



Revalidation of single-engine helicopter types With maximum take-off mass up to 3175 kg

(single-engine, single-ploth relicopter powered by a pation engine) This form can only extend histologiet types in a helicopter group (SEP helicopter or SET helicopter). If you want to extend helicopter types in the helicopter group, an additional form needs to be submitted. Personal data Name Certificate number Address Pestoode Townicity Telephone number E-mail address Through controll, it has been established that the applicant fulfills the relevant requirements according to FCL.740.H (ii) Annex 1 (Part-FCL) for the extension of type ratings for single-engine helicopters by fulfilling the requirements below Holds a valid medical certificate in dass: Holds a valid certificate, specify type The applicant meets, on the relevant helicopter type, the requirements of FCL.740.H 2 (ii) and: has satisfactorily completed refresher training of at least one hour total flight time with an instructor within the three-month period preceding the last date of validity of the authorization Holds at least six hours of flight time as PIC on each type to be extended Pale of refresher training The instructor's or examiner's signature FSTD registration number Revalidation The instructor who holds authorization according to FCL.945 or alternatively the controller has extended the relevant helicopter type in the certificate Types to which the application intends Estended to	□ SEP			□ SET					
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controller has extended the relevant helicopter type in the certificate									
Types to which the application intends Extended to									
	Types to which the	Extended to							
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Revalidation of single-engine helicopter types

Types to which the	e application intends	Extended to					
Examiners signatu	ure		Date of this certificate	Authorization number			
Instructor's signate only applies to ins		according to FCL.945	Date of this certificate	Certificate number			
When extend	ding type appr	ovals for SEP helicopters wit	th a maximum take-off mass	s up to 3,175 kg:			
	•	oleted a refresher course wours of command on each					
		training or competence color of the previous extension		in a different way than			
When extend	ding type appr	ovals for SET helicopters wit	th a maximum take-off mass	up to 3,175 kg:			
	Has at leas	t 300 hours as a helicopte	er commander				
	Has at leas	t 15 hours of flight time on	n each type to which the e	xtension applies			
	•	oleted a refresher course w rs as a commander on eac					
	Repetition training or competence control has been carried out in a different way than in the case of the previous extension						
Based on the information provided above, I hereby apply for an extension of the type approval/ the type approvals according to the requirements of Part-FCL and confirms that the information provided on this form is correct. I also understand that incorrect information may disqualify me from being granted a certificate and/or an authorization. It is hereby certified also according to AMC1 ARA.GEN.315 that;							
 I do not hold a Part-FCL certificate issued by another Member State I have not applied for any certificate according to Part-FCL in any other Member State and that I have never had a Part-FCL certificate issued in another Member State which has been revoked or suspended in another Member State. Applicants signature							
Applicants Date	signature	Printed name					
Signature							

According to the aviation regulation, the aviation authority must keep certificate registers. Your personal data on this form will be registered in this register.

The documents can be scanned as a pdf file and emailed to: certifikat.w3d3@transportstyrelsen.se or sent to: Transportstyrelsen, 601 73 Norrköping