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Applying for:	Eind Lana	1 77 4 7					
	First Issue Renew	al VAL -					
Mechanic Data:							
Last Name: Nationality:							
	Given Names: Place of Birth:						
A/C Type for which valid	lation is requested:						
License Data:	Type: Aeroplane	Helicopter					
License Number:							
Issuing Date: Issuing State:							
Expiry Date:	Expiry Date:						
Restrictions/Limitations:							
Experience(s) on specific	aircraft type:						
TIME FRAME	TYPE OF	AIRCRAFT	IN TH	E FUNCTION AS			
Certification:							
This Application will not	he processed unless con	unletely filled out	t and accompar	nied by:			
 Operator Letter Copy of Foreign Copy of Certifica 	for first issue validation License Ites of Training on the lum (Resume) showing Passport	n request only aircraft type for training and ex	which validat	·			
	<u>DEC</u>	<u>LARATION</u>					
I hereby declare that the a	above supplied informati	on is truthful and	l correct.				
Name:	Date:	Location:		Signature:			