# Application for Test Pilot ApprovalExperimental Flying

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| **Application requirements and instructions for completing the form**1. Experimental flying requires a test pilot to be approved in accordance with [CAR 19.405](https://www.caa.govt.nz/assets/legacy/rules/Rule_Consolidations/Part_019_Consolidation.pdf). See [AC19-1](https://www.caa.govt.nz/assets/legacy/Advisory_Circulars/AC019_1.pdf) for a definition of Experimental Flying and details of the Test Pilot assessment and approval process, and [AC21-10](https://www.aviation.govt.nz/rules/advisory-circulars/show/AC21-10) Experimental Flight Testing Guidance.
2. Assessment of a test pilot application is a chargeable activity at the CAA standard rate specified in the applicable Civil Aviation Charges Regulations. Follow the link for information on [fees and charges.](https://www.aviation.govt.nz/about-us/what-we-do/how-we-are-funded/fees-levies-and-charges/)
3. Please ensure all documents are submitted with the application, including the Flight Test Plan / Flight Test Schedule - no application will be processed until all required documentation is received.
4. It is likely that an application for Special Category Airworthiness Certificate will also be required – please see CAA form [24021-06](https://www.aviation.govt.nz/assets/forms/24021-06.pdf).
5. In circumstances where an organisation (rather than an individual) is to be charged for the activity, please fill out Section 1 with the organisation details and Section 4 with the individual applying for the approvals. If the individual is to be charged then the individual’s details should be used in both Sections 1 and 4.
6. Further notes and instructions are included in the grey margins of the different sections.
7. Use additional sheets to provide further details and explanations that do not fit the original sections of the form.
8. Scan this form and email to pft.admin@caa.govt.nz or post to Civil Aviation Authority, PO Box 3555, Wellington 6140.
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### Organisation/Applicant Details

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| **CAA Participant Number** |       |  |
| **Legal Name of Organisation or Name of Applicant**  |       |
| **Trading name** *(if any)* |       |
| **Address for Service (Details for Invoice)***The Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (i.e. a physical address, not a P.O. Box) and to promptly notify the Director of any changes.* | **Postal Address** *(if different from Address for Service)* |
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| **Post Code** |       | **Post Code** |       |
| **Phone** |       | **Phone** |       |
| **Email** |       | **Email** |       |
| **Authorised Contact** |
| **Name** |       |
| **Phone** |       |
| **Email** |       |

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### Category of Test Pilot Approval Request

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| **Mark the appropriate box***See* [*AC19-1*](https://www.caa.govt.nz/assets/legacy/Advisory_Circulars/AC019_1.pdf) *for an explanation of the categories* | **Category 1** | [ ]  |
| **Category 2** | [ ]  |
| **Category 3** | [ ]  |
| **Category 4** | [ ]  |

### Experimental Flying Approval Request Details

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| **Aircraft type** |       |
| **Aircraft Model** |       |
| **Aircraft Registration** | ZK -       |
| **Test Plan Details** *(document title, reference, revision etc.)* |
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| **For Applications for Categories 1, 2 or 3 *only*** |
| **CAA Project work request number** *(e.g. modification or STC)* |       |
| **Overseeing Part 146 Design Organisation** |       |
| **Part 146 Contact Name** *(e.g. Design Engineer)* |       |
| **Phone** |       | **Email** |       |
| **Project Description** |       |
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### Test Pilot Qualifications and Experience

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| **Test Pilot Name** |       |
| **Phone**  |       | **Email** |       |
| **CAA Participant Number** |       |  |  |
| **Medical Certificate Class & Expiry Date** |       |
| **Licence Type** |       |

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| **Details of Prime & Aircraft type ratings and any other relevant qualifications** *(e.g. Test Pilot School graduate, Flight Test Course, Engineering Degree, etc.)*  |
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| **Previous Test Pilot/Test Flying experience** *(if any)* |
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| **Flying Experience** | **PIC** | **Total** |
| **Hours flown on aircraft type to be tested** *(if any)* |       |       |
| **Hours flown by Category** *(e.g. Multi-engine, turbine, floatplane, tailwheel etc.)* | **PIC** | **Total** |
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| **Total Hours** |       |       |

### Applicant’s Declaration

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| *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 49 of the Civil Aviation Act 1990 and is subject, in the case of a body corporate, to a maximum fine of $50,000.* | I have obtained a current copy of [NZCAR Part 19.405](https://www.aviation.govt.nz/rules/rule-part/show/19/8), [AC21-10](https://www.aviation.govt.nz/rules/advisory-circulars/show/AC21-10) and [AC19-1](https://www.caa.govt.nz/assets/legacy/Advisory_Circulars/AC019_1.pdf). I have read and understood the contents as they apply to this application. | [ ]  |
| If applying for a ***Category 4 Test Pilot Approval***, I declare I have read and understood [FAA AC 90.89C](https://www.faa.gov/documentLibrary/media/Advisory_Circular/AC_90-89C.pdf) | [ ]  |
| I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct. |
| **Full Name of Test Pilot**  |       |
| **Signature** |  | **Date of application** |       |

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| *Use this sheet if you need to provide further information or explanations that do not fit in the original sections of the form.* |
| **Section** | **Additional details or explanations** |
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