



CASA Stamp:

IMPORTANT INFORMATION FOR APPLICANTS

- 1: If you do not have an ARN, you must submit **Form 1162** (Aviation Reference Number (ARN) Application) including appropriate identification with **this** application. This will fulfil the mandatory requirement for an ARN.
- 2: Please refer to the Flight Crew Licensing Manual when applying for a Certificate of Validation (CoV) to ensure you complete this application form correctly.
- 3: This is a short term authorisation, valid for a period of up to 12 months. It is tailored to the specific operation(s) undertaken. You must provide detailed information about why the CoV is required in *Section A3*.
- 4: An application for a CoV may take up to 28 days to process. Please submit the application well in advance of when you require the CoV but no longer than 3 months ahead of when you require the CoV.
- 5: You must meet the English Language Proficiency standards in the Part 61 Manual of Standards. Please indicate in *Section A4* the option that applies to you, noting that for a CoV, you must have been assessed to at least Level 4 in ICAO English Language Proficiency.
- 6: Certified true copies of logbook pages of the last 3 months or last 3 full page openings (whichever is the lesser) of your current logbook must be attached to this application. Evidence of aircraft endorsement should also be included if applicable. If further evidence is required by CASA, you will be notified. You are not required to satisfy the Australian aeronautical experience requirements if you hold the equivalent or higher class of foreign licence.
- 7: Certification of documents can only be made by a Notary Public or a [CASA DAME](#) in your home country. Alternatively, an Australian official at any [Australian Embassy or High Commission](#) can certify your documents. If you are in Australia, your documents can be certified by any of the persons identified by the Australian Attorney-General's Department as [authorised witnesses](#).
- 8: Where an Instrument Rating is requested, you will need to provide evidence of your last proficiency check, details of privileges you hold for instrument approaches and category ratings (eg: multi engine aeroplane, single engine helicopter).
- 9: Payment for this application can be made online. Go to the CASA webpage and click the Payment button. You must attach a copy of the receipt with this application.
- 10: This form can be **completed electronically and saved locally** to your computer. Once the ARN has been entered into the first page, it will automatically update in the applicant ARN fields on subsequent pages. CASA recommends that applicants complete as much of the form electronically as possible.
- 11: Please ensure your application and the checklist are completed correctly and that all required supporting documentation is provided. **Incomplete applications will not be accepted** and may be returned to you for amendment. **Fields marked with an * are mandatory.**

Applicant Details as per Birth Certificate / Passport:

Title:* _____

Family Name:* _____

Given Names:* _____

Date of Birth:* _____

Applicant ARN:*

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CONTACT DETAILS

Note: You are required to notify CASA of any changes to your personal contact information (refer to CASR 11.070). Correspondence, including permissions issued as a result of this application, will be sent by post to the current postal address according to CASA's records.

You should notify CASA of any changes using one of the following methods:

- Log onto the CASA Self Service Portal <https://portal.casa.gov.au/selfservice/>
- Submit Online Change of Details form <https://portal.casa.gov.au/casaforms/addrchange.htm>

Privacy Statement: Any personal information you provide to CASA is protected by the *Privacy Act 1988* (Cth). CASA can only collect, use and disclose that information in accordance with that Act. CASA will use the information collected in this form for purposes associated with performing its functions under the *Civil Aviation Act 1988*, the *Airspace Act 2007*, the *Aviation Transport Security Act 2004* or the regulations made under those Acts. For full details on how CASA collects, protects and uses personal information, please refer to [CASA's Privacy Policy](#).

