



**Recreation Aviation Administration South Africa**

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DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE			
Bank:	Branch:	Branch Code:	Account Number:
Standard Bank	Alberton	012342	020615264

**APPLICATION FOR THE RENEWAL OF A RECREATION PILOT LICENCE**

Requirements for Application

1. **Certified** copy of ID or Passport.
2. 1x Passport Photo in colour
3. Summary of logbook with all types endorsed and hours flown incl pages of hours flown in the last 12 months (Min 5hrs in category LSA, CCM, WCM and 10hrs in last 12 months in case of Gyro, GYR)
4. Signed Copy of skills test by A or B grade instructor (Practical flight test all categories)
5. Copy of exam results (where applicable)
6. Copy of Restricted Radiotelephony Certificate.
7. **Certified** copy of valid medical applicable to your category Part 67.
8. Proof of training/type rating in the category applying for i.e. LSA, Conventional micro light, weight shift micro light, Gyroplane. Endorsed by Instructor in Logbook.
9. Appropriate fees as per Part 187 & Proof of Payment

WCM	CCM	LSA	GYRO	TMG
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1. Surname of applicant (Mr/Mrs/Miss) ..... (Block letters)
2. First names ..... (Block letters)
3. Identity Number .....
4. Licence No. ....
5. Nationality ..... Permanent resident in SA? **YES/NO**
6. Residential address ..... Code: .....
- Postal address ..... Code: .....
7. Telephone Number ..... Cell No.: ..... Email address .....
8. Date of last medical examination: .....
9. Date of last flight test: .....

**LOGBOOK SUMMARY: (LAST 12 MONTHS)**

**FLYING EXPERIENCE**

1. Pilot licence	Pilot-in-command	Co-pilot	Dual
(a) Flying hours during last 12 months .....	.....	.....	.....
(b) Grand total flying hours .....	.....	.....	.....

3. Instructor Rating

- (a) Grade held .....
- (b) Flying hours as instructor (excluding cross-country flights) during past 12 months .....

**CERTIFICATE BY APPLICANT OR AUTHORISED PERSON**

I certify that the above-mentioned particulars are true and correct and that the respective licences were valid during the hours flown.

Signature of applicant ..... Date .....

Licence number.....

Email address.....

Tel/Cell.....