



Form
aL 423

ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ
ΥΠΗΡΕΣΙΑ ΠΟΛΙΤΙΚΗΣ ΑΕΡΟΠΟΡΙΑΣ
HELLENIC REPUBLIC
HELLENIC CIVIL AVIATION AUTHORITY
MEMBER OF EASA
ΜΕΛΟΣ ΤΗΣ EASA

Αρ.Πρωτ. / Ref.No



ΑΙΤΗΣΗ

Application Form

ΠΡΟΣ: Την ΥΠΑ, Διεύθυνση Πτητικών Προτύπων, Τμήμα Πτυχιών και Αδειών, Τ.Θ. 70360, ΤΚ 160 10, Γλυφάδα, Ελλάδα
TO: The HCAA, Flight Standards Division, Licensing Section, P.O. Box 70360, TK 160 10, Glyfada, Greece

Issue of an En-Route Instrument Rating - EIR(A) – (holders of a third country IR) (EU) No 1178/2011 FCL.825(i) with credits for a third country IR

1 Type of application

- I apply for the: Issue of an En-Route Instrument Rating for single-engine aeroplanes
 Issue of an En-Route Instrument Rating for multi-engine aeroplanes
According to FCL.825(i) on basis of an ICAO-compliant Instrument Rating issued by a third country.
- REPETITION OF PARTIAL PASSED SKILL TEST from date: _____
 REPETITION OF FAILED SKILL TEST

2 Applicant

Όνομα: Name:	Επώνυμο: Surname:	Όνομα Πατρός: Father's Name:	
Οδός: Street:	Τοποθεσία / Πόλη: Place / City:	ΤΚ: Post code:	Χώρα: Country:
Α.Δ.Τ. ή Διαβατηρίου: ID or Passport Number:	Νο τηλ: Tel No:	Κινητό: Mobile:	
Ηλεκτρονικό Ταχυδρομείο: email:	Χώρα έκδοσης, Είδος & Νο Πτυχίου: Country, Type & No of License held:		
Ημερομηνία Γεννήσεως: Date of Birth:	Τόπος Γεννήσεως: Place of Birth:	Ιθαγένεια: Nationality:	Υπηκοότητα: Citizenship:
<p>ΥΠΕΥΘΥΝΗ ΔΗΛΩΣΗ: DECLARATION: Α. Με ατομική μου ευθύνη και γνωρίζοντας τις κυρώσεις ⁽¹⁾, που προβλέπονται από τις διατάξεις της παρ. 6 του άρθρου 22 του Ν.1599/1986, δηλώνω ότι τα περιεχόμενα στην παρούσα αίτηση 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. 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 license or Medical Certificate by the Hellenic CAA.</p> <p>Β. Ο Ευρωπαϊκός Κανονισμός (EU) No. 1178/2011 όπως τροποποιήθηκε, απαιτεί όπως η διαχείριση όλων των αδειών/πτυχιών του ενδιαφερομένου να πραγματοποιείται από την Αρμόδια Αρχή (ΥΠΑ), η οποία κατέχει και τα ιατρικά δεδομένα αυτού. (Part MED. A.030 and Part FCL. 015) Εάν τα ιατρικά δεδομένα δεν βρίσκονται στην Ελληνική Υπηρεσία Πολιτικής Αεροπορίας, η αίτηση θα εκκρεμεί έως την ενημέρωση των αντιστοιχών φακέλων του αιτούντος. European Commission Regulation (EU) No 1178/2011 as amended, requires that an individual keeps all his/her licenses administered by the competent authority (HCAA) that holds his/her medical records. (Part MED A. 030 and Part FCL. 015) If the medical records of the applicant are not held by the HCAA, his/her application will be pending until the updates of his/her files.</p>			
Τόπος: Place:	Ημερομηνία: Date:	Υπογραφή αιτούντος: Signature of Applicant:	

ΧΡΗΣΗ ΜΟΝΟ ΑΠΟ ΤΗΝ ΥΠΑ, ΠΑΡΑΤΗΡΗΣΕΙΣ (HCAA USE ONLY, REMARKS)

Inspecting Officer	Aviation Safety Inspector	Head of Licensing Section	Director of Flight Standards Division
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3 Payment methods

Όλα τα τέλη πρέπει να προπληρωθούν. Παράλειψη συμμόρφωσης θα έχει σαν αποτέλεσμα την επιστροφή της αίτησής σας και την τελική απόρριψή της.
All fees must be paid in advance; failure to do so will cause the rejection of your application.
 Τα τέλη για τα πτυχία, τις σχετιζόμενες ικανότητες και αξιολογήσεις, περιλαμβάνονται στην πιο πρόσφατη Διϋπουργική Απόφαση Τελών.
The fees for licenses, associated ratings and assessments are contained in the latest Interministerial Decision of Charges.

Συμπληρώστε τα Νούμερα των Ισχυόντων Παραβόλων ή e-Παραβόλων του Δημοσίου
 Fill in the Numbers of the valid Fees or e-Fees of the State

4 Attached documents & Summary of flight experience before the skill test is taken

ATTACHED DOCUMENTS (Mandatory - Please tick ✓)	REQUIREMENTS	FILLED BY ATO/APPLICANT	EXAMINER CHECK	HCAA ONLY
ATO assessment <input type="checkbox"/>		Date: _____	<input type="checkbox"/>	<input type="radio"/>
Completion Certificate for the full training courses by the ATO <input type="checkbox"/>	Original Document		<input type="checkbox"/>	<input type="radio"/>
Certificate ATO (Non Hellenic) <input type="checkbox"/>	Certificate (copy)		<input type="checkbox"/>	<input type="radio"/>
Certificate FSTD (Non Hellenic) <input type="checkbox"/>	Certificate (copy)	<i>(In case of an Hellenic ATO it must have been endorsed in the Approval Certificate attachment)</i>	<input type="checkbox"/>	<input type="radio"/>
Document of identification <input type="checkbox"/>	Copy		<input type="checkbox"/>	<input type="radio"/>
English Language Test for Aviation <input type="checkbox"/>	≥ Level 4	Level: _____ Valid until: _____		<input type="radio"/>
EASA Medical Certificate <input type="checkbox"/>	Class 1 (copy - if applicable)	Valid until: _____	<input type="checkbox"/>	<input type="radio"/>
Hellenic EASA Medical Certificate <input type="checkbox"/>	Class 1	Valid until: _____	<input type="checkbox"/>	<input type="radio"/>
Foreign medical certificate <input type="checkbox"/>	(copy - if applicable)	Valid until: _____	<input type="checkbox"/>	<input type="radio"/>
Logbook filled and signed <input type="checkbox"/>	Logbook & copies of relevant pages for verification	Total Hours: _____	<input type="checkbox"/>	<input type="radio"/>
Third country license with IR entorsement <input type="checkbox"/>	Copy		<input type="checkbox"/>	<input type="radio"/>
Confirmation of payment of the required fees <input type="checkbox"/>	(see #3: payment methods)	Please fill correctly the original receipt's number on #3 above	<input type="checkbox"/>	<input type="radio"/>
PRE-ENTRY REQUIREMENTS	REQUIREMENTS	FILLED BY ATO	EXAMINER CHECK	HCAA ONLY
1) Flight experience as PIC on cross-country flights	min. 20 hours	Hours: _____	<input type="checkbox"/>	<input type="radio"/>
2) Experience as PIC(A) under IFR	min. 25 hours	Hours: _____	<input type="checkbox"/>	<input type="radio"/>

**ΥΠΟΨΗΦΙΟΣ
APPLICANT**

ΟΝΟΜΑ FIRST NAME	ΕΠΙΘΕΤΟ LAST NAME	ΗΜΕΡΟΜΗΝΙΑ ΓΕΝΝΗΣΗΣ DATE OF BIRTH	ΤΟΠΟΣ ΓΕΝΝΗΣΗΣ PLACE OF BIRTH

**ΠΡΟΤΑΣΗ ΓΙΑ SKILL TEST
RECOMMENDED FOR SKILL TEST**

ΟΝΟΜΑ ΕΚΠΑΙΔΕΥΤΗ FIRST NAME	ΕΠΙΘΕΤΟ ΕΚΠΑΙΔΕΥΤΗ LAST NAME	ΝΟΥΜΕΡΟ ΕΚΠΑΙΔΕΥΤΗ INSTRUCTOR'S NUMBER

**ΕΞΕΤΑΣΤΗΣ
EXAMINER**

ΟΝΟΜΑ FIRST NAME	ΕΠΙΘΕΤΟ LAST NAME	ΝΟΥΜΕΡΟ ΕΞΕΤΑΣΤΗ EXAMINER'S NUMBER	ΘΕΣΗ ΤΟΥ ΕΞΕΤΑΣΤΗ ΣΤΟ Α/ΦΟΣ EXAMINER'S AIRCRAFT SEAT		
			Δεξιά Right <input type="checkbox"/>	Αριστερή Left <input type="checkbox"/>	Πίσω Rear <input type="checkbox"/>

