

DEPARTMENT OF CIVIL AVIATION
APPLICATION TO CHECK-FLY OWN AIRCRAFT

Name:															
Address:															
Tel (Home)										Tel (Work):					
Email Address:															

Registration and type of aircraft for which permission is sought:	
Reg:	Type:

List total hours flown as PI in the type / types being applied for and also summarize briefly other flying experience.

Type	Hrs 2 or 3 Axis	Hrs Flexwing	Hrs PPC	Hrs Hybrid	Hrs non-microlight
All other flying					
Grand Totals:					

Summary of all Flying Experience

Total Hours P1 Microlights:	Total Hours P1 all Flying:	Total Hours all flying:
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I hold a valid licence No. _____, rated for _____, and also a current medical.		
(Signed)	(Name)	(Date)

Notes

1. Permission to check fly ones own aircraft is only given in exceptional circumstances where access to an appropriately qualified check pilot is not reasonably available. It is not regarded as a right or privilege, and is not given as such. Pilots with this permission are still encouraged to obtain an independent check flight if at-all possible.
2. When an owner carries out their own check flight, the completed form DCA / MLA/002 check flight schedule must accompany the permit renewal application.
3. Before an aircraft is sold to a new owner, an independent check flight by another Cyprus DCA designated check pilot must be carried out.

State reason(s) why this permission is required:
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Date Received: Conditions / comments:	<u>Cyprus DCA Decision</u>	Decision: Accepted / Rejected
Permission valid unit:	Signed:	Date:
Date Received: Copy on Check Pilot File:	<u>Cyprus DCA Office Action</u>	Copy to Owner: Copy on A/C File:

DCA/MLA/005 Issue 1 (Apr. 2003)