

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

NIT Night VFR (TMG)		Application & report form Applicant's Licence Nr.			
					Applica
Place of birth:		Place of origin:		Nationality:	
Adress:	Street/box:				
Postal c	ode: City		Count	ry:	
Phone:		e-ma	il:		
Summa	ary of the experience and trainin	ng for night qualif	ication TMG		
a)	training course completed		start date:	end date:	
b)	theoretical knowledge instruction in	lying in visual flight ru	ules (VFR) conditions at night	<u> </u>	
c)	flight time in TMGs at night		(MNM 5 HR)	hours:	
	night landings			landings	
d)	dual instruction		(MNM 3 HR)	hours:	
	including min. 50 km dual cross coul	ntry navigation	(MNM 1 HR)	hours:	
	solo take-offs and full-stop landings		(MNM 5)	take-offs:	
			(MNM 5)	landings:	
e)	basic instrument flight training for PF	PL .		date:	
f)	Attach copies of logbook, showin	g NIT training and c	onfirmation of completion		
Instructor last name:			First name:		
Licence no:		Signature of Instructor:			
The AT	O/DTO confirms that the candidate ha	s been trained in acc	cordance with approved syllabus.		
ATO/D	TO name:		Registration no	:	
Name	of Head of Training:		Licence no	:	
Location & date:			Signature of Head of Training:		
To be co	ompleted by applicant:				
I decla	re that				
•	I do not possess a pilot licence, ce issued in another EASA Member S I have not applied for a pilot licenc issued in another EASA Member S	itate. e, certificate, rating, a		same scope and in the same category	

- 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authorisation or attestation with the same scope and in the same category issued in another EASA Member State which was revoked or suspended in any other EASA Member State.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.

Date and place:	. Signature of applicant: