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Issue Date: 20/02/2024

# APPLICATION FOR THE ISSUE OF A PART-FCL COMMERCIAL PILOT LICENCE & SKILL TEST (HELICOPTER)

(modular course 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						
				First Name(s)			
Title (Mr / Mrs / Ms	s etc)			Date of Birth (do	d/mm/yyyy)		
Nationality				Place of Birth (T	Гown)	(Country)	
Permanent addres	ss						
				Postcode			
Contact Tel. No				Mobile Tel. No.			
E-mail address				Fax Number			
Address for corres	spondence (if o	different from abo	ove)				
				Postcode			
2. DETAILS OF	EXISTING I	LIGHT CREW	/ LICE	NCE(S) HELD			
State of Issue		ype of Licence		Category of Licence	Licence	e No.	Expiry Date
	(e	.g. PPL, CPL etc)		(e.g. Aeroplane, Helicopter e	;tC)		
					L	L	
3. APPLICATIO	3. APPLICATION (tick as appropriate)						
l am applying for t	he issue of a	Part-FCL CPL(I	H), inc	luding the Type rating ind	licated below;		
Type (please specif	y):						
Type of course co	mpleted:						
CPL(H) Modular reduced CPL(H) Modular							
f a reduced CPL(H) Modular course has been completed, indicate below the basis for the reduction:-							
CAO CPL(H) / ATPL(H) Valid IR(H) Valid IR(A)							
4. CLASS 1 ME	DICAL CER	TIFICATE					
State of Issue	Date of Medical	Expiry Date of Class 1 privileges	AME	E Name,Medical Centre & Location	AME No.	Details of any Limitations / Endorsements	IAA use only



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### 5. FLIGHT EXPERIENCE

	Part-FCL minima (Hours)	Hours completed	IAA use only
Total flight time as pilot of helicopters	185¹		
2. Flight time as pilot-in-command of helicopters	50		
3.(a) VFR cross-country flight time as pilot of helicopters	10		
(b) Date of most recent Pilot-in-Command cross-country flight of not less than 185km (100nm) during which full stop landings at two aerodromes different from the aerodrome of departure have been made	N/A	Date/	

- <sup>1</sup> Other flight time will be credited as follows;
  - as pilot-in-command of aeroplanes if the holder of a PPL(A) (max. credit 20 hrs)
  - as pilot-in-command of aeroplanes if the holder of a CPL(A) (max. credit 50 hrs)
  - as pilot in command of touring motor gliders or gliders (max. credit 10 hrs)
  - as pilot-in-command of airships if the holder of a PPL(As) (max. credit 20 hrs)
  - as pilot-in-command of airships if the holder of a CPL(As) (max. credit 50 hrs)

Credit claimed (Hours)	IAA use only

### 6. THEORETICAL KNOWLEDGE

Level of examinations passed (e.g. CPL(H) or ATPL(H))	Member State under whose authority exams were passed	Date of final examination pass	Expiry date of examination pass	IAA use only

## 7. ENGLISH LANGUAGE PROFICIENCY (ELP)

Date of ELP Assessment	Level achieved	Name of Examiner	Examiner Number	IAA use only



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## 8. COURSE COMPLETION CERTIFICATE (to be completed by the Head of Training)

with Appendix 3 to Part-FCL and has satisfactorily complete (Helicopter). I further certify that I have examined the applitude flying experience requirements for the grant of a Part-F	ed a modular course of training for the grant of a Commicants flying logbook(s) and that the entries contained the	nercial Pilot Licence
PBN theoretical knowledge course in accordance with FCL	615 of Annex I (Part-FCL) YES] NO]	
PBN flight training in accordance with FCL.615 of Annex I (	(Part-FCL) YES] NO]	
Date course started:	Date course completed:	
Training Course Summary (Complete as applicable)		Hours Completed
Dual visual flight instruction		
Dual Instrument flight instruction in Helicopters		
Dual Instrument flight instruction in Aeroplanes		
Instrument Ground time (Helicopter FTD 1 / FNPT I) (FS	TD Identification No(s)	
COURSE TOTAL		
<b>Note:</b> If additional night flight instruction was given due to the appl complete IAA form RPPL-F-125E (Application for a Night Rating (Fig. 1).		se, please also
Approved Training Organisation (ATO)	ATO Approval No	
Competent Authority issuing Approval		
Name of Head of Training		
Signature of Head of Training:	Date:	
9. CPL(H) SKILL TEST (to be completed by the Examin	ner)	
I certify that I have examined the applicants flying logbook( requirements for the grant of a Part-FCL Commercial Pilot		ing experience
I further certify that (Name)	has passed the CPL(H) skill test.	
Pass date:/ Aircraft type:	Aircraft registration:	
Examiner's Name:	Examiner Number:	
Issuing Competent Authority:	Date of 'Non-IAA Examiner's Briefing' (if applic	able)://
Examiners signature:	Date:	
Note: Examiners are reminded that they must complete the	e Skill Test Report Form and submit to the IAA's Person	nel Licensina

**Note:** Examiners are reminded that they must complete the Skill Test Report Form and submit to the IAA's Personnel Licensing Office within 14 days of the date of skill test, and if applicable, a copy of the confirmation email(s) from the IAA in respect of the 'Non-IAA Examiner Briefing' and 'Notification of Test'.



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#### 10. IAA SUMMARY PRIVACY NOTICE

How will we use your information?

The information you provide to us via this form will be used to enable us to carry out our regulatory duties including processing your request for the issue of a licence, the administration and maintenance of subsequent licences/certificates and for enforcement purposes. We will not disclose any of your information to any organisation without your explicit consent, except where we are obliged to do so under relevant EU and Irish legislation, or to comply with law enforcement agencies.

Where can you find out more?

To find out more about how the IAA respects your privacy, please read our detailed privacy notice at https://www.iaa.ie/home/footertools/privacy or contact our Data Protection Officer at dataprotection@iaa.ie, or write to Data Protection Officer, Irish Aviation Authority, The Times Building, 11-12 D'Olier Street, Dublin 2, D02 T449.

### 11. APPLICANT'S DECLARATION

I hereby declare that:-

- 1) I do not hold a Part-FCL licence issued by another EASA Member State;
- 2) I have not applied for a Part-FCL flight crew licence in another Member State;
- 3) I have never held a flight crew licence, 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, prequire to be made	or againt in making any false representations for the purpose of

**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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# PART 2 – EXAMINER REPORT FOR CPL (H) SKILL TEST

SECTION 1 PRE-FLIGHT OR POST-FLIGHT CHECKS AND PROCEDURES

				·	nm/yyyy)
Attempt No.:		Date of Test:	Place	of Test:	
Applicant's sign	nature:				
and that the er FCL Commerc	tries contained the ial Pilot Licence (H	rein meet, in full, the	e qualification, training a ade the applicant awar	and experience requirer	nents for the initial issue of a Part- of providing incomplete, inaccurate
Examiner's Na	me:		Б	kaminer Number:	
Issuing Compe (of Examiner Cer			Da	ate of Skill Test Notifica	tion to the IAA://
Examiners sigr	nature:				
IAA's Personne	el Licensing Office		ble but at within 14 days		t) and <u>submit the original</u> to the together with a copy of the
DETAILS (	OF FLIGHT(S)				
Attempt No.					
Date	Aircraft Type	Registration	Block Times Departure Arrival		Duration
Result: F	Pass	Partial Pass	Fail		
Partial pass	/ Fail only: If appl	licable, specify any	further training requiren	nent (hours) prior to re-t	est:
A/C		Sim/FN	IPT II	Ground .	
Partial Pass	Re-test				
Date	Aircraft Type	Registration	Block Departure	Times Arrival	Duration
Result: F	Pass	Fail			
Fail only					
If applicable,	specify any further	training requiremen	t (hours) prior to the ne	xt attempt::	
A/C		Sim/FN	IPT II	Ground .	
Name of applic	ant			Date of Birth (dd/	/mm/yyyy)



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	Use of checklist, airmanship, control of helicopter by external visual reference, anti/de-icing procedures, etc. apply in all sections	1 <sup>st</sup> Atte Pass (√)	empt Fail (√)	2 <sup>nd</sup> Att Pass (√)	empt Fail (✓)	Comments
а	Helicopter knowledge (e.g. technical log, fuel, mass and balance, performance), flight planning, documentation, NOTAMS, weather					
b	Pre-flight inspection/action, location of parts and purpose					
С	Cockpit inspection, starting procedure					
d	Communication and navigation equipment checks, selecting and setting frequencies					
е	Pre-take-off procedure, R/T procedure, ATC liaison-compliance					
f	Parking, shutdown and post-flight procedure					
	Result of Section (circle as applicable)	Pass	Fail	Pass	Fail	

