

ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑΥΠΗΡΕΣΙΑ ΠΟΛΙΤΙΚΗΣ ΑΕΡΟΠΟΡΙΑΣ
HELLENIC REPUBLIC
HELLENIC CIVIL AVIATION AUTHORITY
MEMBER OF EASA



HCAA REFERENCE No.:

FSD REFERENCE No.:

(HCAA USE ONLY- Αριθμοί Πρωτοκόλλου /Χρήση ΥΠΑ μόνο )

Form 070	Applic		Part-	ion of a <i>Nation</i> -FCL licence agle Pilot Aeropland		ek licence to a		
□ PPL(A)		0.	7 0	igic i not Acropian	•			
□ CPL(A)								
Date of birth:			Place	of birth:	Nationa	ality:		
Ημερ.γέν.:			Τόπος γέν.:		Εθνικότη			
Private Address:			Post	code:	City/Country:			
Διεύθ. Κατοικίας:			Ταχ. Κ	<i>(</i> ώδ.:	_	Πόλη/Χώρα:		
Phone/mobile:					Phone/	fax office:		
Τηλ. σταθ./ κιν. :					Τηλ./φάξ	εργασίας:		
	-mail and additional contact info:  Ιλεκτρονική διεύθ./ επιπρόσθετες πληρ. επικοινωνίας:  Υπογραφή αιτούντος/αιτούσας:							
Grand total flight he Γενικό σύνολο ωρών:	ours:	<b>PIC hours:</b> Ωρες κυβ.:		COPI hours: Ωρες συγκυβ.:	<b>Type/Licence number:</b> Τύπος/αριθμός αδείας:			
						ertificate Class/ Exp. Date:  μερομ.λήξης πιστοπ.υγείας:		
		HCAA USE ON	LY RE	Ι MARKS (Χρήση ΥΠΑ	μόνο,παρ	ατηρήσεις)		
INSPECTING OFFICER	AV	IATION SAFETY INSPECTOR	l	LICENSING DEP. DIRECTOR		FLIGHT STANDARDS DEP. DIRECTOR		

## Applicant's Licence No.:

## ΥΠΕΥΘΎΝΗ ΔΗΛΩΣΗ - DECLARATION

## A.

Με ατομική μου ευθύνη και γνωρίζοντας τις κυρώσεις (1), που προβλέπονται από τις διατάξεις της παρ. 6 του άρθρου22του Ν.1599/1986, δηλώνω ότι τα περιεχόμενα στην παρούσα αίτησή μου στοιχεία είναι ακριβή (2) και αληθή (3) και έχω πληρώσει τα αντίστοιχα τέλη. ΣΗΜΕΙΩΣΗ:

- (1) «Όποιος εν γνώσει του δηλώνει ψευδή γεγονότα ή αρνείται ή αποκρύπτει τα αληθινά με την έγγραφη υπεύθυνη δήλωση του άρθρου 8, τιμωρείται με φυλάκιση τουλάχιστον τριών μηνών. Εάν ο υπαίτιος αυτών των πράξεων σκόπευε να προσπορίσει στον εαυτό του ή σε άλλον περιουσιακό όφελος βλάπτοντας τρίτον ή σκόπευε να βλάψει άλλον, τιμωρείται με κάθειρξη μέχρι 10 ετών.
- (2) Η ακρίβεια των στοιχείων που υποβάλλονται με αυτή τη δήλωση μπορεί να ελεγχθεί με βάση το αρχείο άλλων υπηρεσιών (άρθρο 8 παρ. 4 Ν. 1599/1986).
- (3) Οιαδήποτε ψευδής παρουσίαση ή δήλωση ή απόκρυψη πληροφοριών στην παραπάνω αίτηση θα έχει ως συνέπεια την απόρριψή της, την ποινική δίωξη των υπευθύνων κατά το άρθρο 42 ή 220 του Ποινικού Κώδικα και την ανάκληση από την ΥΠΑ οποιουδήποτε ισχύοντος αεροπορικού Πτυχίου ή Πιστοποιητικού Υγείας.
- (4) Ο Ευρωπαϊκός Κανονισμός (EU) Νο. 1178/2011 όπως τροποποιήθηκε, απαιτεί όπως όλες οι άδειες/πτυχία του ενδιαφερομένου να διεκπεραιώνονται μόνο απο την Αρχή Πολιτικής Αεροπορίας που κατέχει τα ιατρικά δεδομένα αυτού. (Part MED.A.030 and Part FCL.015).

Εάν τα ιατρικά σας δεδομένα δεν βρίσκονται στην Ελληνική Υπηρεσία Πολιτικής Αεροπορίας, η αίτησή σας θα απορριφθεί.

On my own responsibility and knowing the presumable penalties (1), by the paragraph 6 of the article 22 of the N.1599/1986, I declare that the included elements in my present application are accurate (2) and true (3) and I have paid the applicable fees.

## NOTE:

- (1) "Whoever, under his own knowledge, declares untrue facts or denies or withholds the true facts within his/her written declaration under the article 8, he/she will be punished with imprisonment of at least three months. If the responsible of these actions intended, for his own benefit or other's benefit, to draw financial profit harming third person or he/she intended to harm other, he/she will be punished with imprisonment for a term up to 10 years.
- (2) The accuracy of the elements that are submitted with this declaration can be checked on the basis of a check into other agency's archives (article 8 paragraphs 4 N.1599/1986).
- (3) Any untrue presentation or declaration or dissimulation of information within the above application will have as a consequence its rejection, the penal prosecution of responsible persons according to the article 42 or 220 of the Penal Code and the revocation of every valid aviation licence or Medical Certificate by the Hellenic CAA.
- (4) 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 Part FCL.015).

