



**APPLICATION FOR AN ULTRA-LIGHT PILOT PERMIT - AEROPLANE**

**Part A: Personal Information**

Surname		Pilot File 5802 N*	
Given Name(s)		Gender M <input type="checkbox"/> F <input type="checkbox"/>	
Address		Date of Birth (yyyy-mm-dd)	
Address (Line 2)	City	Citizenship	
Province/Territory	Country	Postal Code	
Home Telephone Number		Office Telephone Number	
E-Mail Address		Other Telephone Number	

**Part B: Licensing Requirements**

(1) Age Age in Years

(2) Medical Fitness Category

(3) Knowledge Ground School Completed   
 ULTRA  Date of Exam (yyyy-mm-dd) \_\_\_\_\_ Passed

(4) Experience (hours). I have completed a minimum of 10 hours ultra-light flight time   
 (To be completed within 24 months preceding the date on the application)

Ultra-Light Aeroplanes	Dual	Solo
Day		
Number of take-offs and landings		
Powered Parachutes		Solo
Number of Hours		

(5) Skill Date of last Flight Demonstration (yyyy-mm-dd) \_\_\_\_\_ Passed

Credit Available (Select Credit and Provide Proof):  
 Knowledge  Experience  Skill  Powered Parachutes

**Declaration of Applicant** - I hereby declare that all the information provided in Part A and B above, is true.

\_\_\_\_\_  
 Signature of Applicant Date of Application (yyyy-mm-dd)

**Part C: Declaration of Authorized Person**

I hereby declare that the above-mentioned applicant has met the requirements for permit issue in accordance with the Canadian Aviation Regulations - CAR 421.21

Flight Training Unit	Temporary Privileges were granted to this applicant <input type="checkbox"/>
Ratings / Restrictions	
Name of Authorized Person	File 5802 N*
_____ Signature of Authorized Person	_____ Date (yyyy-mm-dd)

**Part D: For Departmental use Only**

Checked and DAPLS Updated	Permit Fee Paid <input type="checkbox"/>
Licensing Officer or Inspector	Receipt Number _____
Date (yyyy-mm-dd)	Document Issued <input type="checkbox"/>