

APPLICATION FOR THE REINSTATEMENT OF EXPIRED FLIGHT CREW LICENSE

SECTION 1 PERSONAL PARTICULARS OF APPLICANT (in BLOCK CAPITALS)

Full Name (Surname First)		
Permanent Address		
Contact Tel. Numbers	Off:	Mob:
Email		
Type of Licence	ATP <input type="checkbox"/>	CP <input type="checkbox"/>
Licence No. and Expiry Date		

SECTION 2 APPLICATION AND DECLARATION

I certify that the licence which I wish to reinstate contains a medical certificate which expires on:

Note: If your medical certificate is due to expire within 14 days after the date of application for licence renewal, please complete the following:

My medical examination will take place at _____ on _____

SECTION 3 PARTICULARS OF LICENCE HELD

I certify that the particulars I have given on this form are true to the best of my knowledge and belief.

I hereby apply for the reinstatement of my ATPL CPL

Signature: _____

Date: _____

EMPLOYMENT CERTIFICATE

It is certified that the applicant is an employee of _____, and hence his licence may please be renewed.

Authorized Signature: _____

Date: _____

Name: _____

Designation: _____

For DGCA Use Only

The application is Accepted Rejected

Documents are in order and valid

Remarks:

Documents required

1	Statement letter from the company
2	Application Form DGCA/1319 duly filled & signed
3	Photocopy of Proficiency Check
4	Valid Medical Certificate (Class 1)
5	Photocopy of Instrument Rating – Renewal.
6	Photocopy of Civil ID and Passport
7	Copy of licence
8	For regaining competency training, refer to KCASR Part 6 -Attachment AA, Item 14 & 15.
9	For Authorized Examiners refer to KCASR Part 6 - Attachment AC (Absence from Flying).
10	For renewal of competency, the company statement letter must confirm that the applicant has fulfilled all the requirements stipulated in their approved training manual.
11	Prescribed Fee i.a.w Part 27