If your medical records are not held by the HCAA, your application will be rejected.

Η Δηλών (ούσα)		
Η Δηλών (ούσα) ne of Applicant:		
ογραφή	Ημερομηνία	
nature:	Date:	



Αŗ	pl	icaı	nt's	Lic	enc	e N	lo.	:
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Summary of conditions and flying experience for conversion of a national PPL(A) to a Part-FCL PPL(A) without IR.

Flying hours experience and further EASA requirements for:

PPL(A) (VFR only)	
a) $\square$ Demonstrate knowledge of the relevant parts of EASA Part-FCL (mus	at be confirmed on page 5)
b) □ Minimum total flying experience on aeroplanes of 70 hours.	hours:
c) □ Radio navigation	
d)   Radiotelephony	
e)   Language Proficiency in accordance with FCL.055	
f) □ Part-MED medical 1 or 2 issued by an authorized HCAA AME (enclose copy of valid medical certificate)	
g)  □ Proficiency check on SP aeroplane in accordance with FCL.740.A	
Summary of conditions and flying experience for conversio PPL(A) to a Part-FCL PPL(A) with IR.	n of a national
Flying hours experience and further EASA requirements for:	
PPL/IR(A)	
<ul> <li>a) □ Part-MED medical 1 or 2 with IR issued by an authorized HCAA AME (enclose copy of valid medical certificate)</li> <li>b) □ Demonstrate knowledge of the relevant parts of EASA Part-FCL (must</li> </ul>	
b) - Demonstrate knowledge of the relevant parts of EAOAT art-1 OE (mas	st be confirmed on page 5)
c) □ Minimum total flying experience in accordance with IR on aeroplanes of 75 hours.	t be confirmed on page 5) hours:
c)   Minimum total flying experience in accordance	
c)  Minimum total flying experience in accordance with IR on aeroplanes of 75 hours.	
<ul> <li>c) ☐ Minimum total flying experience in accordance with IR on aeroplanes of 75 hours.</li> <li>d) ☐ Night qualification in national licence (NIT)</li> </ul>	hours:
c) ☐ Minimum total flying experience in accordance with IR on aeroplanes of 75 hours.  d) ☐ Night qualification in national licence (NIT)  e) ☐ Language Proficiency in accordance with FCL.055	hours:



Αp	pl	icaı	nt's	Lic	enc	е٨	lo.:
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Summary of conditions and flying experience for conversion of a national CPL(A) to a Part-FCL CPL(A), (VFR only).

Flying hours experience and further EASA requirements for:

CPL	SPA (VFR only) more than 500 HR as PIC (restricted to type / class SPA)
a) □	Part-MED medical 1 issued by an authorized HCAA AME (enclose copy of valid medical certificate)
b) □	Demonstrate knowledge of the relevant parts of EASA Part-FCL (must be confirmed on page 5)
c) 🗆	Minimum total flying experience as PIC on SPA of 500 hours. hours:
d) 🗆	Proficiency check on SP aeroplane in accordance with FCL.740.A
e) 🗆	Language Proficiency in accordance with FCL.055
CPL	SPA (VFR only) below 500 HR as PIC (restricted to type / class SPA)
a) □	Part-MED medical 1 issued by an authorized HCAA AME (enclose copy of valid medical certificate)
b) 🗆	Demonstrate knowledge of the relevant parts of EASA Part-FCL (must be confirmed on page 5)
c) 🗆	Knowledge of flight performance and planning as required by FCL.310
d) 🗆	Proficiency check on SP aeroplane in accordance with FCL.740.A
e) 🗆	Language Proficiency in accordance with FCL.055



Summary of conditions and flying experience for conversion of a national CPL(A) to a Part-FCL CPL(A) with IR.

Flying hours experience and further EASA requirements for:

CPL/IR SPA more than 500 HR as PIC (restricted to type / class SPA)
a) □ Part-MED medical 1 with IR issued by an authorized HCAA AME (enclose copy of valid medical certificate)
b) $\square$ Demonstrate knowledge of the relevant parts of EASA Part-FCL (must be confirmed below)
c)   Minimum total flying experience as PIC on SPA of 500 hours. hours:
d) ☐ Night qualification in national licence (NIT)
e) □ Language Proficiency in accordance with FCL.055
f) ☐ Proficiency check on SP aeroplane in accordance with FCL.740.A
CPL/IR SPA below 500 HR as PIC (restricted to type / class SPA)
a) ☐ Part-MED medical 1 with IR issued by an authorized HCAA AME (enclose copy of valid medical certificate)
b) ☐ Demonstrate knowledge of the relevant parts of EASA Part-FCL (must be confirmed below)
c) ☐ Night qualification in national licence (NIT)
d) ☐ Knowledge of flight planning and flight performance for CPL/IR level
e) ☐ Language Proficiency in accordance with FCL.055
f) □ Proficiency check on SP aeroplane in accordance with FCL.740.A
Copies of the relevant logbook pages (flight experience & STD pages) must be attached to this form.
SELF-DECLARATION:
☐ I confirm the knowledge of the relevant parts of EASA Part-FCL

The Annexes to the EASA Aircrew Regulation specify that to convert or validate a licence, the licence holder must have knowledge of the parts of Part-OPS and Part-FCL that are relevant to their activities. The HCAA will require applicants to tick a box on the appropriate application forms to certify that they have read and understood the regulations that apply to them.