

SEA RATING

APPLICATION AND REPORT FORM FOR THE SEA RATING SKILL TEST AND PROFICIENCY CHECK ON AEROPLANE ACCORDING TO PART FCL APPENDIX 9 (7) TO COMMISSION REGULATION (EU) NO 1178/2011 OF 3 NOVEMBER 2011

A.

| | |
|---|------------------------------------|
| <input type="checkbox"/> Skill test | <input type="checkbox"/> PC |
| <input type="checkbox"/> SE | <input type="checkbox"/> ME |
| <input type="checkbox"/> Standard floats <input type="checkbox"/> Amphibian floats | <input type="checkbox"/> Amphibian |

**B.
To be
completed
by the
examiner**

| | |
|-------------------|--|
| Date of test | |
| Type of aeroplane | |

**C.
To be
completed
by the
applicant**

| | | | | | |
|----------------------------|------------|------------------------|------------------------|------------------------|--|
| Date of birth (yyyy-mm-dd) | | State of licence issue | | Licence no | |
| Last name | | | First and middle names | | |
| Street or box | | Country | | Telephone | |
| Postal code and city | | E-mail address | | | |
| Place | | Date | | Signature of applicant | |
| Flight time Total | Instrument | Cross-country | | Night flight | |

**D.
To be
completed
by the ATO**

TRAINING COMPLETED AND APPLICATION APPROVED

| | | | | |
|---|-------------|----------------------------|------------------|-----------------------|
| Name of ATO | | Signature Head of Training | | |
| Date | | Name in block letters | | |
| Practical training during course | | | | |
| Total Flight time | Dual flight | Solo flight | Complex aircraft | Total time in FTD/FFS |

**E.
To be
completed
by the
examiner**

RESULT OF THE TEST

| | | | |
|--|-------------------------------|---|-------------------------------|
| Final result: | <input type="checkbox"/> Pass | <input type="checkbox"/> Partial pass | <input type="checkbox"/> Fail |
| <input type="checkbox"/> Temporary rating issued | | <input type="checkbox"/> Temporary licence not issued | |
| Place and date:..... | | Stamp | |
| Signature of examiner: | | | |
| Examiners certificate number :..... | | | |

L1609-5

Before Test/Check

F.

| | |
|--|--|
| <input type="checkbox"/> Valid Licence <input type="checkbox"/> Valid medical certificate class 1/2 Valid Radio telephonist certificate <input type="checkbox"/> Swedish <input type="checkbox"/> English <input type="checkbox"/> Valid Language Proficiency <input type="checkbox"/> Theoretical type course performed (Skill test only) <input type="checkbox"/> Personal identification card | <p style="text-align: center;">All prerequisites checked and confirmed</p> <p style="text-align: center;">..... (examiner)</p> |
|--|--|

G.

| SECTION 1 DEPARTURE | | Instructors initials when training completed | Pass | Fail |
|---|--|---|--------------------------|--------------------------|
| Use of checklist, airmanship (control of aeroplane by external visual reference, anti/de-icing procedures, etc.) apply in all sections. | | | | |
| 1.1 | Pre-flight including: Documentation Mass and Balance Weather briefing NOTAM | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.2 | Pre-start checks External/internal | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.3 | Engine start-up and shutdown Normal malfunctions | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.4 | Taxiing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.5 | Step taxiing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.6 | Mooring: Beach Jetty pier Buoy | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.7 | Engine-off sailing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.8 | Pre-departure checks: Engine run-up (if applicable) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.9 | Take-off procedure: Normal with Flight Manual flap settings Crosswind (if conditions available) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.10 | Climbing Turns onto headings Level off | | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.11 | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| | |
|------------------------|-----------------|
| Name of applicant..... | Licence no..... |
|------------------------|-----------------|

| SECTION 2 AIRWORK (VFR) | | Instructors initials when training completed | Pass | Fail |
|--------------------------------|--|---|--------------------------|--------------------------|
| 2.a | Steep turns (360° left and right at 45° bank) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.b | Stalls and recovery: (i) clean stall; (ii) approach to stall in descending turn with bank with approach configuration and power; (iii) approach to stall in landing configuration and power; (iv) approach to stall, climbing turn with take-off flap and climb power (single-engine aeroplane only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.c | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| SECTION 3 EN-ROUTE PROCEDURES (VFR) | | Instructors initials when training completed | Pass | Fail |
|--|--|---|--------------------------|--------------------------|
| 3.1 | Flight plan, dead reckoning and map reading | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.2 | Maintenance of altitude, heading and speed | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.3 | Orientation, timing and revision of ETA | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.4 | Use of radio navigation aids (if applicable) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.5 | Flight management (flight log, routine checks including fuel, systems and icing) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.6 | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| SECTION 4 ARRIVALS AND LANDINGS | | Instructors initials when training completed | Pass | Fail |
|--|---|---|--------------------------|--------------------------|
| 4.1 | Aerodrome arrival procedure (amphibians only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.2 | Normal landing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.3 | Flapless landing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.4 | Crosswind landing (if suitable conditions) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.5 | Approach and landing with idle power from up to 2 000' above the water (single-engine aeroplane only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.6 | Go-around from minimum height | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.7 | Glassy water landing Rough water landing | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

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| Name of applicant..... | Licence no..... |
|------------------------|-----------------|

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|-----|---|---|--------------------------|--------------------------|
| 4.8 | Approach and landing with idle power (single-engine only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.9 | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| SECTION 5 ABNORMAL AND EMERGENCY PROCEDURES | | Instructors initials when training completed | Pass | Fail |
|---|---|---|--------------------------|--------------------------|
| This section may be combined with Sections 1 through 4. | | | | |
| 5.1 | Rejected take-off at a reasonable speed | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.2 | Simulated engine failure after take-off (single-engine aeroplane only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.3 | Simulated forced landing without power (single-engine aeroplane only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.4 | Simulated emergencies: (i) fire or smoke in flight; (ii) systems' malfunctions as appropriate | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.5 | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| SECTION 6 SIMULATED ASYMMETRIC FLIGHT | | Instructors initials when training completed | Pass | Fail |
|---|--|---|--------------------------|--------------------------|
| This section may be combined with Sections 1 through 5. | | | | |
| 6.1 | Simulated engine failure during take- off (at a safe altitude unless carried out in FFS and FNPT II) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.2 | Engine shutdown and restart (ME skill test only) | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.3 | Asymmetric approach and go-around | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.4 | Asymmetric approach and full stop landing | | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.5 | ATC liaison — Compliance, R/T procedure | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | Examiners initials when test section completed | | |

| | |
|------------------------|-----------------|
| Name of applicant..... | Licence no..... |
|------------------------|-----------------|

Instructions for completing form

L 1609 SEA RATING

- A. Please tick the appropriate box.
- B. Please enter the complete information. The relevant type of aeroplane shall be according to the EASA Class and Type Rating List/Licence Endorsement list (Aeroplanes).
- C. Personal information of the applicant
- D. This section is to be completed by the Head of Training of the ATO
- E. The result of the test.
- F. This section is a checklist for prerequisites for the examiner to check before the test/check.
Please note that the examiner must sign and thus affirm that he has checked all prerequisites before the test
- G. Protocol
- H. Details of the flight
- I. Comments regarding tested items, please indicate the item commented.
- J. Additional information regarding the conditions during test, simulators etc.

| | |
|------------------------|-----------------|
| Name of applicant..... | Licence no..... |
|------------------------|-----------------|