

Application for the Notification of a Change to Personal Details to an ATCO or FISO Licence or Radio Operator Certificate of Competence (Regulation UK (EU) 2015/340 and Air Navigation Order 2016)



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. Post or scan and email in accordance with Section 5.

Please read attached Guidance Notes before completing this form.

FALSE REPRESENTATION STATEMENT

It is an offence under the UK 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. Persons doing so render themselves liable, on summary conviction, to a fine not exceeding the statutory maximum and on conviction on indictment to an unlimited fine or imprisonment for a term not exceeding two years or both.

1. TYPE OF CHANGE

(Completed by the Applicant)

Change of Address:

Change of Name:

Change of Nationality:

2. PERSONAL DETAILS FOR INCLUSION IN NEW LICENCE/CERTIFICATE

(Completed by the Applicant)

Please refer to Section 2.1 in the Guidance Notes for supporting documentation required.

ATCO Licence number:

FISO Licence number:

Radio Operators Certificate of Competence number:

Title: Surname: Forename(s):

Date of Birth (dd/mm/yyyy): Nationality:

Place of Birth: Country of Birth:

Applicants Address:

County: Postcode: Country:

Telephone Numbers: Home: Mobile:

Email Address:

Unit Name:

Unit Address:

County: Postcode: Country:

ICAO Location Indicator:

The licence will be sent to the unit by default unless specified otherwise by the unit or individual with an explanation to: ats.licensing@caa.co.uk.

3. FINANCIAL DECLARATION (MUST BE COMPLETED BY APPLICANT EVEN IF PAYMENT IS MADE BY A THIRD PARTY)

I am applying for the Change to Personal Details to an ATCO or FISO licence and/or Radio Operator Certificate of Competence.

I hereby declare that to the best of my knowledge the particulars entered on this application are accurate.

I enclose the charges payable on application in accordance with the Scheme of Charges (www.caa.co.uk/ors5).

I agree to pay any additional charges which may become payable in respect of this application under the Scheme of Charges.

Name of Applicant (as shown in 1):

Signature of Applicant (named in 1): Date:



Documents

Document Sharing Hub

4. PAYMENT BY A THIRD PARTY

If payment for this application is not being made by the applicant, this form must be countersigned by the payee.

I, (name) authorise the Civil Aviation Authority to use the details given on the attached payment authorisation ([FCS1500](#)) in support of this application.

Signature of Payer: Date:

Address:

Contact Telephone Number:

5. SUBMISSION INSTRUCTIONS

Please check:

- All Sections relevant to the application have been completed;
- The correct supporting documentation is included with the application (refer to Guidance Notes 2.1);
- The correct remittance and Payment Authorisation Form [FCS1500](#) is included with the application;

when completed, return to:

Civil Aviation Authority
Aviation House
Beehive Ring Road
Crawley
West Sussex
RH6 0YR

or e-mail to: ats.licensing@caa.co.uk

Telephone Enquiries: +44 (0)330 022 1972