



MINISTRY OF  
CONSTRUCTION AND TRANSPORT

**National licence conversion application form**

According to Part-BFCL, Part-FCL and Part-SFCL

1. Applicant's data	
last name:	first name:
place of birth:	date of birth:
nationality:	phone nr.:
mother's maiden name:	e-mail:
address:	
postal address:	<input type="checkbox"/> same as above
licence number:	
receipt of the new licence:	<input type="checkbox"/> personally <input type="checkbox"/> to postal address
in case of verification letter:	<input type="checkbox"/> electronically
2. Billing details	
name (if differs from customer's name):	
address:	
postal address:	<input type="checkbox"/> same as above
3. Authorisation	
I hereby authorise the below-mentioned person/company to act on my behalf with full privileges with the exception of personal statements during this procedure at the Aviation Authority of Hungary.	
name of representative:	ID nr. of representative:
address of representative:	
date:	signature of applicant:
witness 1:	witness 2:
name:	name:
address:	address:
ID nr.:	ID nr.:
sign.:	sign.:



## 7. Applicant's declaration

I hereby declare that

- all the information given above is correct to the best of my knowledge without concealing any relevant data or providing any misleading or false information. I acknowledge that in the event of providing false or misleading information, the CAA may deny to issue, or, revoke the pilot licence.
- I am aware of the relevant part of regulation related to the subject of my application.
- as per AMC1 ARA.GEN.315(a):
  - (1) I am not holding any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State;
  - (2) I have not applied for any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category in another Member State; and
  - (3) I have never held any personnel licence, certificate, rating, authorisation or attestation with the same scope and in the same category issued in another Member State which was revoked or suspended in any other Member State.

place and date of signature:

signature of applicant: