FOCA/EASA Form 60.747 - 06.2012 EASA Part FCL.910.TRI 1/1

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

Swiss Confederation

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Applicant’s licence number:

<table>
<thead>
<tr>
<th>TRI MP (A) Type extension</th>
</tr>
</thead>
</table>

Applicant

<table>
<thead>
<tr>
<th>Last name:</th>
<th>First name:</th>
<th>Date of birth:</th>
</tr>
</thead>
</table>

Place of birth:  
Place of origin:  
Nationality:  
Post code:  
City:  
Street:  
Phone/fax home:  
Phone/fax office:  
E-mail:  
Signature of applicant:  
Total flight hours:  
PIC hours:  
Copi hours:  
IFR total hours:  
Simulator hours:  

Employed as pilot by:  
Invoice to be sent to:  □ applicant  □ company

TRI MP(A) application for aircraft type:  
Date:  

Summary of conditions and flying experience

a) Type of License  
CPL or ATPL (A):  

b) TRI MP(A)  
Valid until:  

Class 1  
Class 2  

Class 1  
Class 2  


c) EASA Medical  
Class 1  
Class 2  
Valid until:  


Within the last 12 months:

Min. 15 route sectors incl. landings and take-offs on the applicable type sectors:  
Of which 7 may be completed in a FFS sectors:  
(Enclose copies of the relevant pages of logbook)

d)  
Completed technical training and flight instruction parts of the relevant TRI course (enclose course confirmation)  
Date:  

Passed the relevant sections of the assessment of competence  
(Enclose form 60.722)  
Date:  

Remarks:  
Visum:  

FOCA internal use only:

□ TRI MP(A) validity date:  □ restricted to simulator  TR:  Date:  

Remarks:  
Visum:  

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