



**1. PERSONAL DETAILS OF LICENCE HOLDER**

1. HCAA License No.
2. Surname ..... First Name(s) .....
3. Title (Mr / Mrs / Ms etc.) ..... Date of Birth (dd/mm/yyyy).  /  /
4. Permanent address  
 .....  
 ..... Postcode .....
5. Contact Tel. No. .... Mobile Tel. No. ....
6. E-mail address .....

**2. DETAILS OF CLASS RATING REVALIDATION SOUGHT: (Tick as applicable):**

**2.1 EU PART-FCL LICENCE:** Aeroplane (SEP) - Land  Sea  / TMG

**3. DECLARATION BY APPLICANT PILOT:  
 (Insert paragraph number as applicable from Schedule of Flight Experience attached to this form)**

- I hereby declare that,
1. preceding the expiry date of my rating (ticked at Section 2 above), I have not less than the prescribed number of hours of flight experience as listed in Paragraph  of the Schedule of Flight Experience attached to this form, and have completed a training flight of at least 1-hour with a flight instructor for the applicable class within the appropriate period; or
  2. IAW FCL.740.A (b)(1)(ii) I claim exemption from the 1-hour training flight in 1 above  (Tick box & attach evidence to support); and
  3. I presented my pilot log-book/record to the Examiner named in Section 4 below as evidence of the above.

Applicant Pilot Signature: \_\_\_\_\_ Date:

It is an offence under the EU Regulations or the HCAA (Personnel Licensing) Order (as appropriate) 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 revalidation of a rating, required by the Order, whether for that person or any other person.

**4. DETAILS OF THE EXAMINER or \*HCAA AUTHORISED INSTRUCTOR (\*See Guidance on page 3)**

Examiner / HCAA Authorized Instructor Surname ..... First Name(s) .....

Examiner / or HCAA Instructor No.  Date of Birth (dd/mm/yyyy)  /  /

**5. DECLARATION BY THE EXAMINER or HCAA AUTHORISED INSTRUCTOR (\*See Guidance on page 3)**

I have identified the applicant by Passport  Driving License  National Identity Card  No: on ID):.....

I have substantiated the applicant's declaration against the pilot log-book/ record and certify the following details for the appropriate Schedule of Flight Experience declared above in Section 3:

Total applicable flight hours recorded..... Total hours PIC..... Total number of Take-off and Landings..... Training flight of at least 1 hour with Flight Instructor No..... or I have reviewed the attached evidence for the exemption claimed under FCL.740.A (b)(1)(ii).

Expiry Date of Current Rating: . Expiry date (2-years) of revalidated rating: .

*I have reviewed and applied the national procedures and requirements of the applicant's competent authority contained in the latest version of the Examiner Differences Document (only applicable where the competent authority responsible for the applicant's license is not the same that issued the examiner's certificate); Examiner Differences Document Version \_\_\_\_\_*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_



## SCHEDULE OF FLIGHT EXPERIENCE

### Paragraph 1: EU Part-FCL License with SEP Aeroplane (Land or Sea) or TMG rating

(1) within the 12 months preceding the expiry date of the rating, complete 12 hours of flight time in the relevant class (EASA or non-EASA aircraft), including:

- (i) 6 hours as PIC,
- (ii) 12 take-offs and 12 landings, and

(2) a training flight of at least 1 hour with a flight instructor (FI) or a class rating instructor (CRI).

**(Note 1):** IAW FCL.740.A (b)(1)(ii) applicants shall be exempted from the training flight if they have passed a class or type rating proficiency check or skill test in any other class or type of aeroplane.

**(Note 2):** When applicants hold both a SEP aeroplane-land class rating and a TMG rating, they may complete the requirements of (1) in either class or a combination thereof and achieve revalidation of both ratings.

**(Note 3):** When applicants hold both a single-engine piston aeroplane-land class rating and a single-engine piston aeroplane-sea class rating, they may complete the requirements of (1)(ii) in either class or a combination thereof and achieve the fulfilment of these requirements for both ratings. At least 1 hour of required PIC time and 6 of the required 12 take-offs and landings shall be completed in each class.

## GUIDANCE NOTES & SUBMISSION INSTRUCTIONS

### Section 1: Personal Details of License holder

- Use BLOCK CAPITALS and ink when filling in the form
- Complete all parts of Section 1 – items 1 to 6.

**Section 2: Details of Class Rating revalidation sought** - Indicate the Class rating you are revalidating

### Section 3: Declaration by applicant Pilot

- Read the Schedule of Flight Experience attached to this form. Select the appropriate Paragraph number that indicates the experience requirements to support the rating you selected (ticked) in Section 2.
- Enter the Paragraph number in the box at 3.1.
- If you wish to claim an exemption from the 1-hour training flight with an instructor in accordance with FCL.740.A (b)(1)(ii), tick the box at 3.2.
  - a) To be eligible for the exemption you must attach evidence of having complied with FCL.740.A (b)(1)(ii).
  - b) Failure to attach evidence will result in the application being rejected.
- To demonstrate compliance with applicable experience requirements you must present your FCL.050 compliant logbook to the Examiner or HCAA Authorized Instructor for review.
- Once the Examiner or HCAA Authorized Instructor confirms that the experience requirements have been complied with you must sign the declaration and date it. (Date Format = DDMMYY)

### Section 4: Details of the Examiner or HCAA Authorized Instructor

- The Examiner or HCAA Authorized Instructor enters their details in Section 4.

### Section 5: Declaration by the Examiner or HCAA Authorized Instructor

- The Examiner or HCAA Authorized Instructor confirms the identity of the applicant and then enters the Identity document number in the space provided.
- The Examiner or HCAA Authorized Instructor enters the Total applicable flight hours, Total hours PIC and the Total number of Take-off and Landings onto the form using the evidence obtained from the applicants logbook.
- If the applicant is claiming an exemption under FCL.740.A (b)(1)(ii) the Examiner or HCAA Authorized Instructor shall sight the supporting evidence before signing the declaration in Section 5.
- Once the experience evidence as defined in the Schedule of Flight Experience attached to this form has been substantiated the Examiner or HCAA Authorized Instructor enters the Expiry Date of Current Rating and then the new Expiry date (+2-years) from current valid rating. The Examiner or HCAA Authorized Instructor then signs the declaration and dates the form.



**NOTES**

It is an offence under the EU Regulations or the HCAA (Personnel Licensing) Order (as appropriate) 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 revalidation of a rating, required by the Order, whether for that person or any other person.

**HCAA Authorized Instructor** means an instructor **holding a specific authorization on the license issued by the HCAA**. No other Instructor may complete or make a declaration relating to this form. If an instructor does not hold a specific authorization from the HCAA and completes the form the application will be rejected.

The Examiner or HCAA Authorized Instructor (see above) shall complete sections 4 and 5 when revalidating the rating in the field. **Non-HCAA Authorized Examiners shall attach a copy of their License, Medical and Examiner Authorization with the application**. Failure to provide these documents will result in the application being rejected.

**Submission Checklist**

**DO NOT submit this form unless you can answer (Yes or N/A) as applicable to the following:**

Have you entered your most current contact details into Section 1?	No	Yes
Have you produced evidence of sufficient flight experience logged, and Evidence of a 1-hour training flight with an instructor; or if claiming an exemption from the 1-hour flight under FCL.740.A (b)(1)(ii) attached evidence of compliance with FCL.740.A (b)(1)(ii)?	No	Yes
Have you signed the declaration at Section 3?	No	Yes
If using a Non-HCAA Authorized Examiner, have you obtained a copy of the documents as listed in the Notes on Page 3 and attached them to the form?	N/A	Yes
Has the Examiner or HCAA Authorized Instructor reviewed your FCL.050 compliant logbook and if applicable the supporting evidence i.a.w FCL.740.A (b)(1)(ii)?	No	Yes
Has the Examiner or HCAA Authorized Instructor completed Section 5?	No	Yes
Has the Examiner or HCAA Authorized Instructor revalidated your license page? (If your License page is full – then tick the box for a new License to be Re-issued) <input type="checkbox"/>	No	Yes
Has the Examiner or HCAA Authorized Instructor signed and dated Section 5?	No	Yes
<b>If you wish your license to be re-issued, have you paid and attached Eparavolo Fee Code (PPL Re-issue) 8781 or (CPL Re-issue) 8783 or (ATPL Re-issue) 8785?</b>	N/A	Yes

Please, send your application along with the applicable attachments to [info@hcaa.gov.gr](mailto:info@hcaa.gov.gr) with the following  
 Subject: **PEL-FCL- (License Number if available & Last Name)**

**HCAA Use Only:**

Application Review:	Issue <input type="checkbox"/>	Pending Items <input type="checkbox"/>	Do not Issue <input type="checkbox"/>
Pending Items			
Applicant Informed via	DMS <input type="checkbox"/>	TEL <input type="checkbox"/>	EMAIL <input type="checkbox"/>
	Date:	Tick IF UPDATED <input checked="" type="checkbox"/>	
Type/Class Rating Issued:	Expiry Date:		
Restrictions			
HCAA Authorized Personnel (Name):			
Signature:	Date:		