

A. FOR APPLICANT USE ONLY

1. Personal Details.

| 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. | | | | | |
| • I further declare that in the e | Applicant Signature | | | | |
| CARC without delay | | | | | |

2. Application Details.

| • 1 am applying for Flight Crew License replacement due to 🗆 License Lost 🗆 License Damaged | | | | | | | | |
|---|------------|------------|---------------|-------------|------------|--|--|--|
| \Box SPL | \Box PPL | \Box CPL | \square MPL | \Box ATPL | \Box FEL | | | |

3. JCAR Flight Crew License Held Details.

| • License & number • License Expiry Date | |
|--|--|

4. JCAR-Medical Certificate Held Details.

| Class | | | Expiry Date | AME Name | Limitations | |
|-------|-------------|-----|-------------|----------|-------------|--|
| | \Box 2/IR | □ 2 | | | | |

5. Flight Crew License Replacement Requirements. List each type, class, instrument and/or instructor rating as applicable endorsed on your exiting JCAR license and give the date of the most recent skill test/proficiency check and expiry date for each rating. (not required for SPL)

| No | *Type/Class/Instrument/Instructor Rating | Skill Test/ Proficiency Check Date | Rating Expiry Date |
|----|--|------------------------------------|--------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |

*Ensure that ratings endorsed on the license are valid and at least one rating (class/type) shall be valid for the license to be replaced

B. FOR CARC USE ONLY

1. CARC Recommendation.

| • FCL replaced | | | | | | □ Not approved | | | |
|---|-------------------------------|--|---|-------------------------------|-------------|----------------|------|-------|--|
| License to be replaced | \Box SPL \Box PPL | | \Box CPL | \square MPL | \Box ATPL | \Box FEL | | | |
| □ Class Ratings details | □ SE □ ME | | Class Rating expiry date | | | | | | |
| □ Instrument ratings details | \Box SE \Box ME | | Instrument Rat | Instrument Rating expiry date | | | | | |
| \Box Type rating details (SPA) | • Air plane type | | Type Rating expiry date | | | | | | |
| \Box Type rating details (MPA) | • Air plane type | | Type Rating expiry date | | | | | | |
| □ Instructor rating details | • Type | | • Instructor Rating expiry date | | | | | | |
| License details | • Type | | • License expiry date | | | | | | |
| JCAR-English language Level | | | English Expiry date | | | | | | |
| JCAR-Medical Class | \Box 1 \Box 2/IR \Box 2 | | Medical Expi | ry date | | | | | |
| • JCAR-ATPL TK expiry date | | | | | | | | | |
| • Remarks | | | | | | | | | |
| Flight Operations Inspector Name | | | | | Da | ate | Sign | ature | |
| | | | | | | | | | |



C. SUPPORTING DOCUMENTS.

- This application form.
- The damaged JCAR Flight Crew License held (If damaged)
- The lost JCAR Flight Crew License Police report (If lost)
- Copy of revalidated/renewed ratings applications and skill test/proficiency reports. (not required for SPL)
- Copy of valid JCAR-English language level (IR/ATPL/MPL/FEL only)
- Certified copy of related log book pages. (not required for SPL)
- Copy of valid JCAR Medical appropriate certificate
- One photo