



CERTIFICATE OF LANDING COMPLETION

Please complete in BLOCK CAPITALS using black or dark blue ink.

FALSE REPRESENTATION STATEMENT
It is an offence 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.

1. APPLICANT DETAILS	To be completed by the Applicant
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Title: Forename(s): Surname:
Date of Birth (dd/mm/yyyy):

2. AIRCRAFT DETAILS	To be completed by the Applicant
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Aircraft type being applied for:
Previous Experience on similar type(s) (specify type(s)): Hours:

3. CONFIRMATION OF FLIGHTS	To be completed by the Instructor
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This is to certify that the above named Pilot has completed: landings to a satisfactory standard in the above type following the completion of a MCAR FCL-ORA Approved Type Rating Course and the application is now made for the grant of the Aircraft Rating. The details of the flight are as follows:

In accordance with MCAR-FCL.720.A, a pilot with more than 500 hours MPA in aeroplanes of similar size and Performance should complete at least 4 landings including at least one full stop landing, unless otherwise specified. In all other cases, a pilot should complete at least 6 landings.

Date of Aircraft Training: Aircraft Registration:
Start Time: Finish Time: Total Flight Time:
Number of Take Offs/Landings: / Airport(s) used:

Details of Instructor:

Forename: Surname:
Licence Number: Authorising Competent Authority:

Note - *The Instructor must have privileges to conduct aircraft take-off and landings or be specifically authorised by the MCAA. A copy of the instructor rating authorisation/certificate must accompany this form.*

Instructor's Signature:		Date:	
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PLEASE REFER TO FALSE REPRESENTATION STATEMENT ON ABOVE

4. DECLARATION OF APPLICANT	To be completed by the Applicant
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I declare that the information provided on this form is correct.

Signature:		Date:	
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