



# FORM

FORM-M-PEL 003-1

August, 2019

## APPLICATION FORM FOR RENEWAL, ISSUE, OR CONVERSION OF COMMERCIAL PILOT LICENCE (AEROPLANES)

<b>Application Type (Please tick the appropriate box)</b>		
I am applying for; Commercial Pilot License		
<input type="checkbox"/> Initial Issue		
<input type="checkbox"/> Renewal	Licence No:	Expiry date:
<input type="checkbox"/> Conversion	Foreign Licence No:	Issuing State:

<b>Applicant details:</b>							
Name (as appearing on ID/Passport):							
Licence Held:				Phone No.			
Date of Birth:				Age (Min.18):			
Gender: <input type="checkbox"/> Male		<input type="checkbox"/> Female		Phone Number:			
Postal Address:							
Email address:							
ID/Passport No:				Nationality:			
ATO/Company name:							
Other Licence already held:							
Types of aircraft flown:							
<b>Medical Certificate Details:</b>							
<b>Class of Medical:</b>		<b>Date of Medical Test:</b>		<b>Expiry date:</b>		<b>Name of Doctor:</b>	
<b>Aeronautical Experience</b>						<b>PEL Inspector</b>	
<b>For Renewal:</b>		<b>Standard</b>	<b>Day</b>	<b>Night</b>	<b>S</b>	<b>N/S</b>	<b>N/A</b>
PIC hours in the last 6 months		6					
PIC Hours in the last 12 months							
Co-pilot hours in the last 6 months		6					
Co-pilot hours in the last 12 months							
Total Flight Time:							
Date of last Instrument Rating check (dd/mm/yyyy)							

<b>For Initial Issue:</b>	<b>Standard</b>	<b>Actual</b>	<b>S</b>	<b>N/S</b>	<b>N/A</b>
Total Flight Time	200 hours				
Synthetic flight trainer hours	10 hours				
PIC flight time	100 hours				
PIC cross-country flight time	20 hours				
Number of 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				
<b>Credit towards 200 h of flight time for a pilot licensed in another category</b>					
Flight time as pilot-in-command in a category other than helicopters	10 hours				
Flight time as pilot-in-command holding a PPL(H)	30 hours				
Flight time as pilot-in-command holding a CPL(H)	100 hours				
<b>Examinations Done</b>					
<b>Test</b>	<b>Date of Test</b>	<b>Expiry date</b>	<b>Examiner</b>		
Knowledge Test					
PPL Skill Test					
English Language Proficiency exam					
Technical Type Rating Exam (TTR)					
Aircraft Type Rating Flight Test (Form 64)					
<b>Attachments: Tick only if you have attached;</b>					
<input type="checkbox"/> <b>For Initial Issue:</b>		<input type="checkbox"/> <b>For Renewal:</b>			
<input type="checkbox"/> A copy of Medical certificate		<input type="checkbox"/> A copy of Medical certificate			
<input type="checkbox"/> Two Passport size photos (2cm*2.5cm)		<input type="checkbox"/> Copies of the last 2 pages of the logbook			
<input type="checkbox"/> A copy of ID/Passport					
<input type="checkbox"/> Copies of the last 2 pages of the logbook					
<input type="checkbox"/> <b>For Conversion:</b>					
<input type="checkbox"/> A copy of Kenyan Medical certificate		<input type="checkbox"/> A copy of ID/Passport			
<input type="checkbox"/> A copy of Foreign Medical certificate		<input type="checkbox"/> Copies of the last 2 pages of the logbook			
<input type="checkbox"/> Two Passport size photos (2cm*2.5cm)		<input type="checkbox"/> A copy of the foreign licence			
<b>Declaration:</b>					
I declare, to the best of my knowledge and belief, that the information given in this application form and attachments are complete and correct.					
Signature:		Date:			
<b>For Official Use Only:</b>					
Fees:		Receipt No.:			
Date:		<input type="checkbox"/> <b>HQ</b>		<input type="checkbox"/> <b>WAP</b> <input type="checkbox"/> <b>MSA</b>	
PEL Inspector's Name:		Signature:			

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