

Send to:

postmottak@caa.no

or

Luftfartstilsynet

Postboks 243

8001 Bodø

NORWAY

Revalidation of SET helicopter types in accordance with recency requirements

1	Applicant information (To be completed by applicant)		
License number:	Date of birth (dd.mm.yyyy):	State of issue:	
Last name:		First name(s):	
Address:	Postal code:	City:	
Telephone number:	E-mail:		

2	Type rating to be revalidated (To be completed by applicant)		
I meet the relevant experience requirements for revalidation according to FCL.740.H(a)(2)		Type rating:	
<input type="checkbox"/>	Within the validity period of the type rating, at least 6 hours as PIC		
<input type="checkbox"/>	Has satisfactorily completed refresher training to the satisfaction of an instructor of at least one-hour total flight time within the three-month period preceding the expiry date of the rating.		
Date of refresher training (dd.mm.yyyy):	Name of instructor in capital letters:	Helicopter registration number and type / FSTD QC (as applicable):	
Date (dd.mm.yyyy):	Signature of applicant:		

3	Revalidation of further SET helicopter type(s) in accordance with recency requirements. The applicant has at least 6 hours as PIC on each type within the validity period. Expiry date shall be the same as expiry date used for revalidation of base helicopter.				
Type (licence endorsement)	Hours on type (> 15 hours)	Hours as PIC on helicopters (> 300 hours)	Type rating valid until (dd.mm.yyyy):	Type rating entered in licence	
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No

4	Revalidation completed by an examiner and type rating(s) endorsed in the licence		
<p>As examiner I hereby declare that the applicant has a valid <input type="checkbox"/> medical certificate class 1 or 2 and <input type="checkbox"/> English language proficiency and reviewed the applicant's logbook and that he/she meets requirements for revalidation.</p> <p>If ratings is/are endorsed on the licence, a copy of the applicants licence must be</p>			
Date (dd.mm.yyyy):	Examiner certificate number	Name of examiner in capital letters	Signature of examiner

5	<p>Revalidation and endorsement completed by CAA-N (Luftfartstilsynet). (To be completed by the applicant).</p> <p>The application is subject to an extra charge in accordance with BSL A 1-2 Forskrift om gebyr til Luftfartstilsynet (Gebyrforskriften).</p>
<input type="checkbox"/> Copy of relevant logbook pages the last 12 months, counted from the expiry date of the type rating documenting that experience requirements are fulfilled. Instructor refresher training must be endorsed in the logbook.	

6	Verification of compliance in accordance with ARA.GEN.315 and AMC1 ARA.GEN.315(a) (To be completed by applicant)
<input type="checkbox"/>	I am not holding any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State.
<input type="checkbox"/>	I have not applied for any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category in another Member State.
<input type="checkbox"/>	I have never held any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State which was revoked or suspended in any other Member State.
<input type="checkbox"/>	I hereby declare that all the statements in connection with this application are complete and correct. I understand that any false or misleading statement could disqualify me from being granted a personell licence, certificate, rating, authorisation or attestation.
Signature of applicant:	

!!!	All attached copies shall be readable and in color
Please note that failure to submit all required documentation may result in the return of your application.	

Handling of personal data

To process your application, we need information about you. Your personal data is required to ensure the information received is *from the correct person*. Your personal data will be handled in accordance with regulation (EU) 2016/679 – General Data Protection Regulation (GDPR). Article 6 (1)(e), Civil Aviation Act § 5-3 regulation on certifying crewmember and EU-regulation no. 1178/2011 FCL.015 and MED. A.035 specifies the criteria on which your application will be processed.

Your personal data will be stored only as long as required for the purpose in which they were collected. You have the right to access your personal data, and, if necessary, have them corrected. If you believe that your personal data is not handled in accordance with the GDPR, you may appeal to the Norwegian Data Protection Authority.

The Civil Aviation Authority – Norway (CAA-N) is responsible for the processing of your application. Contact our data protection officer at personvernombud@caa.no.

All written inquiries to CAA-N are subject to the Archive Act and the Freedom of Information Act. The public's right to access information does not apply to personal data which is subject to confidentiality.

Read our privacy policy here: <https://luftfartstilsynet.no/en/about-us/privacy-policy>.