

CERTIFICATE OF PRACTICAL MAINTENANCE EXPERIENCE

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

* - delete as applicable

I hereby certify that Mr./Ms. applying for category C in the AML Part-66 licence, performed the activities indicated in the table below:

Item	Aircraft type / powerplant	„Academic” path to the category C				Category C path for certifying staff of category B1 or B2			
		Experience as maintenance Staff in accordance with AMC 66.A.30(a) (1)		Observation of base maintenance tasks in accordance with AMC 66.A.30(a) (1)		Experience as a cat. B1 or B2 certifying staff in accordance with M.A.801(b) (1) i (b) (2), M.A.801(c), 145.A.30(g) i (h) (2)		Experience as a category B1 or B2 support staff in accordance with 145.A.35(a)	
		Type of activity	yes/no						
		Maintenance planning							
		Quality assurance							
		Record-keeping							
		Approved spare parts control and engineering development							
		<i>From-to</i> <i>dd/mm/yyyy</i> ÷ <i>dd/mm/yyyy</i>	<i>Number of months</i>	<i>From-to</i> <i>dd/mm/yyyy</i> ÷ <i>dd/mm/yyyy</i>	<i>Number of months</i>	<i>From-to</i> <i>dd/mm/yyyy</i> ÷ <i>dd/mm/yyyy</i>	<i>Number of months</i>	<i>From-to</i> <i>dd/mm/yyyy</i> ÷ <i>dd/mm/yyyy</i>	<i>Number of months</i>

Insert „YES”, if applicable
Insert „NO” if not

Remarks:

- 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.
- 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:.....