

SKILL TEST EXAMINER REQUEST

CHECKLIST TO REQUEST FOR AN EXAMINER FOR THE FLIGHT TEST

Name of the Applicant :

Date :

Aeroplane <input type="checkbox"/>	Helicopter <input type="checkbox"/>
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PPL <input type="checkbox"/>	CPL <input type="checkbox"/>	ATPL <input type="checkbox"/>
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Revalidation <input type="checkbox"/>	Renewal <input type="checkbox"/>
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Item	Yes	No	Remarks	Office Use
Online system Application filled			Ref No:	
Printed Application Form				
Original Log book				
Copies of the log book (Relevant Pages)				
Examiner Request Letter				

I understand that my application will not be processed unless I produce the original certificate / documents to TOPL section and make the relevant payments.

I hereby certify that the particulars given by me in this application are true and correct.

.....
(Applicant's Signature)

The Application and documents received on and payment made.

Payment Receipt number

.....
(Receiving Officer's signature)