***Application for Flight Test Conducted by CAA***

**1. Personal Details**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| NZ CAA Client / Licence Number (*if known)* | | | |  | | | | Date of Birth *(dd/mm/yy)* |  |  |  |
| Title *(Mr/Mrs/Ms/Miss*) | |  | Last Name | |  | | | | | | |
| Given Name(s) | |  | | | | | | | | | |
| Country of Birth | |  | | | | | Nationality |  | | | |
| Address for Service - *Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (ie, a physical address) and to promptly notify the Director of any changes.* | | | | | | | | | | | |
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|  | | | | | | | | | | | |
| Tel |  | | | | Mob |  | | | | | |
| Fax |  | | | | Email |  | | | | | |
| Postal Address *(if different from Address for Service)* | | | | | | | | | | | |
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**2. Flight Test Application**

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| --- | --- | --- | --- | --- |
| *Please indicate flight test applied for.* | Aeroplane |  | Helicopter |  |
| Airline Flight Examiner Rating issue |  | Airline Flight Examiner Rating biennial |  |
| General Aviation Flight Examiner Rating Issue *(Category A Flight Instructors only)* |  | Category A Flight Instructor Rating biennial *(renews General Aviation Flight Examiner Rating)* |  |
| Additional Examiner privilege issue |  | Airline Transport Pilot Licence issue |  |
| Category D Flight Instructor Rating issue  *(Airline 121/125 only)* |  | Agricultural Flight Examiner Rating issue or biennial  *(renews Category E Flight Instructor Rating)* |  |
| I request a CAA flight test at:  Type of aircraft/flight simulator: | | | |

**3. Examiner Privileges**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Please indicate examiner privileges sought (if applicable).* | RPL/PPL issue |  | Instructor endorsement removal | | | | |  | Night | |  | | Spinning | |  | | | Aerobatic | | |  |
| ATPL issue  *(Airline 121/125 only)* | | |  | Category D instructor issue  *(Airline 121/125 only)* | | | |  | Category C and B annual competency demonstration *(GA only)* | | | | | | | | | | |  |
| Agricultural Examiner additional privileges | | | | | | Category E Flight Instructor Rating biennial | | | | | | | | | |  | | | | |
| Instrument rating continued competency demonstration | | | |  | Additional Navigation Systems | | | ILS | | |  | | GNSS | |  | | | NDB | |  |
| Other privileges being sought and tested (please state): | | | | | | | | | | | | | | | | | | |  | |

**CAA USE ONLY**

|  |  |  |
| --- | --- | --- |
| Receipt No. | Receipt Date | W/R No. |
|  |  |  |

Name ……………………………………… Client ID ……………………

**4. Methods of Payment\***

**\*THESE FLIGHT TESTS MUST BE PAID FOR IN ADVANCE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***DO NOT SEND CASH.*** | 1. ATPL Issue flight test | Aeroplane $2,759.00 (incl GST) |  | Helicopter $2,759.00 (incl GST) | |  |
| 1. General Aviation Flight Examiner Rating issue or biennial   *(When the Category A Flight Instructor Rating biennial is combined with this flight test, this fee covers both)* | | | $1,379.00 (incl GST) |  | |
|  | **Please pay online at** [**https://sec.caa.govt.nz/onlinepayment**](https://sec.caa.govt.nz/onlinepayment) **and attach the receipt that will be emailed to you.** | | | | | |

**\*THESE FLIGHT TESTS WILL BE INVOICED**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | 1. Airline Flight Examiner Rating issue flight test | | | |  | Charges will be invoiced at the standard CAA rate on completion of the test. |
|  | | 1. Airline Flight Examiner Rating biennial | | | |  |  |
|  | | 1. Flight Examiner Rating additional privilege | | | |  |  |
|  | | 1. Flight Instructor Rating Category D issue Part 121/125 | | | |  |  |
|  | | 1. GA Flight Examiner additional privilege Part 135/115 | | | |  |  |
|  | | 1. Agricultural Flight Examiner issue or biennial *(Includes Category E Instructor biennial)* | | | |  |  |
|  | | To be invoiced to the organisation named below; or | | | | | |
|  | | To be invoiced to me | | | | | |
| **Invoicing to an aviation organisation** *Please identify the organisation that will be invoiced for this flight test(s) (if applicable).* | | | | | | | |
|  | | | | | NZ CAA Client ID No. | |  |
| Tel |  | | Mob |  | | | |
| Fax |  | | Email |  | | | |

**5. Check List**

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| --- | --- | --- |
| *Please ensure all documents are enclosed.*  *Applications which are incomplete or lacking any required documents will be returned.*  *Item 3 is not required for biennials.*  *Item 4 is required for the issue of the Examiner privilege of operational competency only.* | 1. Proof of Payment – For Flight Test Fee *(for options 1 or 2 from section 4)* |  |
| 1. Name and ID completed at top of this page. |  |
| 1. **Flight Examiner training:** Attach a copy of the completed Flight Examiner training record in accordance with AC61-19 Appendix I *(for all examiner rating issues and/or* ***any*** *additional examiner privilege).* |  |
| 1. Operational Competency Examiner privileges: Attach *(for issue only)* a copy of the certificated organisation’s air crew competency requirements for Part 121, 125, 135, 137 or 115 operations, including route and aerodrome proficiency *(not applicable to Part 137 or 115).* |  |

**Scan this form and email to** [**pft.admin@caa.govt.nz**](https://infohub.aviation.govt.nz/otcsdav/nodes/53510022/mailto%3Apft.admin%40caa.govt.nz)