	CTION 2 HOVER MANOEUVRES, ADVANCED HANDLING AN	1 <sup>st</sup> Att			ttempt	
		Pass	empt Fail	Pass	Fail	Comments
		(√)	(√)	(✓)	(✓)	
а	Take-off and landing (lift-off and touchdown)					
b	Taxi, hover taxi					
С	Stationary hover with head/cross/tail wind					
d	Stationary hover turns, 360° left and right (spot turns)					
е	Forward, sideways and backwards hover manoeuvring					
f	Simulated engine failure from the hover					
g	Quick stops into and downwind					
h	Sloping ground/unprepared sites landings and take-offs					
i	Take-offs (various profiles)					
j	Crosswind, downwind take-off (if practicable)					
k	Take-off at maximum take-off mass (actual or simulated)					
1	Approaches (various profiles)					
m	Limited power take-off and landing					
n	Autorotations (FE to select two items from — Basic, range, low speed, and 360° turns)					
0	Autorotative landing					
р	Practice forced landing with power recovery					
q	Power checks, reconnaissance technique, approach and departure technique					
	Result of Section (circle as applicable)	Pass	Fail	Pass	Fail	

Name of applicant  Date of Birth (dd/mm/\qqqq)		
Name of applicant	Name of applicant	Date of Birth (dd/mm/yyyy)

Use of checklist, airmanship, control of helicopter by external visual reference, anti/de-icing procedures, etc. apply in all sections

SEC	CTION 3 NAVIGATION AND EN-ROUTE PROCEDURES			
		1 <sup>st</sup> Attempt	2 <sup>nd</sup> Attempt	Comments



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		_				
		Pass	Fail	Pass	Fail	
		(✔)	(✔)	(✔)	(✔)	
а	Navigation and orientation at various altitudes/heights, map reading					
b	Altitude/height, speed, heading control, observation of airspace, altimeter setting					
С	Monitoring of flight progress, flight log, fuel usage, endurance, ETA, assessment of track error and re-establishment of correct track, instrument monitoring					
d	Observation of weather conditions, diversion planning					
е	Tracking, positioning (NDB and/or VOR), identification of facilities					
f	ATC liaison and observance of regulations, etc.					
	Result of Section (circle as applicable)	Pass	Fail	Pass	Fail	

SECTION 4 FLIGHT PROCEDURES AND MANOEUVRES BY SOLE REFERENCE TO INSTRUMENTS						
		1 <sup>st</sup> Att Pass (√)	empt Fail (√)	2 <sup>nd</sup> Att Pass (√)	tempt Fail (√)	Comments
а	Level flight, control of heading, altitude/height and speed					
b	Rate 1 level turns onto specified headings, 180°to 360°left and right					
С	Climbing and descending, including turns at rate 1 onto specified headings					
d	Recovery from unusual attitudes					
е	Turns with 30° bank, turning up to 90° left and right					
	Result of Section (circle as applicable)	Pass	Fail	Pass	Fail	

SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES (SIMULATED WHERE APPROPRIATE)						
	<b>Note (1):</b> Where the test is conducted on a multi-engine helicopter a simulated engine failure drill, including a single-engine approach and landing, shall be included in the test.	1 <sup>st</sup> Attr Pass (√)	empt Fail (✔)	2 <sup>nd</sup> Att Pass (√)	tempt Fail (√)	Comments
	Note (2): The FE shall select 4 items from the following:					
а	Engine malfunctions, including governor failure, carburettor/engine icing, oil system, as appropriate					
b	Fuel system malfunction					
С	Electrical system malfunction					
d	Hydraulic system malfunction, including approach and landing without hydraulics, as applicable					
е	Main rotor and/or anti-torque system malfunction (FFS or discussion only)					
f	Fire drills, including smoke control and removal, as applicable					
g	Other abnormal and emergency procedures as outlined in appropriate flight manual, including for multi-engine helicopters: Simulated engine failure at take-off: rejected take-off at or before TDP or safe forced landing at or before DPATO, shortly after TDP or DPATO.  Landing with simulated engine failure: landing or go-around following engine failure before LDP or DPBL, following engine failure after LDP or safe forced landing after DPBL.					
	Result of Section (circle as applicable)	Pass	Fail	Pass	Fail	



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Name of applicant	Date of Birth (dd/mm/yyyy)

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Use of checklist, airmanship, control of helicopter by external visual reference, anti/de-icing procedures, etc. apply in all sections

#### Note.

The helicopter used for the skill test shall meet the requirements for training helicopters.

The area and route to be flown shall be chosen by the FE and all low level and hover work shall be at an approved aerodrome/site. Routes used for section 3 may end at the aerodrome of departure or at another aerodrome and one destination shall be a controlled aerodrome. The skill test may be conducted in 2 flights. The total duration of the flight(s) shall be at least 90 minutes.

Items in section 4 may be performed in a helicopter FNPT or a helicopter FFS. Use of helicopter checklists, airmanship, control of helicopter by external visual reference, anti-icing procedures, and principles of threat and error management apply in all sections.

