

## Nomination of Agricultural Chief Pilot

Note: The CAA Standard Rate hourly charge applies. Follow the link for information on [fees and charges](#).

<b>Operator:</b> [ ]		<b>Client ID:</b> [ ]	
Address for Service: <i>Civil Aviation Act, s8, requires applicants to provide an address for service in New Zealand (ie, a physical address) and to promptly notify the Director of any changes</i>		[ ]	[ ]
		[ ]	[ ]
		[ ]	[ ]
		[ ]	[ ]
Tel: [ ]	Fax: [ ]	Email: [ ]	[ ]
Postal Address: <i>(If different from Address for Service.)</i>		[ ]	[ ]
		[ ]	[ ]
		[ ]	[ ]
		[ ]	[ ]
Tel: [ ]	Fax: [ ]	Email: [ ]	[ ]
<b>1. Qualifications of Chief Pilot</b>			
(a) Chief Pilot nominee:	[ ]		
(b) Licence number:	[ ]	Licence type: CPL	<input type="checkbox"/> ATPL <input type="checkbox"/>
(c) Ratings:	Aeroplanes	<input type="checkbox"/>	Agricultural Grade 1: <input type="checkbox"/> Agricultural Grade 2: <input type="checkbox"/>
	Helicopters:	<input type="checkbox"/>	Chemical: <input type="checkbox"/>
(d) Endorsements:	[ ]		
(e) Hours:	P in C single engine:	[ ]	P in C multi engine: [ ]
	P in C helicopters:	[ ]	Productive agricultural flight time: [ ]
			Total time: [ ]
(g) Productive agricultural flight time by aircraft type:			
Aircraft Type:	Hours:	Aircraft Type:	Hours:
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]

## 2. Aviation Background

Companies and duties:	Dates:	From	To
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]
[ ]	[ ]	[ ]	[ ]

**3. Supervisory Experience**

Companies and duties:	Dates:	From	To

**4. A completed Fit and Proper Person Questionnaire - [CAA 24FPP](#) must accompany this application**

**5. Declaration**

<p><i>The provision of false information or failure to disclose information relevant to the grant or holding of an aviation document constitutes an offence under Section 49 of the Civil Aviation Act 1990 and is subject, in the case of an individual, to imprisonment for a term not exceeding 12 months or to a fine not exceeding \$10,000.</i></p>	<p>I declare that to the best of my knowledge and belief the statements made and the information supplied in this application and the attachments are complete and correct.</p> <p><b>Consent to Disclosure &amp; Collection</b></p> <p>I authorise the collection by the Director of Civil Aviation or his delegate (hereinafter referred to as "the Director") from, and the disclosure to the Director by, any person, organisation or government department of any details of my knowledge &amp; compliance with transport safety regulatory requirements.</p> <p>I authorise the Director to use, and disclose, the information obtained about me for any purpose under the Civil Aviation Act 1990, or other such purpose permitted by law.</p>
<p><b>Applicant's Signature</b></p>	<p><b>Date</b></p>

**OFFICE USE ONLY**

1. Received by: ..... 2. Date Received: ..... 3. Job No: .....  
 4. Assessed by: ..... 5. Criteria met: ..... 6. Date assessed: .....

**Submit the completed application and supporting documentation to either:**

**Email:** [certification@caa.govt.nz](mailto:certification@caa.govt.nz)

**Post:** Certification Unit, Civil Aviation Authority, PO Box 3555, Wellington 6140