

APPLICATION FOR THE REPLACEMENT OF A FLIGHT CREW LICENCE

Please complete the form in **BLOCK CAPITALS** using black or dark blue ink after reading the attached guidance.
 If any mistakes are made on this form, please strikethrough the mistake and sign next to the correct entry. (make sure the incorrect entry can still be read)

PAYMENT METHODS. Please complete form SSR\1187.

FALSE REPRESENTATION STATEMENT

It is an offence to make, with intent to deceive, any false representations for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. Persons doing so render themselves liable and subject to prosecution under the current applicable regulation. Refer to the Civil Aviation (Safety) Regulations, 2017.

1. PERSONAL DETAILS

Title Forename(s) Surname.....

Date of birth (dd/mm/yyyy) Nationality

Town of Birth Country of Birth

Permanent address

.....

Telephone Number Alternative Telephone

E mail address

Name and Address of Operating Company/Employer

.....

..... Telephone Number

2. DETAILS SEYCHELLES LICENCE(S) TO BE REPLACED

To be completed by the Applicant

Type of Licence (e.g. CPL, ATPL etc.)	Category of Licence (e.g. Aeroplane, Helicopter etc.)	Licence Number	Expiry Date

3. SEYCHELLES MEDICAL CERTIFICATE

To be completed by the Applicant

State of Issue	Medical Class (1 or 2)	Date of most recent Medical Examination	Expiry Date	AME Name & Location	Details of any Limitations

Does the above Seychelles Medical Certificate need replacement? Yes No

4. CIRCUMSTANCES OF LOSS / DAMAGE

Describe below, as fully as possible, the circumstances of the loss of, or damage to, your flight crew licence:

.....
.....
..... Date of loss

What enquiries have been made, and where?

If the loss was reported to the Police,
at which Police Station was the report made?
(if lost abroad, indicate to which Seychelles representative the loss was reported)

5. PAYMENT METHODS

Please complete form SSR\1187.

6. DECLARATION

I hereby declare that the information given in this form is true and correct to the best of my knowledge and belief.
I further declare that if the lost flight crew licence is found, I shall return it to the Seychelles Civil Aviation Authority (SCAA) without delay.

Applicant's Signature Date

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7. SUBMISSION INSTRUCTIONS

Send your completed application form, police report and statement to:

Seychelles Civil Aviation Authority
Safety & Security Regulation Department
P.O Box 181,
Mahe,
Seychelles

OR

Email this application form to PEL@scaa.sc

OR

Attach this application form to the correct application type on the **Centrik Applications Module**. Please contact the **SCAA** or your **Seychelles Operating Company** for guidance on submitting your application through Centrik.

Together with (if applicable):

- If the licence is lost, please enclose copy of the Police report / written statement that the licence has been lost, and stamped by the local police.
- If the licence is damaged, please provide the original damaged Flight Crew Licence
- Payment Method Form (Form SSR/1187)

Please note that failure to submit all of the required documentation may lead to a delay in processing your application.



GUIDANCE NOTES, PAYMENT FORM & SUBMISSION INSTRUCTIONS

Guidance Notes

All sections of the application form must be completed by the applicant personally.

Details of where to send your application, including a checklist for the required supporting documentation can be found under 'Submission Instructions'.

For the SCAA to process your application as quickly as possible, it is important that you complete the application form correctly. Please complete the form in conjunction with the following guidance notes.

Section 1 – Personal Details

The permanent address will be entered on your replacement flight crew licence and will also be the address to which the licence will be sent. If you want the licence sent to an alternative address, please enter the details under 'correspondence address'.

Section 2 – Details of SCAA Flight Crew Licence(s) to be replaced

Please enter details of the SCAA-issued flight crew licence(s) to be replaced.

Section 3 – Seychelles Medical Certificate

Please enter details of your valid Seychelles Class 1 or Class 2 Medical Certificate, and indicate if you also require replacement of the Medical Certificate

Note: A valid Seychelles Medical Certificate appropriate to the licence to be replaced, must be held in order to obtain a replacement flight crew licence.

Section 4 – Circumstances of loss / damage

Please enter full details of the circumstances of the loss of, or damage to, your licence.

If the licence has been lost in Seychelles, please give details of the Police station where the loss was reported, together with the Police Statement / written statement that the licence has been lost, and stamped by the local police.

If the licence has been lost outside Seychelles, please give details of the local Seychelles representative where the loss was reported.

If your licence was damaged, please bring your original Flight Crew Licence when submitting this application.

Section 6 – Applicant's Declaration

This section must be completed by the applicant after reviewing all information entered on the application form.