

Flight Operations Standards Department

Flight Crew Licensing & Training Section - Ratings

Type Rating Single Pilot Airplane Revalidation Application Form

Airplane or flight simulator - Type Rating Single Pilot Airplane is valid for 1 year

A. FOR APPLICANT USE ONLY

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Applicant Name						
• Address						
• Mobile Tel. No						
Date &Place of Birth Nationality						
• I hereby declare that the information given in this form is true, correct & completed. • Applicant Signature						

2. Application Details.

	Г	• I am applying for Type Rating Single Pilot Airplane Revalidation (
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3. JCAR Flight Crew License Held Details.

License Type & Number	License Expiry Date		
Type Rating expiry date (SPA)	• Air Plane Type		
• Flight experience last 90 day			

4. JCAR Medical Certificate Held Details.

Class		Expiry Date	AME Name	Limitations	
□ 1	□ 2/IR				

5. Type Ratings Single Pilot Airplane Revalidation Requirements.

No	JCAR FCL Requirement	Applicant details	
a	At least (10) route sectors as pilot of the relevant type or class of airplane, or	Sector No.	
	(1) Route sector with an examiner during the period of validity of the rating, and	Sector No.	
b	Pass a Proficiency check in accordance with Appendix 1 and 3 JCAR-FCL 1.240 within (3) mo	onths immediately preceding the	
	expiry date		

B. FOR CARC USE ONLY

1. Examiner Designation.

• The under signed, Senior Examiner authorises the CRE Capt							
Type Rating Single Pilot Airplane Revalidation Proficiency check							
• Senior Examiner Name		• Date					
Operator Name		• Signature					

2. Examiner Recommendation. (CRE notified by CARC)

• Date	Departure	
• TRTO name	Destination	
☐ Airplane Type & number	Landing time	
☐ FS Type & number	Total flight time	
• Take off time	Proficiency Check result	□ Passed
Recommendations		
Examiner Name	Signature	Date

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3. CARC Recommendation. (To be completed and signed by the Senior examiner)

 Type rating revalidation 					☐ Not approved			
• Type ratings (SPA) details	Air plane Type			Type ratings expiry date				
• License details	□ PPL	□ CPL	\square ATPL	License expiry date				
• JCAR English language Level	□ 5	□ 6	English expiry date					
• JCAR Medical Class	□ 1 □ 2/IR		Medical expiry date					
• Remarks								
Flight Operations Inspector Name				Sign	ature	Date		

C. SUPPORTING DOCUMENTS.

- Cover letter from TRTO for type rating revalidation
- This application form.
- Copy of valid JCAR-FCL PPL/ CPL/ATPL.
- Certified Copy of related log book pages
- Copy of valid JCAR Medical certificate applicable class
- Type rating (SPA) proficiency checks Report.

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