

**Revalidation TR SPH SE**

up to a maximum take-off mass of 3'175 kg
acc. FCL.740.H(a)(2)(ii)
(by completing a refresher training)

Application & report form

Applicant's Licence Nr.

Applicant : Last name: _____ First name: _____ Date of birth: _____

Private address: Street/box: _____

Postal code: _____ City: _____ Country: _____

Phone mobile: _____ e-mail: _____

Employed as pilot by (company name): _____

Company address: _____

Invoice and licence to be sent to: ☐ company ☐ applicant

Revalidation acc. FCL.740.H(a)(2)(ii) - complete, in the relevant type, within the validity period of the rating, at least 6 hours as PIC and within the 3 months preceding the expiry date of the rating, a refresher training of at least 1 hour of total flight time with an instructor:

Type of helicopter	<input type="checkbox"/> SEP <input type="checkbox"/> SET	Type:
Valid until		
Refresher training of at least 1 hour within the 3 months preceding the expiry date of the rating with an instructor	Date: Details of refresher training are to be entered by the instructor on page 2.	
6 hours as PIC in the relevant type	Hours:	

Revalidation of further type(s) acc. EASA FCL.740.H(b) or FCL.740.H(c) ☐ SEP < 3'175kg ☐ SET < 3'175kg**In case of SET revalidation, total time as PIC on helicopters (min 300 hrs) => please insert the total time:**

A copy of the relevant logbook page must be attached to this form.

Type used for last refresher training or check/test	Type	>6 hours as PIC on type within the validity period of the type rating	> 15 hours TT on type (in case of SET)	Type used for last refresher training or check/test	Type	>6 hours as PIC on type within the validity period of the type rating	> 15 hours TT on type (in case of SET)
<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/>		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

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.

Location & date: _____ Signature of applicant: _____

ADMINISTRATIVE INFORMATION – FOR FOCA ONLY

Version	ISS 01 REV 01 / 13.02.2025	Prepared by	SBFP / kaa	Released by	SL SBFP, 13.02.2025
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Licence Nr.

Details of refresher training:		<input type="checkbox"/> Helicopter <input type="checkbox"/> Simulator In case of a foreign-registered simulator, the FSTD certificate has to be attached.			
Date:	Type of helicopter:	Registration:	Training centre:		
Departure:	Destination:	Block-off:	Block-on:	Block time:	# of landings:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Remarks:					
Details of refresher training (normal, abnormal and emergency procedures):					
A copy of the relevant logbook pages showing the confirmed completion of the flight instruction must be attached to this form.					
Instructor licence no.: CH.FCL.		Foreign instructor licence no.: A copy of the foreign instructor licence has to be attached.			
Date and place:		Signature of Instructor:			
Handwritten entries by instructors are not permitted on the licence. The fully completed form 61.521 must be sent via email to FOCA pel-qc@bazl.admin.ch to revalidate the rating(s).					
Enclosures: <input type="checkbox"/> FSTD certificate (in case of a foreign-registered simulator) <input type="checkbox"/> Copy of the instructor's licence (applicable for foreign instructors) <input type="checkbox"/> Copies of the relevant logbook pages showing the confirmed completion of the flight instruction and of the required flight experience <input type="checkbox"/> Copy of the last logbook page showing the total time as PIC on helicopters (applicable in case of SET revalidation)					