



**APPLICATION FOR VERIFICATION OF A LICENCE**

*Please complete in BLOCK CAPITALS using black or dark blue ink.*

**FALSE REPRESENTATION STATEMENT**

It is an offence to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document.

**1. APPLICANT DETAILS To be completed by the Applicant**

Name: .....

Permanent Address: .....

.....

Postal Address: .....

.....

E-mail: .....

Tel: .....

**2. PARTICULARS OF LICENCE(S) PRESENTED To be completed by the Applicant**

Issuing Authority	Type/Class of Licence	Licence No.	Expiry Date

**3. DECLARATION OF APPLICANT To be completed by the Applicant**

I hereby consent to the disclosure by the Civil Aviation Authority (MCAA) of details associated with the above issued licence(s) to:

Name: .....

Address: .....

Email: .....

I declare that the information provided on this form is correct

Name:	Signature:	Date:
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Documents to be submitted	For CAA use
For MCAA licence holders please submit:	
1. Copy of the licence held	
2. Copy of the medical held	
3. Copy of the Payment receipt	
4. Copy of the most recent Pilot Proficiency Check Report	
5. Copy of the English Language Proficiency Report (where necessary)	
<b>CAA USE ONLY</b>	
Date of Issue: .....	
Checked by: .....	
Loaded by: .....	
Signed by: .....	