



REPUBLIC OF LATVIA
CIVIL AVIATION AGENCY

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APPLICATION AND REPORT FORM (according to AMC1 to Appendix 7)			
BPL PROFICIENCY CHECK FOR EXTENTION OF BPL PRIVILEGES TO EXERCISE COMMERCIAL PRIVILEGES ON A GAS BALLOON			
Applicant's last name(s):		BPL: <input type="checkbox"/>	
Applicants first name(s):			
Signature of applicant:			
Type of licence*:			
Licence number*:			
State:			
1 Details of the flight			
Group, class, type of aircraft:		Registration:	
Aerodrome or site:	Take-off time:	Landing time:	Flight time:
Total flight time:			
2 Result of the test			
Proficiency Check details:			
Pass <input type="checkbox"/>	Fail <input type="checkbox"/>	Partial pass <input type="checkbox"/>	
3 Remarks			
Location and date:			
Examiner's certificate number*:		Type and number of licence:	
Signature of examiner:		Name(s) in capital letters:	

* if applicable

Contents of the proficiency check for extension of BPL privileges exercise commercial privileges on a gas balloon (according to AMC1 FCL.205.B(b) (f))

Circle with **O** if passed,

Cross with **X** if failed

Applicant's name(s): _____

SECTION 1 PRE-FLIGHT OPERATIONS, INFLATION AND TAKE-OFF

Use of checklist, airmanship, control of balloon by external visual reference, look-out procedures, etc. apply in all sections.

a	Pre-flight documentation, flight planning, NOTAM and weather briefing
b	Balloon inspection and servicing
c	Load calculation
d	Crowd control and crew briefing
e	Passenger briefing
f	Assembly and layout
g	Inflation and pre-take-off procedures
h	Take-off
i	ATC liaison: compliance

SECTION 2 GENERAL AIRWORK

a	Climb to level flight
b	Level flight
c	Descent to level flight
d	Operating at low level
e	ATC liaison: compliance

SECTION 3 EN-ROUTE PROCEDURES

a	Dead reckoning and map reading
b	Marking positions and time
c	Orientation, airspace structure
d	Maintenance of altitude
e	Ballast management
f	Communication with retrieve crew
g	ATC compliance or R/T communication

SECTION 4 APPROACH AND LANDING PROCEDURES

a	Approach from low level and missed approach and fly on
b	Approach from high level and missed approach and fly on
c	Passenger pre-landing briefing
d	Pre-landing checks
e	Selection of landing field
f	Landing, dragging and deflation
g	ATC compliance or R/T communication
h	Actions after flight

SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES

This section may be combined with sections 1 through 4

a	Simulated closed appendix during take-off and climb
b	Simulated parachute or valve failure
c	Simulated passenger health problems
d	Other abnormal and emergency procedures as outlined in the appropriate flight manual
e	Oral questions

COMPLETED BY EXAMINER		
FCL.1030(a)(1) I have ensured that communication with the applicant can be established without language barriers.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030(a)(2) I have verified that the applicant complies with all the qualification, training and experience requirements in Part-FCL for the issue, revalidation or renewal of the licence, rating or certificate for which the skill test, proficiency check or assessment of competence is taken.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030(a)(3) I have made the applicant aware of the consequences of providing incomplete, inaccurate or false information related to their training and flight experience.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030(b)(1) I have informed the applicant of the result of the test.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030(b)(1) , In the event of a partial pass or fail: I have informed the applicant that he/she may not exercise the privileges of the rating until a full pass has been obtained and detailed any further training requirement and explain the applicant's right of appeal.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
According to FCL.1030(b)(3) I have provided the applicant with a signed report of the skill test or proficiency check.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030(b)(3)(ii) I confirm that all the required manoeuvres and exercises have been completed, as well as information on the verbal theoretical knowledge examination, when applicable. If an item has been failed, I have record the reasons for this assessment.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
FCL.1030 (3)(iv)(v) In the case if the competent authority responsible for the applicant's licence is not the same that issued the examiner's certificate		
I hereby declare that I, _____, have reviewed and applied the relevant national procedures and requirements of the applicant's competent authority contained in version _____ of the Examiner Differences Document .	YES <input type="checkbox"/>	NO <input type="checkbox"/>
I have attached to this report a copy of the examiner certificate containing the scope of my privileges as examiner.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Any comment on, or disagreement with, an examiner's test or check evaluation or assessment made during a debriefing:		

<i>Examiner's Name, Surname / Date / Signature</i>		

COMPLETED BY APPLICANT
I confirm that I understand and agree with all the above mentioned information and have no objections. In the event of a partial pass or fail: I agree <input type="checkbox"/> / disagree <input type="checkbox"/> for re-examination with the same examiner

<i>Applicant's Name, Surname / Date / Signature</i>

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