



South African Civil Aviation Authority
Ikhaya Lokundiza

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Standard Bank, Brooklyn

CIN 057K PL

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CDI 69530084573

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APPLICATION FOR A NIGHT FLIGHT/SAFETY PILOT/TUG PILOT RATING

CA 61-157

Notes:

1. Paragraphs 3.14, 3.15 and 3.16 of the Air Navigation Regulations, 1976, as amended have reference.
2. Part B of this form must be completed by a flight instructor, Grade 1 or Grade 11.
3. Indicate with an X in the applicable squares.

A. APPLICATION

1. Name of applicant.....
(Block letters)

2. Date of birth Gender (*Male/Female*)..... Licence No.....

3. Nationality Population Groups : African White Coloured Other
(For Statistical Purposes)

Postal address.....
..... Tel. No

4. Rating applied for Night Flight Safety Tug

5. Total hours as pilot-in-command

Date

Financial Reference PL 027..... *Signature of applicant*

B. CERTIFICATE

The applicant conforms to the requirements of the Air Navigation Regulations for:

Night flight rating Safety pilot rating Tug pilot rating

Date

Name of Instructor..... *Signature of Instructor, Gr. I/II*
(Block Letters)

FOR OFFICIAL USE ONLY

APPROVED/NOT APPROVED

Date Commissioner for Civil Aviation

* In the case of a night flight rating this form must be accompanied by a practical test report, form CA61 -