

AMDT No. 6

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Issue Date: 26/06/2024

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.

MySRS Referer	nce Number: IAA -			
	Please register and setu	ıp an account at <u>https://iaa.m</u>	ysrs.ie/auth/sign-in	
	*** MySRS is b	eing used for online paymen	ts only***	
Please do not se time.	end application documen	ts to MySRS, this is to be use	ed for payment met	hods only at this
Please complet	e the form in BLOCK CA	PITALS having read the guida	ance notes attached	d to this form.
1. PERSONAL DETA	AILS			
Surname		First Name(s)		
Title (Mr / Mrs / Ms etc)		Date of Birth (dd/mm	/yyyy)	
Nationality		Place of Birth (Town)) (Cou	ıntry)
Permanent address				
		Postcode		
Contact Tel. No		Mobile Tel. No		
E-mail address		Fax Number		
Address for corresponde	ence (if different from above)			
		Postcode		
2. DETAILS OF EXIS	STING FLIGHT CREW LIG	CENCE(S) HELD		
2. DETAILS OF EXIS	Type of Licence	Category of Licence	Licence No.	Expiry Date
			Licence No.	Expiry Date
	Type of Licence	Category of Licence	Licence No.	Expiry Date
	Type of Licence	Category of Licence	Licence No.	Expiry Date
	Type of Licence	Category of Licence	Licence No.	Expiry Date
	Type of Licence (e.g. PPL, CPL etc)	Category of Licence	Licence No.	Expiry Date
State of Issue 3. APPLICATION (ti	Type of Licence (e.g. PPL, CPL etc) ck as appropriate)	Category of Licence		Expiry Date
State of Issue 3. APPLICATION (till am applying for the issue)	Type of Licence (e.g. PPL, CPL etc) ck as appropriate)	Category of Licence (e.g. Aeroplane, Helicopter etc)		Expiry Date
State of Issue 3. APPLICATION (till am applying for the issue)	Type of Licence (e.g. PPL, CPL etc) ck as appropriate) sue of a Part-FCL CPL(H), in	Category of Licence (e.g. Aeroplane, Helicopter etc)		Expiry Date
3. APPLICATION (till am applying for the iss	Type of Licence (e.g. PPL, CPL etc) ck as appropriate) sue of a Part-FCL CPL(H), in	Category of Licence (e.g. Aeroplane, Helicopter etc)		Expiry Date
3. APPLICATION (till I am applying for the issue) Type (please specify): Type of course complete CPL(H) Modular	Type of Licence (e.g. PPL, CPL etc) ck as appropriate) sue of a Part-FCL CPL(H), inted: reduced CPL(H) Mode	Category of Licence (e.g. Aeroplane, Helicopter etc)	ed below;	Expiry Date



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4. CLASS 1 MEDICAL CERTIFICATE

State of Issue	Date of Medical	Expiry Date of Class 1 privileges	AME Name,Medical Centre & Location	AME No.	Details of any Limitations / Endorsements	IAA use only

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//	

- ¹ 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)

I certify that (name)	ted a modular course of training for the grant of a Commicants flying logbook(s) and that the entries contained th	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		
Note: If additional night flight instruction was given due to the appromplete IAA form ECON.ACW-F-125E (Application for a Night Recomplete IAA)		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 Exami	iner)	
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 Persor	nnel 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:-

Applicant's Signature

- 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 affance for a name to us	ake produre to be made, or assist in making a	
NOTE: It is an offence for a person to make	ake proclire to be made or assist in making a	any taise renresentations for the hitrhose 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

