

Report Form on combined OPC/LPC

For the purpose of revalidation of a rating in accordance with FCL.740.A/FCL.740.H

A. Details on applicant:

Date of Birth:	Certifikat nr/Licence no:	Udstedende Stat/State of Licence Issue:
Fornavn/First name(s):		Efternavn/Last name:

B. Details on OPC/LPC:

Name of AOC-holder with which OPC/LPC was performed:					
Address:					
Approved by (State name of CAA):					
Date of OPC/LPC:	Aircraft Reg or FSS Auth number:	Aircraft type:	PIC	CO-PILOT	
OPC/LPC was performed:	Simulator	Aircraft	IFR	VFR	PBN

C. To be completed by the Examiner:

I, undersigned authorised examiner, hereby declare that I have conducted a combined OPC/LPC with the above mentioned licence holder with following result:					
		Passed	Partial Passed	Failed	
Name of Examiner:			Examiners Authorisation No.:		
I have entered the following details in the applicants licence:					
Rating		Date of check		Valid until	
Rating		Date of check		Valid until	
<input type="checkbox"/> I have not endorsed the licence					
Date of signature:		Signature of Examiner:			

D. In the event of a "Partial Pass" of an OPC/LPC, all items not passed shall be listed below in accordance with Appendix 9. The re-test of the failed items shall be conducted using the Multi-Pilot Airplane or HPCA Skill Test and Proficiency Check Form.