Direzione Personale Volo

Via Gaeta, 3

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| --- |
| **Bollo assolto in modo virtuale (aut.Direz. Reg.Entrate Lazio N.135047/98 DEL 30/11/1998)** |
| **Fattura DB3****N° Anno** |

 00185 Roma

Italy

**To be sent via pec to: ENAC** **protocollo@pec.enac.gov.it** **DIREZIONE PERSONALE DI VOLO**

**Subject**: Application for the **issue, renewal or revalidation TRE/SFE** according Reg.1178/2011 subpart-K

The undersigned

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  Surname | Cell. | e-mail  |
| OPERATOR COA  and/or ATO (company name) | Private  |
| COA e/o ATO n° | VAT n. |

Ask that to;

|  |  |  |
| --- | --- | --- |
| Name | Surname | Tax Code |
| born in | date | citizenship |
| address | Postal code | Cell. PEC:e-mail |

License

|  |  |  |  |
| --- | --- | --- | --- |
| type and number |  issued by | date | valid until |

and the requirements of Reg: 1178/2011 subpart K, already documented with the presentation of the application at the last Standardization course attended on:

and contained in the documentation presented to the Flight Inspector authorized by Enac in occasion of the assessment of competence, carried out on the relevant aircraft and with positive result on:

 **be issued** **, revalidated** **,renewed**  certification to exercise the privileges of:

**TRE** ; **SFE** **; (A)** **; (H)** 

|  |
| --- |
| On aircraft **Type**  **Class** |
| To be exercised within **Operator**  and/or **ATO**  **or Private**  indicated above**.** |
| **Methods of payment and amount:****Payment € 340,00 + € 141,00 if AOC with Flight Insp. via “ Enac Servizi on-line “ N38-D e N38-K (flight test rights with flight inspection) – Rights for Issue, Renewal, revalidation of examiner certificate. At the conclusion of the payment, the alphanumeric code that identifies the payment receipt must be shown in the appropriate box at the top.** |
| The undersigned, aware of the responsibilities and penal sanctions established by the Law for false attestations and false declarations, declare under their personal responsibility that the above is true (art.76 d.p.r. n.445 of 20 December 2000) and express their consent to the processing of personal data for the sole purposes relating to this application pursuant to Legislative Decree 196 of 30 June 2003. |

 Place and date Signature of the applicant

 Place and date Signature of the examiner

**Documentation to be attached for release:**

* medical certificate;
* have completed at least 50 instructional flight hours as a TRI, FI or SFI in the corresponding type or in an FSTD of the type;
* practical training must include at least two checks in the role of examiner;
* if the privileges of IR (A) (H) are required, the practical training must include at least four checks;
* undergo an assessment of competence with an ENAC Flight Inspector or a Senior Examiner.
* TRE Seminar

**Documentation to be attached for revalidation:**

* medical certificate;
* in the period of validity, having carried out at least 6 Skill Tests, Proficiency, AoC;
* a Skill Test or P.C. above must have an assessment of competence (AoC) by a Flight Inspector or a Senior Examiner in the last year.
* TRE Seminar

**Documentation to be attached for renewal:**

* medical certificate;
* an assessment of skills by an ENAC Flight Inspector or a Senior Examiner.
* TRE Seminar

I, the undersigned, declare that I do not possess and / or have not applied to obtain, on the same aircraft category, an equivalent license, rating, authorization or certificate in another member country and that I have never owned, on the same aircraft category , a license, rating, authorization or equivalent certificate that has been suspended or revoked by another member country.

He also declares to be aware that any incorrect information provided in this form may be a reason for denied issuing of a license, qualification, certificate or attestation (Article 47 of Presidential Decree no. 445 of December 28, 2000).

Date Signature

 **PEC IS A CERTIFIED ELECTRONIC MAIL ADDRESS**