in the Flight Test for the Conversion of a Foreign Licence (Form OP 104E – ATR 42; OP 104O – ATR

72)

# Language Proficiency

[ ]  Produce evidence of language proficiency assessment level (if necessary, undergo assessment)

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

[ ]  Flight test fee (If test conducted by CAAF Examiner) [ ]  Licence Issue fee

**ATR 42/72-600**Aircraft Type Rating

# Knowledge

[ ]  Evidence of a pass in the CAAF approved **ATR 42/72** aeroplane type rating examination.

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

[ ]  Type rating issue fee

Signature  Date Click or tap to enter a date.

**ALLOW 3 WORKING DAYS FROM RECEIPT DATE OF THIS APPLICATION AS PER CAAF SERVICE CHARTER**

|  |
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| SECTION 3 DECLARATION OF TRAINING AND PROFICIENCY  |

This applicant has satisfactorily completed a course integrating ground and flying training on **ATR 42/72-600** aeroplane and has demonstrated a satisfactory level of proficiency to Authorised Examiners in this aeroplane for the particular purpose in each test certified overleaf (the boxed items being completed on date Click or tap to enter a date. and in the following aspects of operation :

3.1 Use of all the equipment, fitted to this aircraft, which is the responsibility of the Flight Crew.

3.2 Performance of normal, abnormal, alternate and emergency drills appropriate to the Flight Crew duties as defined in the relevant Flight and/or Company Operations Manual.

3.3 Ability to carry out, at the systems panel of the aircraft, all normal in-flight procedures.

3.4 Passed an oral examination on required knowledge for issue of an Airline Transport Pilot’s License (for ATPL issue).

Signature  Date Click or tap to enter a date.

|  |  |
| --- | --- |
| Pilot in charge of training for: FIJI Link       | Company       |
| Name (in BLOCK CAPITALS)       | Licence No. and Type       |

|  |
| --- |
| 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 4**  | **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?
2. 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 theCivil 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 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 5 CERTIFICATE OF TEST FOR AIRCRAFT TYPE RATING ON A PROFESSIONAL PILOT’S LICENCE (AEROPLANES)  |

I, being a person duly authorised in writing by the Civil Aviation Authority of Fiji to conduct such Aircraft Rating Pilot/CoPilot tests, hereby certify that I have flown in a **ATR 42/72-600** aeroplane or CAAF approved simulator 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, together with my name in BLOCK CAPITALS.

|  |  |  |  |
| --- | --- | --- | --- |
|    | Date of test | A/cReg or SimCode. | **EXAMINER** |
| Signature(name once in capitals please) | Licence No. |
| **5.1 By Day in an aeroplane in flight or in a simulator approved by the CAAF for the specified item**  |
|  5.1.1  |  Normal T/O. Visual circuit and land with no glide slope  | Click or tap to enter a date. |       |       |       |
|  5.1.2  |  Incapacitation of PF. Single pilot circuit and land.   | Click or tap to enter a date. |       |       |       |
| 5.1.3  |  T/O Engine failure after V1 and track to MI NDB and join the holding pattern  | Click or tap to enter a date. |       |       |       |
|  5.1.4  |  One engine ILS Rwy 02 and missed approach.   | Click or tap to enter a date. |       |       | QQQQQQQQQQQQQ |
|  5.1.5  |  Single engine Circuit and land. Rwy 27   | Click or tap to enter a date. |       |       |       |
|  5.1.6  |  Low visibility T/O Rwy 20. SID departure   | Click or tap to enter a date. |       |       |       |
|  5.1.7  |  TCAS event at 5000’ on climb to FL250   | Click or tap to enter a date. |       |       |       |
|  5.1.8   |  Decompression and emergency descent.  | Click or tap to enter a date. |       |       |       |
|  5.1.9  |  Approach to stall and recovery. T/O configuration flap 15 /25 bank and landing configuration U/C and 35 flaps. | Click or tap to enter a date. |       |       |       |
|  5.1.10  |  Hydraulic failure prior to VOR Approach   | Click or tap to enter a date. |       |       |       |
|  5.1.11  |  DME Arc approach for VOR to minimum and land   | Click or tap to enter a date. |       |       |       |
|  5.1.12  | Uncontrollable engine fire on T/O. Emergency evacuation  | Click or tap to enter a date. |       |       |       |
|  5.1.13  |  Rejected T/O before V1(At any time).   | Click or tap to enter a date. |       |       |       |
|  5.1.14  |  Airmanship/CRM.   | Click or tap to enter a date. |       |       |       |

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| **SECTION 6 FLYING EXPERIENCE**  |

**6.1 ATPL Issue**

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

|  |  |  |
| --- | --- | --- |
|  **Minimum Flying Experience ( )**  | **Totals** |  |
|  |  |  |
| * Total flight time in aeroplanes (1500)
 |       |  |
|  |  |  |
| * Flight time as pilot in command in aeroplanes (250)
 |       | PIC |
|  **OR** | **OR** |  |
| * 100 hrs PIC plus 150 hrs ICUS**(250)**
 |       | PIC |
|  |       | ICUS |
|  |  |  |
| * Total cross country flight time of (**200)** hrs of which not less than 100 hrs PIC or ICUS
 |       | Total |
|  |       | PIC & ICUS |
|  |  |  |
| * Night flight time as PIC or Co-pilot **(100)**
 |       |  |
|  |  |  |
| * Instrument Time **(75)**(Of which not more than 30 hrs Instrument

Ground Time |       | Inst. Flight Time |
|  |       | Ground Time |

# 6.2 ATR 42/72-600 Type Rating

6.2.1 I have had the following flying experience on the ATR 42/72-600 aeroplane as recorded in my personal Pilot’s Flying Logbook:

#  Totals

 Aeroplane Simulator

|  |  |  |
| --- | --- | --- |
|  Type Conversion Training  | Hours | Hours |
|  |  |  |
|  • Handling |       |       |

Signed  Date Click or tap to enter a date.

|  |  |
| --- | --- |
| Certified correct       | Training Manager for       |
|   |  |
| Name in BLOCK CAPITALS       | Licence no. and type       |

# GENERAL NOTES

1. ‘Night’ means the hours between 15 minutes after sunset and 15 minutes before sunrise.

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 his aeroplane 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. In the aeroplane ‘Simulated engine failure’ means with thrust lever set to idle so as to represent a failed engine as nearly as possible. In the flight simulator any approved method for simulating engine failure may be used. The accelerate-stop tests required by this Form should be carried out as follows:

* 1. In the aeroplane, simulated engine failure should be initiated at a speed, which will not hazard the safety of the aircraft.
	2. Simulated engine failure for abort drills should be initiated at a speed which is close to V1 but which is sufficiently below to require a decision to stop, e.g. V1 -5 or -10 knots.

1. Emergency descent procedure should be carried out in the air by announcing a pressurisation failure, donning masks, carrying out touch drills and descending the aeroplane through a representative height band.

1. Endorsement of the licence will date from the completion of these tests. A flight simulator must be specifically authorised before testing boxed items during the initial ratings on type.

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

1. Certain items of this test may be carried out on an appropriate flight simulator which has been specifically approved for them. Items so approved are enumerated in the relevant flight simulator approval, which also shows the Simulator Code for column 3.

1. This issue of CAAF Form **PL 105AK** is for use in respect of all **ATR 42/72-600** aeroplanes. 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 or CAAF website [www.caaf.org.fj](http://www.caaf.org.fj/)