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Type of Application: *

- CoV Private Operations**
- CoV Commercial Operations**
- CoV Renewal**

Section A: Qualification Details*

1. Details of Overseas Licence* (Please attach certified true copies of overseas documents)

Country of Issue:			
Licence Type:		Number:	
Date of Expiry of Licence: (if applicable)	____ / ____ / ____	Date of Expiry of Medical:	____ / ____ / ____
Current Ratings:	<input type="checkbox"/> Instrument <input type="checkbox"/> Instructor <input type="checkbox"/> Aerial Application <input type="checkbox"/> Other _____		
Do you hold a separate Flight Radio Telephone Operators Licence?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes to above, supply the following:	Number	Date of Expiry ____ / ____ / ____	
List any restrictions (medical or operational) on your licenses if applicable?			
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2. Type of CoV Requested in this Application*

Please complete the appropriate option(s)

A. Certificate of Validation – Private Operations Details:		<input type="checkbox"/> Aeroplane	<input type="checkbox"/> Helicopter
Please tick the type of Operations you will be undertaking:			
<input type="checkbox"/> Training to obtain an aircraft class/type rating			
<input type="checkbox"/> Training to obtain an operational rating			
<input type="checkbox"/> Holiday flying			

B. Certificate of Validation – Commercial Operations Details:		<input type="checkbox"/> Aeroplane	<input type="checkbox"/> Helicopter
<input type="checkbox"/> Ferrying of Aircraft <input type="checkbox"/> Commercial			
Instrument Rating – ONLY issued for Aircraft Ferrying operations:			
Please tick selected approaches:		<input type="checkbox"/> IAP2D	<input type="checkbox"/> IAP3D (Refer to CASR 61.890)
Note: You must attach evidence of your last proficiency check, details of the privileges you hold for instrument approaches and category ratings (eg. Multi-engine aeroplane, single engine helicopter)			
Name of Operator:			
Address of Operator:			
State:		Postcode:	
		Country:	

C. Certificate of Validation – Renewed within 1 month of expiry:		<input type="checkbox"/> Aeroplane	<input type="checkbox"/> Helicopter
Note: Evidence supporting this application does not need to be re-submitted for a renewal within 1 month or expiry of a current CoV.			

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3. Reasons for Requiring CoV*

Please provide relevant details about the reasons for requiring a CoV.

Holiday Flying:	
Date/s of Flight/s	
Ferrying:	
Aircraft Type	
Aircraft Registration	
Organisation	
Date/s of Flight/s	
Origin of Flight	
Destination of Flight	
Planned Route	
Company Operations:	
Type of Operation	<input type="checkbox"/> Line Operations <input type="checkbox"/> Charter <input type="checkbox"/> Flight Instruction
Employer Name	
Start Date	
Training:	
Type of Course	
Planned Duration	
Start Date	
Training Organisation	

4. English Language Proficiency Requirements*

Please select the option below that applies to you:

- ELP (ICAO Level 4, 5 or 6) is listed on my overseas licence.
- I have previously completed an ICAO English Language Proficiency assessment and the assessment report was submitted to CASA (Flight Crew Licensing).
- I have completed an ICAO English Language Proficiency assessment - attach assessment.

5. Aircraft Class / Type Ratings Refer to CASR Part 61 Legislative Instrument for Type Ratings

List the Class or Type Ratings for the Aeroplane Category for which you are qualified to fly:

<input type="checkbox"/> Aeroplane		<input type="checkbox"/> Simulator		<input type="checkbox"/> Helicopter		<input type="checkbox"/> Simulator	
<input type="checkbox"/>	Single Engine Class	<input type="checkbox"/>	Single Engine Class	<input type="checkbox"/>	Type Rating*:		
<input type="checkbox"/>	Multi Engine Class	<input type="checkbox"/>	Type Rating*:				
<input type="checkbox"/>	Type Rating*:						

Use type designator from the "Prescribed aircraft, ratings and variants for CASR Part 61 Instrument 2014"

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7. Fit and Proper Person Requirements* Refer to CASR 11.055 and Aviation Transport Security Regulations 2005, regulations 6.55 and 6.59.

Has any action been taken against you; or is any action in the process of being taken against you; or have you been refused the issue of any aviation related licence, certificate, rating or authority by any organisation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been refused the issue of a transport related licence or certificate? (eg, pilot's licence, pilot certificate, driver's licence, boating licence,)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any criminal conviction or finding of guilt, which is less than ten years old, or any juvenile criminal conviction or finding of guilt, which is less than five years old? Note: You should also include all motor vehicle traffic-related convictions including those from overseas.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is suspension or cancellation action pending in relation to any aviation licence you hold?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you have answered **yes** to any of the questions above, please provide details on a *separate page*. Include details about dates, actions, charges, convictions and imprisonment in Australia and Overseas (attach a separate page if necessary).

