

## APPROVAL OF AN AEROPLANE FOR FLIGHT TRAINING - APPLICATION

Please complete the form in BLOCK CAPITALS using black or dark blue ink



### 1. DETAILS OF AEROPLANE

Aeroplane Type ..... Serial Number ..... Registration\* .....

Name of Organisation/Operator .....

UK FTO/TRTO Approval Number ..... \*D of T Permit additionally required (**only for a/c flying in UK**) if not UK Registered

### 2. CERTIFICATE BY HEAD OF TRAINING (tick appropriate box(es))

I certify that the above aeroplane complies with the current Air Navigation Order or the appropriate National Authority Regulations in respect to airworthiness and equipment and additionally, meets the following criteria:

- ☐ **For Any Course (*This section is compulsory*)**  
Duplicated primary flying controls for use by the instructor and student  
Suitably equipped and certified to conduct stall and spin awareness training  
Letter signed by the owner to confirm that the aeroplane can be used by the training organisation for flight instruction - (*unless the organisation is already the registered owner*).
- ☐ **MEP Class Rating**  
Duplicated toe brakes or handbrake accessible to both pilots
- ☐ **Modular CPL(A)**  
Suitably equipped to simulate flight under instrument meteorological conditions
- ☐ **Modular IR(A)**  
Suitably equipped to simulate flight under instrument meteorological conditions  
Suitably equipped to practice flight in accordance with the instrument flight rules in controlled airspace
- ☐ **Integrated ATPL(A)**  
All of the above criteria
- ☐ **Flight Instructor(A)**  
Suitably equipped to conduct fully developed spinning

**Note:** Copies of the information relating to the use of the aeroplane are to be retained in the Training Organisation records.

Signature ..... Date .....  
Head of Training or nominated deputy

### 3. SUBMISSION INSTRUCTIONS

Completed application forms should be sent to:

Approvals Support, Licensing and Training Standards, Civil Aviation Authority, Aviation House, Gatwick Airport South, RH6 0YR, UK

### 4. CAA USE ONLY

Name and signature of CAA staff member checking contents of application:

Signature ..... Date .....

Name ..... Office .....