

Aeroplanes – Notification of Revalidation of a Single Engine Piston (SEP) and/or Touring Motor Glider (TMG) only by Experience in Accordance with Part-FCL

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 this form.

FALSE REPRESENTATION STATEMENT

It is an offence under the Air Navigation Order 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 (not exceeding the statutory maximum in Northern Ireland and Scotland) and, on conviction on indictment, by a fine and/or up to two years imprisonment or both.

1. LICENCE HOLDER DETAILS

To be completed by the Licence Holder

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:

.....

..... Postcode:

Telephone: Alternative telephone Number:

E-mail: Fax Number:

2. ADDRESS FOR CORRESPONDENCE (if different from above)

To be completed by the Licence Holder

Postal Address:

.....

..... Postcode:

3. NOTIFICATION OF REVALIDATION (tick as appropriate)

To be completed by the Licence Holder

I am notifying the CAA of the Revalidation by Experience of SEP (Land) ☐ SEP (Sea) ☐ TMG ☐

4. CONFIRMATION OF FLIGHT EXPERIENCE**To be completed by the Examiner**

I certify that I have examined the applicants logbook(s) and the entries in them meet in full the requirements to revalidation by experience.

Total Flight Time in preceding 12 months: Hours Total Flight Time as PIC in preceding 12 months:..... Hours

Date(s) of Training Flight with Instructor:

I have endorsed the rating on the Certificate of Revalidation and the new expiry date is:

Examiner's Name: Examiner's Number:

Competent Authority issuing Examiners Certificate:

Examiner's Signature: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1**5. DECLARATION OF APPLICANT (tick as appropriate)****To be completed by the Applicant**

I declare that the information provided on this form is correct and I have fully reviewed all guidance notes.

I agree to receive Flight Crew Safety material from the CAA only ☐ or Safety material from authorised sources ☐

Signature: Date:

PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON PAGE 1**6. CAA USE ONLY**

Date of Issue

Enclosures

Checked by

Loaded by

Signed by

GUIDANCE NOTE 1 and Submission Instructions

Please send your completed revalidation form to the following address:

Licensing & Training Standards - Licensing Department
Civil Aviation Authority
Aviation House, Gatwick Airport South
West Sussex, RH6 0YR
United Kingdom

GUIDANCE NOTE 2: Important Information

Please note the following important information for all applications.

SRG 1119E This form is to notify revalidation by experience only for the SEP (Land), SEP (Sea) and TMG in circumstances where the Examiner has endorsed the Certificate of Revalidation. If you require the CAA to endorse your Certificate of Revalidation, then please complete form SRG 1119B and pay the appropriate fee as per the Scheme of Charges.