

CERTIFICATE OF PRACTICAL MAINTENANCE EXPERIENCE

if an applicant has been working in other organizations, he should add confirmation of maintenance experience on separate attachments

I hereby certify that Mr./Ms. has been working within the scope of functions covered by category L..... of AML Part 66 License as an aircraft engineer on operating aircraft carrying out routine line/base* maintenance tasks, including inspections and defects rectification duties in accordance with the aircraft approved data and maintenance organization procedures.**

* - delete as applicable

** - insert subcategory

Combined maintenance practice (no division into particular types of aircraft)

Aircraft (powerplant/ equipment)	Airframe	Powerplant	Electrical systems	Avionics simple tests	Radio, ELT, Transponder	Time period from-to dd/mm/yyyy + dd/mm/yyyy	Number of weeks (each week has to contain at least 20 hours of performance of maintenance activity)

Insert „YES”, if applicable

Insert „NO” if not

Most recent practice prior to application (12 months) - 66.A.30 (d)

(by aircraft type)

Item	Aircraft (powerplant/ equipment)	Airframe	Powerplant	Electrical systems	Avionics simple tests	Radio, ELT, Transponder	Time period from-to dd/mm/yyyy + dd/mm/yyyy	Number of weeks (each week has to contain at least 20 hours of performance of maintenance activity)

Insert „YES”, if applicable

Insert „NO” if not

Remarks:

1. Taking into account the period of 52 weeks a year and at least 20 hours practice per week, the last practice in performing maintenance activities should be at least 1100 hours.
2. At least 50% (550 hours) of the required 12 months recent experience must be gained in the last 12 months prior to application. The remainder of the latest experience had to be gained in the 7 years preceding the license application.

All the service activities are noted in:

- documents held in the organization:.....
- organization's electronic systems:
- mechanic's logbook:
- aircraft maintenance documents (when certified by independent certifying staff or pilot-owner):
.....

Organization certifying person / Independent Certifying Staff / Pilot-Owner*

Name of Maintenance Organization / AMO approval reference:.....

Position: Production Manager / Quality Manager:.....
(Match appropriate position)

Independent certifying Staff / No of licence:

Pilot-owner / No of licence:

First name and last name:.....

Signature (stamp):.....

Place, date:.....