



Form. No. RPPL-F-125E  
 AMDT No. 5.0  
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 Issue Date: 28/02/2024

**APPLICATION FOR THE ISSUE OF A  
 NIGHT RATING  
 (HELICOPTER ONLY)**

**NOTE: European Commission Regulation (EU) No. 1178/2011 as amended, requires that an individual has all of their licences administered by the National Aviation Authority that holds their medical records (Part MED.A.030 and FCL.015).**

**If your medical records are not held by the IAA, your application will be rejected.**

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 .....

Address for correspondence (if different from above) .....

..... Postcode .....

**2. DETAILS OF FLIGHT CREW LICENCE(S) HELD**

State of Issue	Type of Licence (e.g. PPL or CPL)	Category of Licence (e.g. Aeroplane, Helicopter etc)	Licence No.	Expiry Date

**3. FLYING EXPERIENCE**

	Part-FCL qualifying hours	Hours completed	IAA use only
Total flight time as Pilot of Helicopters (after PPL(H) issue)	<b>100</b>		
Total flight time as Pilot-in-Command of Helicopters (after PPL(H) issue)	<b>60</b>		
Total cross-country flight time as Pilot of Helicopters (after PPL(H) issue)	<b>20</b>		

**4. APPLICATION & DECLARATION**

I hereby apply for the issue of a Night rating (Helicopter).

I hereby declare that:-

- 1) I do not hold a Night Rating (Helicopter) issued by another EASA Member State;
- 2) I have not applied for a Night Rating (Helicopter) in another Member State;
- 3) I have never held a Night Rating (Helicopter), issued another Member State, which was revoked or suspended.

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

Applicant's 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.



**5. COURSE COMPLETION CERTIFICATE**

**This Certificate must be signed by the Head of Training (or nominated deputy) of the Approved Training Organisation (ATO) that conducted the training course.**

I certify that ..... has satisfactorily completed a course of training in accordance with FCL.810(b) for the issue of a Night Rating. The course consisted of:

	Part-FCL qualifying hours	Hours completed	IAA use only
Dual instrument instruction (simulated IMC)	<b>10*</b>		
Total flight training at night	<b>5</b>		
Dual instruction at night	<b>3</b>		
Dual instruction in cross-country navigation at night	<b>1</b>		
Theoretical knowledge instruction	<b>5</b>		

\* reduced to 5 hours if the applicant holds, or has held, an IR(A).

	Part-FCL qualifying minima	No. completed	IAA use only
Solo night circuits (each to include a take-off & landing)	<b>5</b>	No. ....	

Course duration (max. 6 months): Start date: ...../...../..... Finish date: ...../...../.....

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

Name (BLOCK CAPITALS) ..... Position .....

Name of ATO ..... ATO No. ....

**GUIDANCE NOTES, PAYMENT FORM & SUBMISSION INSTRUCTIONS**

**Guidance Notes**

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 will be entered on your licence, and will also be the address to which the licence will be sent. If you want the licence sent to an alternative address, please enter the details under ‘correspondence address’.

**Section 2 – Details of Flight Crew Licence(s) held**

Please enter details of the flight crew licence(s) held.

**Section 3 – Flying Experience**

Please enter details of your flying experience in the relevant sections of the table.

**Section 4 – Application & Declaration**

This section must be completed by the applicant after reviewing all information entered on the application form. If you are unable to agree with any of the statements in the declaration, please contact the Personnel Licensing Office for further advice before submitting this application.

**Section 5 – Course Completion Certificate**

This Section must be completed by the Head of Training (or nominated deputy) of the ATO that conducted the course of training.



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### SUBMISSION INSTRUCTIONS

**Please note that failure to complete this form fully and submit all required documentation may result in the return of your application**

Send your completed application form to:

Personnel Licensing Office, Irish Aviation Authority, The Times Building, 11-12 D'Olier Street, Dublin 2, Ireland.

Please enclose the following:-

- Original flying logbook(s)
- Completed payment form

**If applicable;**

- Copy of your Aeroplane Licence, if credit has been given in Section 5 for holding, or having held, an IR(A).
- Copy of ATO Approval Certificate (including any appendices) **(If course is completed at a non-IAA approved ATO).**

### PAYMENT FORM

The current Night Rating issue fee can be found in the current version of the IAA Fees Schedule

Full details of fees charged and levied by the IAA are published in the current Fees Schedule.

DEBIT CARD  CREDIT CARD

**- PLEASE DO NOT SEND CASH -**

Please make cheques payable to 'Irish Aviation Authority'.

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 card details are destroyed upon completion of the transaction.

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)