



**PIHAK BERKUASA PENERBANGAN AWAM MALAYSIA
CIVIL AVIATION AUTHORITY OF MALAYSIA**

**APPLICATION FOR INITIAL ISSUE OF A COMMERCIAL PILOT
LICENCE (CPL)**

TYPE OF AIRCRAFT AEROPLANE HELICOPTER

IMPORTANT NOTICES

1. This form, when completed, should be forwarded to the ONE STOP CENTER, CAAM.
2. The payment and document certifying details can be found in CAGM 1001 – FCL.
3. Evidence of qualifications must meet the requirements for the issue of the licence.
4. You will be notified when your licence is ready for collection.
5. All dates to be written in dd/mm/yy

FOR OFFICIAL USE

FEE PAYABLE:

RECEIPT NO:

DATE:

SIGNATURE:

SECTION 1: PERSONAL PARTICULAR OF APPLICANT

NAME:

ADDRESS:

CONTACT NO:

EMAIL:

NATIONALITY:

NRIC OR PASSPORT NO:

DATE OF BIRTH:

PLACE OF BIRTH:

SECTION 2: MEDICAL EXAMINATION

NAME OF EXAMINER

DATE OF MEDICAL EXAMINATION:

PLACE OF MEDICAL EXAMINATION:

SECTION 3: PARTICULARS OF LICENCE HELD

COUNTRY OF ISSUE:

TYPE OF LICENCE:

LICENCE NO:

EXPIRY DATE:

DATE OF LAST IRT:

SECTION 4: AIRCRAFT RATINGS ENDORSED IN THE LICENCE (if applicable)

TYPE OF AIRCRAFT	DATE OF LAST FLIGHT	P1/P2	DATE OF LAST LPC OR SKILL TEST

SECTION 5: DECLARATION OF R/T SECRECY

I, do solemnly and sincerely declare that I will not improperly divulge to any person the purpose of any messages which may come to my knowledge in connection with the operation of any radio apparatus on board the aircraft.

Signature of Declarant: Date:

SECTION 6: APPLICATION AND DECLARATION

I hereby apply for the grant of a Commercial Pilot Licence and R/T Licence as indicated above and CERTIFY that all particulars given in this form and all the attachments for CPL are correct to the best of my knowledge and belief, and since the date on which I was medically examined, I have not suffered from any defect, disability or disease.

Signature of Applicant: Date:

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Logbook and Licence checked on:

Flying experience is satisfactory for the issue of CPL

Passed CPL/ATPL subjects on:

CPL issued on the strength of:

Signature:

Date:

FLYING EXPERIENCE (complete the table for the applicable aircraft category)**AEROPLANE**

1) The flying experience requirements for the CPL are set out in CAD 1 – PEL.

2) All claims on P1 U/S must be signed by the PIC on each flight entry in the logbook.

ITEM	HOURS CLAIMED	QUALIFYING MINIMA	
		CPL/IR INTEGRATED	WITHOUT IR
TOTAL EXPERIENCE (SINGLE + TWIN)			
1. AS PIC + SPIC + P1U/S		70	100 (70)*
2. AS DUAL + P2		95	-
3. TOTAL 1 + 2		200	200
TWIN ENGINE EXPERIENCE			
1. AS PILOT ON TWIN ENGINE AIRCRAFT		35	35
CROSS COUNTRY			
1. AS PIC + SPIC + P1U/S		50	20
2. AS DUAL + P2		-	-
3. TOTAL 1 + 2		-	-
4. DATE OF NAVIGATION FLIGHT OF > 300 NM		AERODROME LANDED 1. 2.	
NIGHT FLYING			
1. AS PIC + SPIC + P1U/S		-	-
2. AS DUAL + P2		3	-
3. TOTAL 1 + 2		5	5**
4. DATE OF QUALIFYING CROSS COUNTRY NIGHT FLIGHT		-	-
INSTRUMENT FLYING			
1. AS SPIC + P1U/S		20	-
2. AS DUAL + P2		-	10
3. IN APPROVED FSTD		MAX 40	MAX 5
4. TOTAL 1 + 2 + 3		115	10
UPRT			
1. TOTAL		1	1
* Applicant requires only 70 hours as PIC + SPIC + P1U/S in the case of an approved training in an ATO			
** Only applicable if exercising privileges at night			
I certify that all the particulars entered in this form are true to the best of my knowledge and belief.		CERTIFIED BY (ATO OR CAAM) :	
SIGNATURE: DATE: SIGNATURE AND STAMP	

