



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

Form Number: CA 61-09.7

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
<b>COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)</b>			
<b>Service/transaction</b>	<b>Over the counter payments</b>		<b>EFT, Internet, Wire, Electronic payments</b>
Notification of differences or familiarization training			

**NOTIFICATION OF AIRCRAFT DIFFERENCES OR FAMILIARISATION TRAINING**

Differences training		Familiarisation training	
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Pilot		Co-pilot		Pilot Instructor		Pilot Instructor (FSTD Type Specific ONLY)	
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**DETAILS OF PILOT**

Name and Surname		Licence number	
Cell phone number		Email address	
<b>SIGNATURE OF PILOT</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>	

**AIRCRAFT DETAILS**

**Class rating**

ICAO or SACAA designator		Aircraft model description	
Aircraft manufacturer		Aircraft registration	

**Type ratings**

SACAA Type Designator		Aircraft Type/variant description	
Aircraft Manufacturer		Aircraft registration	

**TRAINING DETAILS**

Date of training completion		Name of ATO		ATO number	
Aircraft registration		FSTD registration			
Duration of training	Simulator		Aircraft		
Duration of skill test	Simulator		Aircraft		

**DETAILS OF FLIGHT INSTRUCTOR WHO CONDUCTED THE TRAINING (IF APPLICABLE)**

Name and Surname		Licence number	
I confirm that the differences/familiarisation training was conducted in compliance with the SACAR and Document SA-CATS 61.			
<b>SIGNATURE OF INSTRUCTOR</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>	

DETAILS OF EXAMINER		
Name and Surname		Licence number
I confirm that the differences/familiarisation training was conducted in compliance with the SACAR and Document SA-CATS 61, and that the pilot is competent to safely operate the aircraft specified in this form.		
<b>SIGNATURE OF EXAMINER</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>

TEMPORARY CERTIFICATE OF COMPETENCY FOR RATINGS (A) AND (H)		
I, the undersigned, certify that I have endorsed the logbook of applicant		
in respect of the rating on type		and authorise him or her to fly this aircraft
for a period of 30 days within the Republic of South Africa without the appropriate licence endorsement.		
<b>SIGNATURE OF EXAMINER</b>	<b>NAME IN BLOCK LETTERS</b>	<b>DATE</b>