The following limits shall apply, corrected to make allowance for turbulent conditions and the handling qualities and performance of the helicopter used.

- Height
  - normal flight ±100 feet
  - simulated major emergency ±150 feet
  - Tracking on radio aids ±10°
- Heading
  - normal flight ±10°
  - simulated major emergency ±15°
- Speed
  - take-off and approach multi-engine ±5 knots
  - all other flight regimes ±10 knots
- Ground drift
  - T.O. hover I.G.E. ±3 feet
  - landing no sideways or backwards movement



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#### **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

Please ensure that your First Name(s) are entered **exactly** as per the 'evidence of identity' document that you submit with your application - see Submission instructions at the end of this form.

The permanent address will be entered on your Part-FCL CPL(H) 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 Existing Flight Crew Licence(s) held

Please enter details of all flight crew licence(s) (including foreign licenses) held.

#### Section 3 - Application

Please indicate the Type rating for which you are applying, the type of CPL(H) modular course completed, and the basis for any reduction given in the training course.

#### Section 4 - Class 1 Medical Certificate

Please enter details of your valid Part-MED Class 1 Medical Certificate.

### Section 5 - Flight Experience

Please enter details of your flying experience in the relevant sections of the table. Note:- Credit for PIC flight time in an aircraft category other than Helicopters can only be claimed if you hold a pilot licence, or equivalent privileges, for the appropriate category of aircraft.

#### Section 6 - Theoretical Knowledge

Please enter details of the theoretical knowledge examinations passed. If the examinations have not been passed with the IAA, the results will be verified with the State under whose authority exams were passed as part of the licence issue process.

### Section 7 - English Language Proficiency (ELP)

Please enter details of your ELP assessment.

#### Section 8 - Course Completion Certificate

This section must be completed by the ATO's Head of Training or nominated Deputy. If a Night Rating was not held by the applicant at commencement of the CPL Modular course and the required additional night flying instruction was given, the Head of Training must also complete the course completion certificate on IAA form RPPL-F-125E (Application for a Night Rating (Helicopter)).

### Section 9 - CPL(H) Skill Test

This section must be completed by the Examiner who conducted the CPL(H) skill test.

### Section 11 - Applicant's Declaration

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



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# **SUBMISSION INSTRUCTIONS (see Guidance Notes)**

Send y	your completed application form to:
Persor	nnel Licensing Office, Irish Aviation Authority, 11-12 D'Olier Street, Dublin 2, Ireland.
Please	e enclose the following:-
A	All original Flying logbooks
□ C	Copy of your valid Part-MED Class 1 Medical Certificate
□ C	Copy of your Passport or National Identity card as evidence of identity
□ C	Copy of your Part-FCL theoretical knowledge examination results
□ C	Completed payment form (if paying by credit / debit card), or cheque / postal order.
If App	olicable
□ C	Completed application form RPPL-F-125E (if a Night Rating was not held prior to commencing the CPL(H) Modular Course
	Copy of ICAO CPL(H) / ATPL(H) and validating medical certificate <u>or</u> valid IR(H) <u>or</u> valid IR(A), as applicable <b>(reduced CPL(H) modular course applicants ONLY)</b>
	Copy of relevant flight crew licence(s) / qualification(s) and validating medical certificate(s), (if claiming credit in Section 5 for flight experience in an aircraft category other than helicopters).
(I	English Language Proficiency Assessment form RPPL-F-270 or local equivalent if completed with a non-IAA ELP assessor <b>Note:</b> the acceptance of a non-IAA ELP assessor or English Language Assessment Body must be confirmed by the IAA in advance)
□ C	Copy of ATO Approval Certificate (if CPL(H) Modular course is completed with a non-IAA approved ATO).
	Copy of the Flight Examiner's flight crew licence and examiner certificate (if skill test was completed with a non-IAA certificated Examiner)
□ C	Copy of the FSTD Qualification Certificate (if a FSTD is used on the training course)
Please	e note that failure to submit all required documentation may result in the return of your application.



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### **PAYMENT FORM**

Valid from:

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

The current CPL(H) issue fee can be found under in the current version of the IAA Fees Schedule. For existing holders of an IAA-issued Part-FCL PPL(H), the issue fee includes the transfer of all **valid** ratings currently endorsed on the licence - endorsement of additional rating(s) (e.g. additional Type rating(s) etc will incur an **additional** fee per rating.

additional rating(s) (e.g. additional Type rating(s) etc will incur an additional fee per rating.

Full details of fees charged and levied by the IAA are available in the current version of the 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 card details are destroyed upon completion of the transaction.

Name of Card holder (as stated on the card)

Card Number

Card Number

**Expiry Date**