Niedersächsische Landesbehörde für Straßenbau und Verkehr

– Luftfahrtbehörde –

Verification of Authenticity of Foreign Licence and Rating

The purpose of this data is to be used to identify and evaluate the qualifications and eligibility for the issue of an airman licence and/or rating.

Last and First name of holder (as it appears on your foreign pilot licence):	
Address: Postcode and city name, country:	
Date (**Month/Day/Year**) of birth:	Place of Birth:
Nationality:	Type and No. of Licence:
Issuing state/authority:	Date of issue:
Ratings:	
Language proficiency: Level: valid until:	Medical certificate class (EASA): Date of issue: valid until:
Email (for enquires, voluntary Information):	

The licence is under revocation or suspension by the country that issued the licence:

Yes No

I certify that all statements provided by me on this application form are complete and true.
I authorize the issuing CAA to provide all pertinent information to the Business area of Oldenburg

_____

Date Airmans signature

to be filled in by business area Oldenburg:

We require verification of the validity of the pilot and medical certificate or medical endorsement for the following airmen. This request is based on the airmens desire to apply for a German certificate issued on the basis of a certificate issued by your country.

_____

Date Name stamp

to be filled in by foreign CAA:

I, _____, an official of the CAA of _____,
certify that the details given above and on any additional pages included are true and correct.

_____

Date Name (stamp)

Please forward your response to the fax number: +49 0441-2181-222 (Luftfahrtbehörde Oldenburg)
For any comments please use second page and tick here.