

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

	0) 7110	Application form		
FI(S) TMG class extension		Applicant's Licence No.		
Applicar	nt: Last name:	First name:		Date of birth:
Private a	address: Street:			
Postal co	ode: (City:	Country:	
Phone:		E-mail:		
			Signa	ture of applicant
Summa	ry of conditions and flight expe	erience:		
a) S	SPL Licence			issue date:
b) F	FI(S)			issue date:
c) E	EASA Medical class 1 / class 2			
d) (Completed at least 30 hours of flight til	me as PIC on TMGs		hours:
E	Enclose copy of logbook with 30 ho	urs as PIC on TMGs		
e) (Completed the training course including al least 6 hours of dual flight instruction on TMGs		t instruction on TMGs	date:
E	Enclose copy of logbook with dual f	flight instruction on TMGs		
f) F	Pass an Assessment of Competence on TMG with an nominated FI(S)		date:	
E	Enclose form 62.722			
FOCA internal use only: □ FI (S) on TMG class				date:
Remarks:				visum:

ADMINISTRATIVE INFORMATION - FOR FOCA ONLY

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