

Revision 2

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Revision Date: 04/11/2024

APPLICATION FOR THE ISSUE OF A PART-FCL AIRLINE TRANSPORT PILOT LICENCE

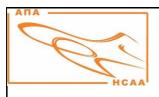
(HELICOPTER)

European Commission Regulation (EU) No. 1178/2011 as amended, requires that an individual has all of their licenses 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 HCAA, your application will be rejected.

Please complete the form in BLOCK CAPITALS having read the GUIDANCE NOTES attached to this form.

1. PERSONAL D	ETAILS								
Surname									
	itle (Mr / Mrs/ Ms etc)								
Nationality					•		•		
Permanent address									
Contact Tel. No				Mobile	Tel. No				
E-mail address									
2. DETAILS OF E	XISTING FLIG	HT CREV	V LICE	NCE(S) HELD					
State of Issue		of License L, ATPL etc	:)	Category o (e.g. Aeroplane,			icense No.		Expiry Date
	(3.3. 3.		,	(9					
3. APPLICATION	(tick as appro	priate)					To be co	mplet	ed by applicant
I am applying for the	issue of a Part-F	CL ATPL(I	H), on t	he basis of;					
Upgrade from a Part	-FCL CPL(H)								
Conversion of an ICAO ATPL(H)									
4. CLASS 1 MED	ICAL CERTIFI	CATE							
State of Issue Date of Expiry Da				E Name,		Limitation		HCAA use	
	Medical Examination	Class privileç		Medical	Centre & Cit	ty	Endorseme	ents	only
HCAA Use Only:									
Application Review:				Issue		Pending I	Items	D	o not Issue
Pending Items									
Applicant Informed via		DMS	TEL _	EMAIL	Da	ite:	Tic	ck IF UPDATED ✓	
License & Type Rating Issued:						Expiry Da	te:		
Restrictions					'				
HCAA Authorized Personnel (Name):									
Signature:						Da	ite:		



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Hours

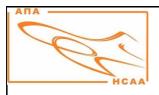
HCAA use

Part-FCL

5. FLIGHT EXPERIENCE

1. TOTAL FLIGHT TIME

	minima (Hours)	completed	only
Total flight time as pilot of helicopters	1000 ¹		
Flight time as pilot of multi-pilot helicopters (State Type(s) below) (Type(s))	350 ² (state types(s))		
3. Please complete only ONE of the following 3 options in this section, as applicable	le		
(a) Flight time as pilot-in-command (min.100 hours) and as pilot-in-command under supervision of helicopters	}250³	PIC	
OR			
(b) Flight time as pilot-in-command of helicopters	250 ³		
OR			
(c) Flight time as pilot-in-command under supervision of helicopters	250 ³		
4. Cross-country flight time as pilot of helicopters	200 ⁴		
Cross-country flight time as pilot-in-command or pilot-in-command under supervision of helicopters	100 ⁵		
6. Instrument time on helicopters	30		
7. Night flight time as pilot-in-command or co-pilot of helicopters	100 ⁶		
¹ Other flight time will be credited as follows;		Credit claimed (Hours)	HCAA use only
- as pilot of aeroplanes (max. credit 500 hrs)			,
	i		
- as pilot in command of touring motor gliders or gliders (max. credit 10 hrs)			
 as pilot in command of touring motor gliders or gliders (max. credit 10 hrs) FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 25 hrs – max. combined credit 25 hrs – max. 	edit 100 hrs)	(FNPT)	
- FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined cre	edit 100 hrs)	(FNPT) (FS)	
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- FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 20 hrs – max. c)	(FS)	
 FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 25 hrs – max. credi)	(FS)	
 FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 25 hrs – max. combined credit 25 hrs – max. combined credit 25 hrs – max. credit 25 h) t of 125 hrs	(FS)	
 FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 25 hrs – max. credit 25 hrs – max. credit 25 hrs – as pilot of multi-pilot aeroplanes (max. credit 175 hrs) (State type(s)) t of 125 hrs	(FS)	
 FNPT and Flight Simulator time (max. FNPT credit 25 hrs – max. combined credit 25 hrs – max. combined credit 25 hrs – max. combined credit 25 hrs – max. credit 25 h) t of 125 hrs rs of 100 hrs	(FS)	



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(HELICOPTER)

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EASA Member State under whose authority exams were passed	Type of exams passed (State 'EASA', 'JAR-FCL' or 'National')	Level of exams passed (CPL(H)+IR(H) or ATPL(H)	Date of final examination pass	HCAA use only

7. ATPL(H) SKILL TEST

Note: If the Examiner is not the holder of an HCAA-issued Examiner Certificate, the Examiner MUST receive an Examiner's designation as per ARA.FCL.205 (c) **prior to** conducting the skill test.

Date of ATPL(H) skill test proposed	Aircraft type	Aircraft registration / Simulator Code	Proposed Examiner	Examiner Number	HCAA use only

8. ENGLISH LANGUAGE PROFICIENCY (ELP)

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

9. APPLICANT'S DECLARATION

I hereby declare that:-

- 1) I do not hold a Part-FCL license issued by another Member State;
- 2) I have not applied for a Part-FCL flight crew license in another Member State;
- 3) I have never held a flight crew license, 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
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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 license or the issue, renewal or revalidation of a rating, authorization 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 HCAA 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

To be completed by the applicant.

Section 2 - Details of Flight Crew License(s) held

Please enter details of any current or expired/lapsed flight crew license(s) (including foreign licenses) held.

Section 3 - Application

Please indicate the basis on which your application for the issue of a Part-FCL ATPL(H) is being made.

Section 4 - Class 1 Medical Certificate

Please enter details of your valid Part-MED Class 1 medical certificate.

Note: - European Commission Regulation (EU) No. 1178/2011 as amended, requires that an individual has all of their licenses 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 HCAA, your application will be rejected.

Section 5 - Flight Experience

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

Credit for flight time in an aircraft category other than helicopters can only be claimed if you hold a pilot license, or equivalent privileges, for the appropriate category of aircraft.

Section 6 -ATPL(H) Theoretical Knowledge

Please enter details of the ATPL(H) or CPL(H) and IR(H) theoretical knowledge examinations passed.

Section 7 - ATPL(H) Skill Test

Please enter details of your proposed PART-FCL ATPL(H) skill test.

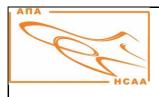
Note: - an ATPL(A) skill test will only be accepted for license issue if the examiner has reviewed the HCAA's National Procedures and has followed the designation procedure as stated in the Information Notice Number: LIC 01/2023.

Section 8 - English Language Proficiency

Please enter details of your ELP assessment.

Section 9 – Applicant's 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, <u>please contact the Personnel Licensing Office for further advice before submitting this application</u>.



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SUBMISSION INSTRUCTIONS (see Guidance Notes)

Please note that failure to submit all required documentation may result in the rejection of your application.

Please, send your application along with the following attachments to info@hcaa.gov.gr with the following

Subject: PEL-FCL - (License Number if available &Last Name)

Plea	se upload the following:-
	All original flying logbooks. For electronic logbooks, please print all pages, each page to be signed by you as a true copy
	Note: original signatures of the aircraft Commander are required if claiming PICUS time - electronic signatures are not accepted
Ш	Copy of your CPL(H) License
	Copy of Examiner's License
	Copy of Examiner's valid Part-MED Class 1 medical certificate.
	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 ATPL(H) Theory Credit (ICAO ATPL(H) conversion ONLY)
	Original ATPL (H) skill test form (including skill test schedule, if separate).
	e-Administrative Fee Code – eparavolo 4513
	Copy of ICAO ATPL(H) and validating medical certificate (ICAO ATPL(H) conversions ONLY)
$\overline{\Box}$	Completed English Language Proficiency Ground Examination form PEL-FCL 270 (ICAO ATPL(H) conversions ONLY)
	Copy of flight crew license(s) / qualification(s) and validating medical certificate(s), if claiming credit in Section 5 for flight
ш	experience in an aircraft category other than helicopters.