

Swiss Confederation

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

Date:

TRI SP (H) Type	Extensio	n
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Applicant's licence number:

Applicant	last name:		first name:		date of birth:	
place of birth:		place of origin:		natio	nality:	
private address: po	stcode:	city:		street:		
phone/fax home:			phone/fax offi	ce:		
e-mail:			signature of a	pplicant:		
Helicopter flight ho	urs:	PIC hours:	Copi hours:	IFR total hours:	Simul	ator hours:
Employed as pilot b	р <u>у</u> :			Invoice to be sent to:	applicant	company

TRI(H) application on helicopter Type :

Details of conditions and flying experience	ce
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a)	Licence PPL(H), CPL(H) or ATPL(H)	valid until:
b)	TRI (H)	valid until:
c)	EASA Medical Class 1 Class 2	valid until:
d)	Technical course (TRI) on the applicable type of helicopter	date:
e)	Minimum 2 hours of flight instruction on the applicable type, under the supervision of an adequately qualified TRI and:	hours:
f)	Copy of logbook (relevant pages)	
g)	Form 61.722 (assessment of competence AMC1 FCL.935)	
For M	E (SPH), additional requirements	
a)	Minimum 500 hours as pilot of helicopters	hours:
b)	Including 100 hours as PIC on single-pilot multi-engine helicopters	hours:

FOCA internal use only:	
TRI(H) new type :	date:
Remarks :	visum: