

FORM A 16 APPLICATION FOR ISSUE OF CERTIFICATE

01/07/14

Use this form for Sport & Recreation Microlight Pilot Certificate: **ISSUE** **TYPE RATING** **BFR**
 (Circle for appropriate Flight Test)

Surname:		CAA Client Number:
Given Names:		RNZAC Client Number:
Country of Birth:	Nationality:	Date of Birth:
Residential Address:		Postal Address:
Telephone #:	Mobile #:	E-mail:

Application is made for the Class II Certificate indicated below: (Tick appropriate box)		
TYPE	Microlight (under 80kts cruise) <input type="checkbox"/>	Advanced Microlight (over 80kts cruise) <input type="checkbox"/>
Novice: <input type="checkbox"/>	Intermediate: <input type="checkbox"/>	Advanced Microlight Pilot Certificate: <input type="checkbox"/>
I presently hold the following Licence or Certificate:		
Type:	Licence or Certificate #	Expiry Date:
Applicants Signature:		Date:/...../.....

Enclosures - Copies of:	
Fit and Proper Person Declaration:	<input type="checkbox"/>
Sport & Recreation Microlight Pilot Certificate - Flight Test Preparation	<input type="checkbox"/>
Medical Declaration or LTSA DL 9 or Part 61 Medical Certificate	<input type="checkbox"/>
Sport & Recreation Microlight Pilot Competency Check	<input type="checkbox"/>
Photo supplied – digital photo jpg format	<input type="checkbox"/>