



Section/division:
Telephone number:
Physical address:
Postal address:

Personnel Licensing
0860 267 435

Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng

Private Bag X73, Halfway House 1685 Website: www.caa.co.za

Fax Number:

011-545-1459

Form Number: CA 61-01.16

Email: ClientCare@caa.co.za

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE			
Bank: Standard Bank of SA Ltd	Branch: Brooklyn, Pretoria	Branch Code: 011245	Account Number: 013007971
COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)			
Service/transaction	Over the counter payments		EFT, Internet, Wire, Electronic payments
Application for professional pilot	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
ANNUAL SUBMISSION FOR MAINTENANCE OF PILOT LICENCE VALIDITY			

NOTES:

Attach:

- certified copy of the logbook summary as required by CAR 61.01.5(9);
- proof of payment of the annual currency fee.

Surname of applicant			First names		
Gender (Male/Female)			Date of birth		
RSA ID/Passport			Nationality		
Licence number			Licence held		
Date of issue of licence			Date of expiry of licence		
Population group (for statistical purpose)	African	White	Coloured	Asian	Other
Residential address				Province	
Postal address				Province	Postal code
Telephone number			Cellular phone number		
Email address					
SIGNATURE OF APPLICANT		NAME IN BLOCK LETTERS		DATE	