Name of appli	cant:			Date of Birth: (dd/r	nm/yyyy)
Attempt No.: .		Date of Test:	Place	of Test:	
Applicant's sig	nature:				
and that the e	ntries contained the cial Pilot Licence (H	rein meet, in full, the	e qualification, training a ade the applicant awar	and experience requirer	ments for the initial issue of a Part- of providing incomplete, inaccurate
Examiner's Na	ame:		E>	kaminer Number:	
Issuing Composite (of Examiner Co			Da	ate of Skill Test Notifica	tion to the IAA://
Examiners sig	nature:				
IAA's Personn 'Notification of	el Licensing Office	as soon as practical email (including sigr	ble but at within 14 days		st) and <u>submit the original</u> to the together with a copy of the
Attempt No.	. ,				
Attempt No.			Block	Times	
Date	Aircraft Type	Registration	Departure	Arrival	Duration
Result:	Pass	Partial Pass	Fail		
Partial pass	/ Fail only: If app	licable, specify any t	further training requiren	nent (hours) prior to re-	test:
A/C		Sim/FN	IPT II	Ground	
Partial Pass	Re-test				
1 ditidi i dos			Block	Times	
Date	Aircraft Type	Registration	Departure	Arrival	Duration
Result:	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 "				D-4(D) (1 / 1)	lmm h n n n l
Name of application	cant			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 st Atte Pass (√)	empt Fail (√)	2 nd Att Pass (√)	tempt 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	

SEC	ECTION 2 HOVER MANOEUVRES, ADVANCED HANDLING AND CONFINED AREAS					
		1 st Attempt Pass Fail		2 nd Att Pass (√)	tempt 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)					
ı	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)					
О	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	

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 st Attempt	2 nd Attempt	Comments



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ation at various altitudes/heights, map	Pass (√)	Fail (✔)	Pass (√)	Fail (✔)	
ation at various altitudes/heights, map	(✔)	(✓)	(✔)	(✓)	
ation at various altitudes/heights, map					
d, heading control, observation of airspace,					
ogress, flight log, fuel usage, endurance, track error and re-establishment of correct hitoring					
er conditions, diversion planning					
(NDB and/or VOR), identification of facilities					
ervance of regulations, etc.					
	e of regulations, etc.				

SEC	SECTION 4 FLIGHT PROCEDURES AND MANOEUVRES BY SOLE REFERENCE TO INSTRUMENTS									
		1 st Attempt Pass Fail (√) (√)		2 nd Attempt Pass 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)									
	Note (1): 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 st 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)	

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 ECON.ACW-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	d your completed application form to:
Pers	onnel Licensing Office, Irish Aviation Authority, 11-12 D'Olier Street, Dublin 2, Ireland.
Plea	se enclose the following:-
	All original Flying logbooks
	Copy of your valid Part-MED Class 1 Medical Certificate
	Copy of your Passport or National Identity card as evidence of identity
	Copy of your Part-FCL theoretical knowledge examination results
	Completed payment form (if paying by credit / debit card), or cheque / postal order.
If Ap	pplicable
 Cou	Completed application form ECON.ACW-F-125E (if a Night Rating was not held prior to commencing the CPL(H) Modular rse).
	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 (reduced CPL(H) modular course applicants ONLY)
	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).
	English Language Proficiency Assessment form ECON.ACW-F-270 or local equivalent if completed with a non-IAA ELP assessor (Note: the acceptance of a non-IAA ELP assessor or English Language Assessment Body must be confirmed by the IAA in advance)
	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)
	Copy of the FSTD Qualification Certificate (if a FSTD is used on the training course)
Plea	se note that failure to submit all required documentation may result in the return of your application.



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PAYMENT

Submissions will not be processed unless you are registered on MySRS. Please ensure you have registered and setup your account at https://iaa.mysrs.ie/auth/sign-in before making any further applications.

Please do not send application documents to MySRS, this is to be used for payment methods only at this time.

The current fee can be found under in the Current IAA Fees Schedule' on the IAA website (www.iaa.ie). The issue fee includes the issue of one aeroplane class or type rating. Endorsement of additional rating(s) (e.g. Night rating or additional Class rating(s)) will incur an **additional** fee per rating.

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

MySRS Reference Number:	IAA -			_				
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An invoice will be generated and sent to your MySRS account/email for secure online payment.

- PLEASE DO NOT SEND CASH -