HELICOPTER

1) The flying experience requirements for the CPL are set out in CAD 1 – PEL.

2) All claims on P1 U/S must be signed by the PIC on each flight entry in the logbook.

ITEM	HOURS CLAIMED	QUALIFYING MINIMA			
		CPL/IR (FROZEN ATPL)	CPL (FROZEN ATPL)	CPL/IR	CPL
TOTAL EXPERIENCE					
1. AS PIC + SPIC + P1U/S		55 (MAX 40 SPIC)	55 (MAX 40 SPIC)	55 (MAX 40 SPIC)	55 (MAX 40 SPIC)
2. AS DUAL + P2		140	95	125	85
3. TOTAL 1 + 2		195	150	180	135
MULTI-ENGINE EXPERIENCE					
1. AS PILOT ON MULTI-ENGINE AIRCRAFT		10	-	10	-
CROSS COUNTRY					
1. AS PIC + SPIC + P1U/S		10	10	10	-
2. AS DUAL + P2		-	-	10	-
3. TOTAL 1 + 2		50	50	-	-
4. DATE OF NAVIGATION FLIGHT OF > 100 NM		Aerodrome Landed: 1. 2.			
NIGHT FLYING					
1. AS PIC + SPIC + P1U/S		1	1	1	1
2. AS DUAL + P2		3	3	3	3
3. TOTAL 1 + 2		5	5	5	5
4. DATE OF QUALIFYING CROSS COUNTRY NIGHT FLIGHT					
INSTRUMENT FLYING					
1. AS PIC + SPIC + P1U/S		-	-	-	-
2. AS DUAL + P2		-	10	50 (10 IN MULTI-ENGINE)	10
3. IN APPROVED FSTD		MAX 20	-	MAX 20	-
MULTI-CREW CO-OPERATION					
1.TOTAL		15	10	-	-
I certify that all the particulars entered in this form are true to the best of my knowledge and belief. SIGNATURE: DATE:			CERTIFIED BY (ATO OR CAAM): SIGNATURE AND STAMP		

CHECKLIST FOR A COMMERCIAL PILOT LICENCE (CPL)

PLEASE ✓

1. Cover Letter/Release Letter from the ATO.	
2. CAAM letter of approval.	
3. CAAM letter of exemption for military pilot. (<i>if applicable</i>)	
4. CERTIFIED photocopy of theoretical knowledge examination certificate.	
5. Duly completed applicable CPL Skill Test Form(s).	
6. Application for the issue of a flight radiotelephony operator's licence (CAAM/BOP/FCL/20)	
7. Duly completed Application for English Language Proficiency Test form. (CAAM/BOP/FCL/30)	
8. CERTIFIED photocopy of ELP certificate	
9. A valid medical certificate (Class 1)	
10. Original flying logbook, flying hours CERTIFIED by ATO (HOT/CFI).	
11. CERTIFIED photocopy of the last 5 pages of the current flying logbook.	
12. CERTIFIED photocopy of Student Pilot Licence (SPL) and/or Private Pilot Licence (PPL)	
13. CERTIFIED photocopy of MyKad or passport and Work Permit / Professional Visit Pass.	
14. Two (2) recent colour photo (25mm x 32mm). (name printed at the back)	
15. Other supporting documents (please specify) i. ii.	

***NOTE:**

Processing time will depend on the availability of inspectors and number of applications.

Do not ✓ which is not applicable for your application.

INCOMPLETE SUBMISSION WILL BE REJECTED