



REPUBLIC OF LATVIA  
CIVIL AVIATION AGENCY

Airport "Riga", Biroju iela 10, Mārupes novads, LV-1053, Latvia,  
Phone (+371) 67 830936, e-mail: [caa@caa.gov.lv](mailto:caa@caa.gov.lv)

APPLICATION AND REPORT FORM <i>(according to AMC1 to Appendix 7)</i>			
BPL PROFICIENCY CHECK FOR EXTENTION OF BPL PRIVILEGES TO EXERCISE COMMERCIAL PRIVILEGES ON A HOT-AIR BALLOON			
Applicant's last name(s):			BPL: <input type="checkbox"/>
Applicants first name(s):			
Signature of applicant:			
Type of licence*:			
Licence number*:			
State:			
<b>1</b>	<b>Details of the flight</b>		
Group, class, type of aircraft:		Registration:	
Aerodrome or site:	Take-off time:	Landing time:	Flight time:
Total flight time:			
<b>2</b>	<b>Result of the test</b>		
Proficiency check details:			
Pass <input type="checkbox"/>	Fail <input type="checkbox"/>	Partial pass <input type="checkbox"/>	
<b>3</b>	<b>Remarks</b>		
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 hot-air balloon** (according to AMC1 FCL.205.B(b) (e))

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, lookout 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 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 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	Fuel 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 fire on the ground and in the air
b	Simulated pilot light and burner failures
c	Simulated passenger health problems
d	Other abnormal and emergency procedures as outlined in the appropriate flight manual
e	Oral questions

<b>COMPLETED BY EXAMINER</b>		
<b>FCL.1030(a)(1)</b> I have ensured that communication with the applicant can be established without language barriers.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>FCL.1030(a)(2)</b> 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"/>
<b>FCL.1030(a)(3)</b> 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"/>
<b>FCL.1030(b)(1)</b> I have informed the applicant of the result of the test.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>FCL.1030(b)(1)</b> , 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 <b>FCL.1030(b)(3)</b> I have provided the applicant with a signed report of the skill test or proficiency check.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
<b>FCL.1030(b)(3)(ii)</b> 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"/>
<b>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</b>		
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 <a href="#">Examiner Differences Document</a> .	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"/>
<b>Any comment on, or disagreement with, an examiner's test or check evaluation or assessment made during a debriefing:</b>		
_____		
<i>Examiner's Name, Surname / Date / Signature</i>		

<b>COMPLETED BY APPLICANT</b>
I understand and agree with all above mentioned information and have no objections. <b>In the event of a partial pass or fail:</b> I <input type="checkbox"/> agree/ <input type="checkbox"/> disagree for re-examination with the same examiner.
_____
<i>Applicant's Name, Surname / Date / Signature</i>

INTENTIONALLY LEFT BLANK