**ΑΕΡΟΣΚΑΦΟΣ
AIRCRAFT**

ΤΑΞΗ/ΤΥΠΟΣ/ΠΑΡΑΛΛΗΛΗ CLASS/TYPE/VARIANT	ΧΑΡΑΚΤΗΡΙΣΤΙΚΟ ΚΛΗΣΕΩΣ REGISTRATION	SE	ME
		<input type="checkbox"/>	<input type="checkbox"/>

**FSTD
- IF APPLICABLE**

ΤΑΞΗ/ΤΥΠΟΣ/ΠΑΡΑΛΛΗΛΗ CLASS/TYPE/VARIANT	FSTD - ID	FFS Level	FSTD OPERATOR	LOCATION

**ΛΕΠΤΟΜΕΡΕΙΕΣ ΤΗΣ ΠΤΗΣΗΣ
FLIGHT DETAILS**

ΗΜΕΡΟΜΗΝΙΑ ΤΗΣ ΕΞΕΤΑΣΗΣ DATE OF TEST	ΧΡΟΝΟΣ ΣΤΑ ΧΕΙΡΙΣΤΗΡΙΑ TIME ON CONTROLS	ΑΡΙΘΜΟΣ ΠΡΟΣΓΕΙΩΣΕΩΝ NUMBER OF LANDINGS	ΑΡΙΘΜΟΣ ΠΡΟΣΕΓΓΙΣΕΩΝ NUMBER OF APPROACHES

**ΣΚΕΛΟΣ Νο1
LEG No1**

BLOCK-OFF	ΑΝΑΧΩΡΗΣΗ / DEPARTURE	ΠΡΟΟΡΙΣΜΟΣ / DESTINATION	BLOCK-ON

**ΣΚΕΛΟΣ Νο2
LEG No2**

BLOCK-OFF	ΑΝΑΧΩΡΗΣΗ / DEPARTURE	ΠΡΟΟΡΙΣΜΟΣ / DESTINATION	BLOCK-ON

6 Skill Test Report

Όνοματεπώνυμο Υποψηφίου:
Applicant's name: _____

SECTION 1 - PRE-FLIGHT OPERATIONS AND DEPARTURE		1st attempt	2nd attempt
Use of checklist, airmanship, anti-icing/de-icing procedures, etc., apply in all sections			
a	Use of flight manual (or equivalent) especially a/c performance calculation, mass and balance		
b	Use of ATC document, weather document		
c	Preparation of ATC flight plan, IFR flight plan/log		
d	Pre-flight inspection		
e	Weather Minima		
f	Taxiing		
g	Pre-take-off briefing, Take-off		
h	ATC liaison: compliance, R/T procedures		
SECTION 2 - GENERAL HANDLING		1st attempt	2nd attempt
a	Control of the aeroplane by reference solely to instruments, including: level flight at various speeds, trim		
b	Climbing and descending turns with sustained Rate 1 turn		
c	Recoveries from unusual attitudes, including sustained 45° bank turns and steep descending turns		
d	Recovery from approach to stall in level flight, climbing/descending turns and in landing configuration		
e	Limited panel: stabilised climb or descent turns at Rate 1 onto given headings, recovery from unusual attitudes		
SECTION 3 - EN-ROUTE IFR-PROCEDURES		1st attempt	2nd attempt
a	Transition to instrument flight		
b	Tracking, including interception, e.g. NDB, VOR, RNAV		
c	Use of radio aids		
d	Level flight, control of heading, altitude and airspeed, power setting, trim technique		
e	Altimeter settings		
f	Timing and revision of ETAs (en-route hold, if required)		
g	Monitoring of flight progress, flight log, fuel usage, systems' management		
h	Simulated emergency situation(s)		
i	Ice protection procedures, simulated if necessary		
j	Simulated diversion to alternate aerodrome <small>to aerodrome</small>		
k	Transition to visual flight		
l	ATC liaison - compliance, R/T procedures		
SECTION 5 - NON-PRECISION APPROACH PROCEDURES		1st attempt	2nd attempt
a	Setting and checking of navigational aids, identification of facilities		
b	Arrival procedures, altimeter checks		
c	Approach and landing briefing, including descent/approach/landing checks		
d	Visual landing		
e	ATC liaison: compliance, R/T procedures		
SECTION 6 (multi-engine only) – FLIGHT WITH ONE ENGINE INOPERATIVE		1st attempt	2nd attempt
a	Simulated engine failure during en route phase of flight		
b	ATC liaison - compliance, R/T procedures		

