



Form. No. RPPL-F-120A
 AMDT No. 2
 Page No. 1 of 3
 Issue Date: 13/02/2024

**RELEASE OF INFORMATION TO IRISH
 AVIATION AUTHORITY**

Please complete the form in **BLOCK CAPITALS** having read the guidance notes attached to this form.

1. PERSONAL DETAILS

Surname..... First Name(s)

Title (Mr. / Mrs. / Ms etc.) Date of Birth (dd/mm/yyyy)

Nationality..... Place of Birth (Town) (Country)

Permanent address

..... Postcode.....

Contact Tel. No. Mobile Tel. No.

E-mail address..... Fax Number.....

Address for correspondence (if different from above)

..... Postcode.....

2. DETAILS OF LICENCE(S) TO BE VERIFIED

State of Licence Issue	
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Type of Licence (e.g. SPL, PPL, CPL, ATPL, AME, ATC etc.)	Category of Licence (e.g. Aeroplane, Helicopter, B1, B2 etc.)	Licence No.	Expiry date

Note: Copies of associated licences and supporting medical certificate are to be included with this form



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3. CONSENT TO RELEASE INFORMATION

Agreement for release of information to the Irish Aviation Authority

I hereby give consent to _____ Aviation Authority to disclose information relating to my licensing status with that Authority to the Irish Aviation Authority (IAA). I understand that the data provided will be used for the purpose of verification of the licensing status declared by me to the IAA

Signature: _____

Date: _____

NOTE: This consent to release of information is not an application for a service.

Completion and submission of this form does not commence the application process.

4. APPLICANT'S DECLARATION

I hereby declare that the information given in this form is true and correct to the best of my knowledge and belief.

I understand that this application does not initiate an application request but provides clearance to release information to the Irish Aviation Authority in support of a pending or future application. I understand that the Irish Aviation Authority initiate the release of information request unless it deems that an application is pending or likely.

I understand that the consent provided here may not be sufficient for some Aviation Authorities and that I may have to complete some additional tasks specific to that Authority in order to have information released.

Signature: _____

Date: _____

Note: It is an offence for a person to make, procure to be made, or assist in making any false representations for the purpose of procuring for any reason the issue, validation, extension or re-issue of a licence or the issue, renewal or revalidation of a rating, authorisation or certificate, whether for that person or any other person.



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GUIDANCE NOTES & SUBMISSION INSTRUCTIONS

Guidance Notes

All sections of the application form must be completed by the applicant personally. In order for the IAA to process your application as quickly as possible, it is important that you complete the application form correctly. Please complete the form in conjunction with the following guidance notes.

Section 1 – Personal Details

The permanent address is what will be provided for licence verification purposes (provided it matches our records)

Section 2 – Details of Licence to be Verified

Please enter details of the licence(s) held and the State of Licence issue. Copies of the associated licence and supporting medical certificate are to be provided with this form.

Section 3 – Consent to release information

Provide the full detail requested. Failure to do so may delay or prevent the process.

Section 4 – Applicant’s Declaration

This section must be completed by the applicant after reviewing all information entered on the application form.

NOTE: Applicants should allow plenty of time for this process. The IAA is not responsible for the time that another Authority may take to process such requests.

Some Aviation Authorities may require additional to the information contained in this form to release information. The Authority may have its own forms for completion and require payment for processed. In such cases the responsibility for same lies with the applicant.

SUBMISSION INSTRUCTIONS

Send your completed application form to:

Personnel Licensing Office, Irish Aviation Authority, The Times Building, 11-12 D’Olier Street, Dublin 2, Ireland. - (licensing@iaa.ie)

Please enclose the following: -

Completed payment form

PAYMENT FORM

The current fee for the verification of a Licence can be found in the current [Fees Schedule](#)

I am paying by: -

Debit Card Credit Card - **PLEASE DO NOT SEND CASH -**

Please note that we do not accept **AMERICAN EXPRESS** or **DINERS CARD**.

If paying by credit or debit card, please complete the information required below (in block capitals). **Note:** All credit card details are destroyed upon completion of the transaction. If you would prefer to give card details over the telephone, please call us on +353 1 603 1109 ensuring that you have all of the information required below to hand.

Name of Card holder (as stated on the card) _____

Card Number

Valid from: / Expiry Date: /

Security Code (last 3 digits on signature strip on reverse of card):

Address of Card holder, if different from applicant _____
