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| **1** | FAA AIRMAN STATUS |
| Name: | Surname: |
| Fiscal Code: | Place and Country of Birth: | Date of Birth: |
| Nationality: | Address: |
| email: | Mobile: |
| FAA License Number: | FAA License Date of Issue: |
| Category/Class of FAA Airplanes Certificate | [ ]  PPL [ ]  CPL [ ]  ATPL [ ]  MPL |
| Valid and non-expired ratings/privileges and certificates held. *(Only Class or Instrument ratings)* | Ratings and certificates | Issue Date |
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| Remarks, i.e., special endorsements relating to limitations, restrictions, and endorsements for privileges.*(e.g.: language proficiency level and validity (English, others)* |  |
| Date of Last Flight Review in English*(for language request)*  |  |
| Past or pending enforcement action  | [ ]  YES [ ]  NO *If YES, please give details on a separate page*   |
| Is the license in point 2 a validation issued by the FAA on the basis of a license issued by another Contracting State to the Chicago Convention | [ ]  YES [ ]  NO *If YES, Please add details hereunder* |
| EASA Part- Medical Certificate Class Issued on Valid Until:  | Class | [ ]  1 [ ]  2 |
| Issued on |  |
| Valid until |  |

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| **2** | EASA EXAMINATIONS |
| theoretical-knowledge examination (Air Law, Flight Planning & Monitoring and Communication for IR) test and Skill test passed with an ENAC Authorized Examiner (see point 2.4.4 TIP-L) | Name of the examiner |  |
| Date of the test |  |
| **3** | APPLICATION |
| I hereby apply for a PART-FCL following ratings:[ ]  SEP(L) [ ]  MEP(L) [ ]  Night Rating [ ]  IR(A)-SE [ ]  IR(A)-ME |
| **4** | SUBMISSION INSTRUCTIONS |
| Documents Required:* Copy of FAA license and medical
* Copy of Part FCL license
* Copy of the ID Card or Passport
* Copy of Fiscal Code
* Copy of Part-Medical Certificate issued by ITALIAN AME/AEMC
* Copy of the Skill Test report Form issued by an ENAC authorized examiner
* Copy of English Language proficiency certificate issued by an authorized center
* Copy of the relevant pages of the Logbook
* Payment 32 € through the portal “Enac Servizi on line” rights for license printing Art. N07-4
 |
| Send completed form to ENAC via PEC to protocollo@pec.enac.gov.it , specifying the “Direzione Aeroportuale” where you wish to collect the license.  |
| **5** | DECLARATION |
| I declare that I do not hold and have not applied for any other Part-FCL license, rating, certificate or authorization in another Member State and that I never held any Part-FCL license, rating certificate or authorization issued in another Member State which was revoked or suspended. |
| I also declare that I am aware of the penal sanctions, in the case of untrue declarations and falsity in deeds, referred to in art. 76 D.P.R. 445 of 28.12.2000 |
| ENAC will process the personal data conferred with this form, in compliance with Regulation (EU) 2016/679 (RGPD) and Legislative Decree 196/2003, in particular for the performance of its public interest tasks and for purposes strictly related to the issue, renewal and maintenance of the aeronautical titles of the person concerned. |
| Signature of Applicant | Date of Signature |