Τόπος:
Place:

Ημερομηνία:
Date:

Υπογραφή Εξεταστή:
Examiner's Signature:

7 Skill Test Result

THEORETICAL KNOWLEDGE - The examiner confirms that the candidate demonstrated an adequate level of theoretical knowledge in the following subjects:		Signature of Examiner
a	Air Law	
b	Meteorology	
c	Flight planning and performance	

„P“ - passed	1	2	3	4	5	6
„F“ - failed				X		

REMARKS

IR(A): _____ Expired date: _____

PASSED

PARTIALLY PASSED

FAILED

Υπογραφή Εξεταστή
Signature of Examiner

Αναγνώριση αποτελέσματος-Υπογραφή Αιτούντος
Recognition test result-Signature of Applicant

8 National Procedure Declaration – Only for NON-HCAA EXAMINERS (To be completed by the examiner)

I hereby declare that I, * _____, have reviewed and applied the relevant national procedures and requirements of the applicant's competent Authority (HCAA- www.ypa.gr-Foreign Examiners) contained in version** _____ of the Examiner Differences Document.

* Name of Examiner

** Insert document version, i.e.: 06-2015

Date: _____ Signature of Examiner: _____

(a) An applicant for an EIR should have received instrument flight instruction on the same type or class of aeroplane to be used in the test/check.

(b) An applicant shall pass all the relevant sections of the skill test. If any item in a section is failed, that section is failed. Failure in more than one section will require the applicant to take the entire test again. An applicant failing only one section shall only repeat the failed section. Failure in any section of the retest, including those sections that have been passed on a previous attempt, will require the applicant to take the entire test again. **All relevant sections of the skill test shall be completed within 6 months. Failure to achieve a pass in all relevant sections of the test in two attempts will require further training.**

(c) Further training may be required following a failed skill test. There is no limit to the number of skill tests that may be attempted

CONDUCT OF THE TEST

(d) The test is intended to simulate a practical flight. The route to be flown shall be chosen by the examiner. An essential element is the ability of the applicant to plan and conduct the flight from routine briefing material. The applicant shall undertake the flight planning and shall ensure that all equipment and documentation for the execution of the flight are on board. **The duration of the flight shall be at least 60 minutes.**

(e) Should the applicant choose to terminate a skill test for reasons considered inadequate by the examiner, the applicant shall retake the entire skill test. If the test is terminated for reasons considered adequate by the examiner, only those sections not completed shall be tested in a further flight.

(f) At the discretion of the examiner, any manoeuvre or procedure of the test may be repeated once by the applicant. The examiner may stop the test at any stage if it is considered that the applicant's demonstration of flying skill requires a complete retest.

(g) **An applicant shall fly the aircraft from a position where the PIC functions can be performed** and to carry out the test as if there is no other crew member. Responsibility for the flight shall be allocated in accordance with national regulations.

(h) Minimum descent heights/altitudes and the transition points should be determined by the applicant and agreed by the examiner.

(i) An applicant for an EIR shall indicate to the examiner the checks and duties carried out, including the identification of radio facilities. Checks shall be completed in accordance with the authorised checklist for the aeroplane on which the test is being taken. During pre-flight preparation for the test the applicant is required to determine power settings and speeds. Performance data for take-off, approach and landing shall be calculated by the applicant in compliance with the operations manual or flight manual for the aeroplane used.

FLIGHT TEST TOLERANCES

(j) The applicant shall demonstrate the ability to:

- (1) operate the aeroplane within its limitations;
- (2) complete all manoeuvres with smoothness and accuracy;
- (3) exercise good judgement and airmanship;
- (4) apply aeronautical knowledge; and
- (5) maintain control of the aeroplane at all times in such a manner that the successful outcome of a procedure or manoeuvre is never seriously in doubt.

(k) The following limits shall apply, corrected to make allowance for turbulent conditions and the handling qualities and performance of the aeroplane used.

Height

(i) Generally ± 100 feet

Tracking

(i) on radio aids $\pm 10^\circ$

Heading

(i) all engines operating $\pm 10^\circ$

(ii) with simulated engine failure $\pm 15^\circ$

Speed

(i) all engines operating + 10 knots / - 5 knots

(ii) with simulated engine failure + 15 knots / - 5 knots