



**BPL Gas Balloon  
Skill Test / Proficiency Check**

Application & report form

Applicant's Licence Nr.

**Applicant** : Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_ Place of origin: \_\_\_\_\_ Nationality: \_\_\_\_\_

**Address**: Street/box: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

- |   |   |
|---|---|
| <input type="checkbox"/> initial BPL skill test                                     | <input type="checkbox"/> recency proficiency check              |
| <input type="checkbox"/> class extension skill test                                 | <input type="checkbox"/> commercial operation rating skill test |
| <input type="checkbox"/> repetition of failed/partial passed skill test from: _____ | <input type="checkbox"/> conversion of an ICAO BPL              |

The ATO/DTO confirms that the candidate has been trained in accordance with approved syllabus and recommends him/her for the skill test.

**ATO/DTO** name: \_\_\_\_\_ Registration no: \_\_\_\_\_

Name of Head of Training: \_\_\_\_\_ Licence no: \_\_\_\_\_

Location & date: \_\_\_\_\_ Signature of Head of Training: \_\_\_\_\_

**Details of flight**

Date: \_\_\_\_\_ Type of balloon: \_\_\_\_\_ Volume: \_\_\_\_\_ Registration: \_\_\_\_\_

Departure: \_\_\_\_\_ Take off time: \_\_\_\_\_ Block time: \_\_\_\_\_

Destination: \_\_\_\_\_ Landing time: \_\_\_\_\_ # of landings: \_\_\_\_\_

**Result of skill test:**  passed  failed  partial passed: section \_\_\_\_\_ to be repeated

**Remarks:**

*I confirm that the test has been carried out in full compliance with the provisions of BFCL.400, BFCL.405, and BFCL.410.*

**Examiner** last name: \_\_\_\_\_ First name: \_\_\_\_\_

Foreign Examiner Certificate no: \_\_\_\_\_ Licence no: \_\_\_\_\_

Location & date: \_\_\_\_\_ Signature of Examiner: \_\_\_\_\_

**To be completed by applicant:**

I declare that

- I do not possess a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.
- I have not applied for a pilot licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State.
- I have never possessed any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another EASA Member State which was revoked or suspended in any other EASA Member State.
- the information provided is correct. I am aware of the consequences of providing false information, such as being denied a license, certificate, rating, authorisation or attestation, or having it revoked or cancelled.
- I have received the test result and been informed about my rights of appeal

Date and place: ..... Signature of applicant: .....



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### General flight experience report

A copy of the relevant logbook pages (flight experience) showing the confirmed completion of the flight instruction must be attached to this form.

#### Details of conditions: instruction and flying experience before BPL skill test

- a) Applicants minimum age: 16 years
- b) Enclose copy of passport
- c) EASA Medical class 1 or 2  valid until: \_\_\_\_\_
- d) Theoretical examination passed  date: \_\_\_\_\_
- e) Flight instruction in gas balloon (MNM 16 HR) hours: \_\_\_\_\_  
including at least:
  - 1) dual flight instruction (MNM 12 HR) hours: \_\_\_\_\_
  - 2) supervised solo flight (MNM 30 minutes) minutes: \_\_\_\_\_ date: \_\_\_\_\_
  - 3) 10 inflations and 20 take offs and landings Inflations: \_\_\_\_\_ take offs / lds \_\_\_\_\_ / \_\_\_\_\_

#### Summary of conditions and flying experience for the BPL commercial operation rating

- f) Applicants minimum age: 18 years
- g) Flight experience after initial BPL Skill Test as PIC (MNM 50 HR) hours: \_\_\_\_\_
- h) Take offs and landings after initial BPL Skill Test as PIC (MNM 50) take offs / lds \_\_\_\_\_ / \_\_\_\_\_

#### Summary of conditions for the extension to gas balloon

- i) Flight instruction in gas balloon hours: \_\_\_\_\_  
including at least 5 dual instruction flights: nb of flights: \_\_\_\_\_
- j) Demonstration of theoretical knowledge acc. BFCL.150 (c)(2)

To be completed by examiner:	passed	failed	
Principles of flight			
Operational procedures			
Flight performance and planning			
Aircraft general knowledge with regard to gas balloon			
Signature of examiner:			



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Note: Use of checklist(s), airmanship, control of balloon by external visual reference, look-out procedures, etc. apply in all sections.

