

BALLOON - EASA PART-FCL PILOT LICENCE APPLICATION BASED ON CONVERSION OF AN EXISTING NATIONAL LICENCE ISSUED BY THE UNITED KINGDOM



Please complete the form online or in BLOCK CAPITALS using black or dark blue ink after reading the attached guidance.

European Commission Regulation (EU) No. 1178/2011 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 231 of the Air Navigation Order 2009 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 Applicant

CAA Personal reference number (if known):						
Title:	Forename(s):	Surname:				
Date of Birth (dd/mm/yyyy):	Nationality:					
Town of Birth:	Country of Birth:					
Permanent Address:						
.....	Post Code:					
Telephone Number:	Alternative Telephone Number:					
Email:	Fax Number:					

2. ADDRESS FOR CORRESPONDENCE (if different from above)

To be completed by Applicant

Postal Address:	
.....	Post Code:

3. EMPLOYER'S DETAILS (if applicable)

To be completed by Applicant

Postal Address:	
.....	Post Code:

4. MEDICAL FITNESS

Class of Medical Certificate held and State of issue	Date of last Medical	Date of Expiry	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. 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.).

NPPL Medical Declarations not valid for these licences.

5. PARTICULARS OF ALL BALLOON LICENCES & RATINGS HELD				To be completed by Applicant
UK CPL (Balloons)				
Hot-Air Balloon Restricted to Aerial Work only:	☐	Hot-air Balloon Group B:	☐	Go to Section 6a
Hot-air Balloon Group A:	☐	Hot-air Balloon Group C:	☐	
UK PPL (Balloons & Airships)				
Hot-Air Balloon	☐	Gas Balloon (Netless)	☐	Go to Section 6b
Hot-air Airship (Pressurised)	☐	Gas Balloon (Netted)	☐	
Hot-air Airship (Unpressurised):	☐	Combination Balloon*	☐	
Small Gas Airship*	☐	Night Rating	☐	
*Please refer to guidance note 2				

6.a FLYING EXPERIENCE (If none within previous 12 months go to Section 6b)				To be completed by Applicant
Date of Test	Examiner: Name & Licence No.	Balloon Registration:	Balloon Size (cubic feet):	UK Balloon Group:

6b. DETAILS OF TRAINING FLIGHT WITH INSTRUCTOR					To be completed by Flight Examiner
Date of Test and/or Training Flight:	Instructor: <i>Name & Licence No. (Training Flight only)</i>	Training Flight: <i>(tick as appropriate)</i>	Balloon Registration:	Balloon Size (Cubic Feet):	UK Balloon Group:

7. APPLICATION (tick as appropriate)	To be completed by Applicant
I am applying for the following Part-FCL licence (please tick one box as appropriate): Balloon Pilots Licence (BPL) Balloon Pilots Licence (Unrestricted) ☐ Balloon Pilots Licence (Restricted to remuneration on other than Commercial Air Transport (CAT)) ☐ Balloon Pilots Licence (Restricted to non-commercial & no remuneration) ☐ Light Aircraft Pilot Licence (Balloon) (LAPL(B)) The above conversion is based on my National licence issued by the United Kingdom ☐ I wish to retain a UK National Pilot's Licence. PPL ☐ CPL ☐ (there is a fee for each licence retained) (Please note that only aircraft listed in Annex II can be endorsed on to a national pilot's licence and there will be a separate fee for the issue of a UK National Pilots Licence.) Privileges for FRTOL ☐ (the privileges must already be held, if not held use form SRG 1106) Note – is your English language proficiency valid, if not or not assessed, ask an authorised examiner to undertake the assessment using form SRG1199	

8. GROUP & PRIVILEGES APPLIED FOR	To be completed by Applicant	
	Balloon	Hot Air Airship
Hot-air Group A (Up to 120,000 cubic feet) (3,400 cubic metres)	☐	☐
Hot-air Group B (Above 120,000 and Up to 211,000 cubic feet) (3,401 to 6,000 cubic metres)	☐	☐
Hot-air Group C (Above 211,000 and Up to 370,000 cubic feet) (6,001 to 10,500 cubic metres)	☐	
Hot-air Group D (Above 370,000 cubic feet)(10,500 cubic metres)	☐	
Gas Group A (Up to 1,260 cubic metres)	☐	
Gas Group B (Above 1,260 cubic metres)	☐	
Note: 1- Only select a Group(s) that you will be able to continue to undertake future bi-annual Instructor flights in. Note: 2- A LAPB(B) holder may only hold Group A for hot -air and/or Gas.		
Privileges for tethered flights ☐	Privileges for night flights ☐	

9. INSTRUCTOR PRIVILEGES HELD	To be completed by Applicant
Instructor privileges [submit evidence of national Instructor's certificate]	☐
Extension to train for the night rating	☐
Extension to train other Instructors	☐
Last BBAC Instructor Training Day:	
Total Hours Instructing: Years Held:	
I confirm I have complied with FCL.910.FI(c)(3)	☐

10. EXAMINER CERTIFICATES HELD	To be completed by Applicant
I hold a balloon examiner authorisation issued by UK CAA	☐

11. DECLARATION OF APPLICANT (Tick as appropriate)	To be completed by Applicant
I declare that the information provided on this form is correct	☐
I also declare that I do not hold a licence issued by another EASA Member State, and my Medical Records are held by the UK CAA. ☐	
I agree to receive: Flight Crew Safety material from the CAA only ☐ and/or Safety Material from authorised sources ☐ I have fully reviewed all guidance notes and have submitted all of the necessary paperwork form my application to be considered. ☐ I have read and understood the relevant elements of the operational requirements and Part-FCL and (as applicable) implementing rules relevant to my licence and the proposed operations. ☐	
Signature..... Date.....	
PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1	

11. CAA USE ONLY	
Date of Issue	Enclosures
Checked by	
Loaded by	Despatch/collection details
Signed by	