Section B: Applicant Checklist* Enter 'Y' or 'N' in applicable boxes.

<input type="checkbox"/>	I hold an ARN OR
<input type="checkbox"/>	Form 1162 Application for an ARN is attached
<input type="checkbox"/>	I hold a valid and current overseas licence (certified true copy is attached) CASR 61.290 (3)
<input type="checkbox"/>	Certified true copies of last 3 months or 3 page openings (whichever is the lesser) of current logbook (plus pages showing evidence of aircraft endorsement, if applicable)
<input type="checkbox"/>	I have given the Civil Aviation Authority in the country of licence issue the authority to release information to CASA
<input type="checkbox"/>	I have a current ICAO ELP Assessment or ELP (ICAO Level 4, 5 or 6) listed on my licence, OR
<input type="checkbox"/>	Assessment report is attached, OR
<input type="checkbox"/>	Assessment previously submitted
<input type="checkbox"/>	Evidence for Instrument Rating attached OR
<input type="checkbox"/>	Not applicable
<input type="checkbox"/>	Online payment receipt attached, OR
<input type="checkbox"/>	Payment Authorisation completed (cheque or money order attached if applicable)

Section C: Applicant Declaration*

I hereby certify that all statements in this application are true and correct in every particular and that I have read and understood all regulatory references included in this application. I consent to CASA using and disclosing my personal information in accordance with CASA's privacy policy including exchanging the information with Commonwealth, State and Territory government agencies (see [CASA's Privacy Policy](#)). I have attached all required documentation specified in the applicant checklist and acknowledge that to knowingly make a false or misleading statement is an offence against the *Criminal Code Act 1995* (Cth).

Signature: _____	Date: ____ / ____ / ____
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Section D: Australian Postal Address

If an Australian postal address is provided, your original CoV will be posted to this address. If Form 078 – Authority to Release Information is also provided, CASA will also email the third party a document copy of the CoV and Form 139 Permission to Fly, at the same time as the pilot.

Address Line 1		
Address Line 2	State	Postcode
Email		

Certificate of Validation Application on the basis of Foreign Civil Qualifications

ARN:

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Payment Authorisation

Payment made online *Attach printed receipt and do not complete remainder of this page.*

Applicant Details *

Surname:		Given Names:	
Mobile:*		Email:*	

* These details will be used to follow-up payment issues only. These details will NOT be updated in CASA's database.

Licence Fees *

Fee Code	Description	Total
<input type="checkbox"/> 24.6 030	Issue of a Certificate of Validation (Private Operations) – processing and consideration	\$ 150
<input type="checkbox"/> 24.6 031	Issue of a Certificate of Validation (Commercial Operations) – processing and consideration	\$ 200
<input type="checkbox"/> 24.6 006	Issue of a Certificate of Validation (Renewed within 1 month of expiry) – processing and consideration	\$ 130
Total Cost:		\$ _____

Details of Third Party Payment

Individual's or Organisation's Full Name:		
Email:		
Postal Address:		
State:	Postcode:	Country:
Contact Phone:		ARN: (if applicable)

Payment Options *

- I have enclosed a Cheque or Australian Money Order **(please make cheques payable to CASA)**
- I am paying by credit card – please ensure you complete ALL details below including the card holder name and the total amount

I hereby authorise the Civil Aviation Safety Authority to debit the following amount from my: MasterCard <input type="checkbox"/> Visa <input type="checkbox"/>											
Card Number: <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>											Expiry Date: ____ / ____
Card Holder Name (please print):	Total: \$ _____										
Signature:	Date: ____ / ____ / ____										

Attach this Payment Authorisation Form (and Cheque / Money Order / Purchase Order) to the Application Form.

- **Email** clarc@casa.gov.au
- **Mail to:** CASA Licensing and Registration Centre
GPO Box 2005
CANBERRA ACT 2601
- **Fax to:** 1300 737 187

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Receipt No:		Initial:	