



NIT Night VFR (A)

Application & report form

Applicant's licence no:

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

Address: Street/box: _____

Postal code: _____ City: _____ Country: _____

Phone: _____ e-mail: _____

Summary of the experience and training for night qualification aeroplane

- a) training course completed within a period of six months start date: _____ end date: _____
- b) theoretical knowledge instruction
- c) night flight experience (MNM 5 HR) hours: _____
night landings landings: _____
- d) dual instruction (MNM 3 HR) hours: _____
including min. 50 km dual cross country navigation (MNM 1 HR) hours: _____
solo take-offs and full-stop landings (MNM 5) take-offs: _____
(MNM 5) landings: _____
- e) basic instrument flight training for PPL (applicable for LAPL holder only) date: _____
- f) **Attach copies of logbook, showing NIT training and confirmation of completion**

Instructor last name: _____ First name: _____
Licence no: _____ Signature of Instructor: _____

The ATO/DTO confirms that the candidate has been trained in accordance with approved syllabus.
ATO/DTO name: _____ Registration no: _____
Name of Head of Training: _____ Licence no: _____
Location & date: _____ Signature of Head of Training: _____

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authorisation or attestation with the same scope and in the same category issued in another EASA Member State which was revoked or suspended in any other EASA Member State.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 licence, certificate, rating, authorisation or attestation, or having it revoked or cancelled.

Date and place: Signature of applicant:

ADMINISTRATIVE INFORMATION – FOR FOCA ONLY

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