

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:
Fornavne/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. If OPC/LPC is Partial Passed, list the failed items according to Appendix 9:
 (In this case use Multi-Pilot Airplane or HPCA skill test and proficiency check form)**