

Form: O-PEL003

July 2008

## APPLICATION FOR ISSUE OR RENEWAL OF A COMMERCIAL PILOT LICENCE (CPL)

I her			of						
1.	(a) Surname								
	(b) First name (s).								
2.	(a) Residential Add	dress:	(b) Postal Ado	(b) Postal Address:					
3	(a) Private Telephone No.(b) Business Telephone No.(c) Fax No.(d) Email address.								
4.	Place of Birth:		. 5. Date of Birth:						
6.	Nationality:		. 7. Sex: M [	J F□					
8.	Name of ATO at w	hich instructed							
9.	PARTICULARS O	OF LICENCES ALI	READY HELD						
lace of Issue		Date of Issue	Type of Licence	Number	Expiry Date	_			
						_			
						_			
10	. Category, Class an	d/or Aircraft Type	(if required) for whic	h the Licence is 1	required.				
ategory		Class	Class		Туре				
						_			
11	. Instrument Rat	ing held and state o	late of last test			_			
12	. Total Instrume	nt Flying Hours							
13 PE	. FLYING EXP EL003B	PERIENCE FOR I	NTIAL ISSUE OF	CPL –complete	and attach Form PEL003A	0			

## 14. FLYING EXPERIENCE FOR RENEWAL OF CPL -complete the boxes below

Hours Flown	Day			Night			Total		
	PIC	PIC(us)	COPILOT	Dual	PIC	PIC(us)	COPILOT	Dual	Total
Totals since initial issue									
Totals since renewal.									
Totals last 6 months									

(us – under supervision)

_	15. Whether yet examined for and obtained a medical certificate in accordance with the Civil Aviation Regulations? YES / NO								
16. If so, class of med	16. If so, class of medical and date of issue, and name of Medical Examiner								
17. I am able to read, speak, write, and understand the English language.  YES / NO									
18. I have met all the requirements for the issuance of this licence.  YES / NO									
<ul> <li>19. <b>DECLARATION</b> – I hereby certify that the particulars I have given in this form are true to the best of my knowledge and belief.</li> <li>Signature of Applicant</li> </ul> Date of Application									
FOR OFFICIAL USE ONLY									
Fees Paid:	Date:	Receipt #	File #						
Name -	Signature		of the PFI Officer						

## INFORMATION AND INSTRUCTIONS:

- (1) This form when completed should be forwarded to the Managing Director, Civil Aviation Authority Uganda, P. O. Box 5536, Kampala, Uganda, Tel: +256 414 352 134, Fax: +256-414-321 401, Email: info@caa.co.ug, Website: www.caau.co.ug; together with the following:
  - (a) The appropriate fees;
  - (b) Documents relating to proof of age, date of birth, full name and nationality. (copies of these documents must be legible and will be certified by licensing staff as true copies of the original. Where a document is printed in a language other than English, the applicant must provide a notarized translation).
  - (c) Two recent photographs (approximately 2 cm by 2.5cm) taken from the same negative (full face).
  - (d) Medical Certificate from authorized Civil Aviation Medical examiner.

- (e) All personal flying Log Book(s) and/or ATO records, its entries certified by the relevant authorities e.g. Chief Flight Instructor, Director of Operations, Chief Pilot, etc.;
- (f) Evidence of qualification to meet the requirement for the issue/renewal of the licence;

(g) Any licences held;