<b>Section 1 Gas Balloon</b>		<b>PRE-FLIGHT OPERATIONS, INFLATION AND TAKE-OFF</b>				
		1 attempt		2 attempt		Remarks
		pass	fail	pass	fail	
a	Pre-flight documentation (licence, medical certificate, permits to take off, insurance certificate, aeronautical charts, aircraft flight manual (AFM), logbook, technical logbook, checklists, etc.), flight planning, NOTAM(s) and weather briefing					
b	Balloon inspection and servicing					
c	Suitability of launch site					
d	Load calculation					
e	Crowd control, crew and passenger briefings					
f	Assembly and layout					
g	Inflation and pre-take-off procedures					
h	Take-off					
i	ATC compliance (if applicable)					
please delete as necessary		<b>pass</b>		<b>fail</b>		examiner's signature

<b>Section 2 Gas Balloon</b>		<b>GENERAL AIRWORK</b>				
		1 attempt		2 attempt		Remarks
		pass	fail	pass	fail	
a	Climb to level flight					
b	Level flight					
c	Descent to level flight					
d	Operating at low level					
e	ATC compliance (if applicable)					
please delete as necessary		<b>pass</b>		<b>fail</b>		examiner's signature

<b>Section 3 Gas Balloon</b>		<b>EN-ROUTE PROCEDURES</b>				
		1 attempt		2 attempt		Remarks
		pass	fail	pass	fail	
a	Dead reckoning and map reading					
b	Marking positions and time					
c	Orientation and airspace structure					
d	Maintenance of altitude					
e	Ballast management					
f	Communication with retrieve crew					
g	ATC compliance (if applicable)					
please delete as necessary		<b>pass</b>		<b>fail</b>		examiner's signature



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Note: Use of checklist(s), airmanship, control of balloon by external visual reference, look-out procedures, etc. apply in all sections.

<b>Section 4 Gas Balloon</b>		<b>APPROACH AND LANDING PROCEDURES</b>				
		1 attempt		2 attempt		Remarks
		pass	fail	pass	fail	
a	Approach from low level, missed approach and fly on					
b	Approach from high level, missed approach and fly on					
c	Pre-landing checks					
d	Passenger pre-landing briefing					
e	Selection of landing field					
f	Landing, dragging and deflation					
g	ATC compliance (if applicable)					
h	Actions after flight (recording of the flight, closing flight plan (if applicable), briefing passengers for packing balloon, contact landowner)					
<small>please delete as necessary</small>		<b>pass</b>		<b>fail</b>		<small>examiner's signature</small>

<b>SECTION 5 Gas Balloon</b>		<b>ABNORMAL AND EMERGENCY PROCEDURES</b>				
<small>This section may be combined with Sections 1 through 4.</small>		1 attempt		2 attempt		Remarks
		pass	fail	pass	fail	
a	Simulated closed appendix during take-off and climb					
b	Simulated parachute or valve failure					
c	Other abnormal and emergency procedures as outlined in the appropriate flight manual					
d	Simulated passenger health problems					
e	Oral questions					
<small>please delete as necessary</small>		<b>pass</b>		<b>fail</b>		<small>examiner's signature</small>



Schweizerische Eidgenossenschaft  
Confédération suisse  
Confederazione Svizzera  
Confederaziun svizra

Federal Department of the Environment,  
Transport, Energy and  
Communications DETEC  
Federal Office of Civil Aviation FOCA  
Safety – Division Flight Personnel  
3003 Bern

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**Hinweis:**

Innert 10 Tagen nach Zustellung des Ergebnisses vom Skill Test/Proficiency Check kann beim Bundesamt für Zivilluftfahrt, 3003 Bern, schriftlich die Ausstellung einer beschwerdefähigen Verfügung über das Prüfungsergebnis verlangt werden.

**Remarque:**

Il est possible, dans les dix jours suivant la communication du résultat du Skill Test/Proficiency Check d'obtenir, sur requête écrite auprès de l'Office fédéral de l'aviation civile, 3003 Berne, une décision susceptible de recours portant sur le résultat dudit examen.

**Avviso:**

Entro dieci giorni dall'invio dei risultati dello Skill Test/Proficiency Check può essere richiesta per iscritto all'Ufficio federale dell'aviazione civile, 3003 Berna, una decisione impugnabile sull'esito dell'esame.

**Remark:**

Within 10 days after receipt of this skill test/proficiency check result, an appealable decision about the test / check results may be requested in writing to the Federal Office of Civil Aviation, 3003 Bern, using one of the official languages (German/French/Italian)