

APPLICATION FORM FOR A CHANGE OF COMPETENT AUTHORITY

(SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS)

Applicant information		
Title (Mr. Mrs)		
First name(s):		
Middle name(s)		
Family name(s):		
National identification number: (Belgian citizens only)		
Date of birth (DD-MM-YYYY):		
Place of birth (City):		
Country:		
Nationality:		
Official address		
Street name:		
Number:		
Town/City:		
ZIP/Post code:		
Country:		
Email address:		
Telephone number:		
License and certificates information	on	
()		
License(s) held (PPL, CPLetc.)	Number	Restrictions

1

Certificate(s) held (FI; TRIetc.)	Number	Restrictions		
Medical certificate (s)				
Certificate(s) held (LAPL; Class 1; Class 2etc.)	Number	Restrictions		
Current competent authority				
Name:				
Country:				
Future competent authority				
Name:	SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS (BELGIUM CAA)			
Country:	BELGIUM			
2. Declaration		to be completed by the applicant		
Hereby I apply for a change of competent authority from my current competent authority to the <u>SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS</u> . To that end, I consent the transfer of my license; medical records and associated exchange of information between the current and future competent authorities. I apply for transfer of all my licenses issued in accordance with Regulations (EU) No 1178/2011, (EU) 2018/395, and (EU) 2018/1976 within the different categories.				
I will immediately surrender my current licenses/certificates and medical certificate to the <u>SERVICE PUBLIC FEDERAL MOBILITE ET</u> TRANSPORTS upon receiving the 'new' licenses/certificates and medical certificate.				
I understand that the current competent authority remains my competent authority until I have received the new licenses/certificates and medical certificate, as applicable, issued by the SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS .				
I hereby declare that I have not submitted any other request to another competent authority than the <u>SERVICE PUBLIC FEDERAL</u> <u>MOBILITE ET TRANSPORTS</u> .				
I have fully reviewed the <u>SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS transfer procedure</u> and I am aware of all the necessary paperwork to be submitted for my application to be considered.				
I declare that the information provided on this application form is true, complete, and correct. Any incorrect information on this form or non-compliance with the essential requirements of Annex IV to the Basic Regulation or with the requirements of Regulations (EU) No 1178/2011, (EU) 2018/395, and (EU) 2018/1976 could disqualify the applicant from having his records transferred from the current to the SERVICE PUBLIC FEDERAL MOBILITE ET TRANSPORTS.				
Signature:		Date:		

3. Supporting documents		
Copy of the following documents and certificates (in PDF format) need to be submitted together with this application form:		
□ Pilot license(s) (PART-FCL; BFCL or SFCL);		
☐ Current medical certificate;		
□ Passport;		
☐ Last two flight logbook pages;		
☐ If Multi-Pilot rating to be added: Copy of last proficiency check;		
☐ Airplane Transport Pilot License (ATPL) theory exam certificate – The result of each subject is required;		
☐ Multi Crew Cooperation Course (MCC) certificate (If not entered in the licence);		
☐ Flight logbook with proof of PBN privileges (If not entered in the licence).		
 The application and supporting documents must be sent via email to: bcaa.lic.dir@mobilit.fgov.be The email "subject" must be: Change of state -Family name(s) + Fist name(s) - your License number Example: Subject: Change of State - WHITE Jhon - BE.FCL.123456.X 		
Important observation Upon submission of your application, an acknowledgement email will be sent to the email address you have entered in the application form and not to the email address used to submit the application, unless they are the same. The email contains a TICKET NUMBER that should be used during the whole process. The easiest way to ensure this is by always replying trough the emails received from us.		