



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

Personnel Licensing, Safety Standards and Assurance

0860 267 435

Fax Number:

011-545-1459

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

Private Bag X73, Halfway House 1685

Website: www.caa.co.za

Email: ClientCare@caa.co.za

Form Number: CA 61-09.20

<b>DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE</b>			
Bank: <b>Standard Bank of SA Ltd</b>	Branch: <b>Brooklyn, Pretoria</b>	Branch Code: <b>011245</b>	Account Number: <b>013007971</b>
<b>COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)</b>			
Service/transaction	Over the counter payments	EFT, Internet, Wire, Electronic payments	
MCC Certificate			
<b>CERTIFICATE FOR MULTI-CREW COOPERATION (A &amp; H)</b>			

<b>DETAILS OF CERTIFICATE HOLDER</b>			
Surname		First names	
RSA ID/Passport		Licence Number	
Nationality			
Residential address			
Postal address			
		Postal code	
Telephone Number		Cell number	
Facsimile Number		Email address	
<b>SIGNATURE OF CERTIFICATE HOLDER</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>	

<b>CERTIFICATE</b>			
I, the undersigned, certify that crew member			
has complied with, and has been assessed according to the requirements as prescribed in Document SA-CATS 61.09.1; 2.(5)-(10) and Appendix 20.0 to SA-CATS 61.			
The crew member is competent to operate safely in multi-pilot operations under IFR as the pilot flying (PF) and pilot not flying (PNF)			
Aircraft/Simulator designator		Aircraft/Simulator reg.	
Name of instructor		Licence number	
Name of training organisation		CAA ATO Number	
<b>SIGNATURE OF INSTRUCTOR GR. I/II</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>	