



Section/division:
Telephone number:
Physical address:
Postal address:

Personnel Licensing, Aviation Safety Operations
011-545-1000
Ikhaya Lokundiza, 16 Treur Close, Waterfall Park, Bekker Street, Midrand, Gauteng
Private Bag X73, Halfway House 1685

Form Number: CA 61-09.7

Fax Number: 011-545-1459

Website: www.caa.co.za

DETAILS OF BANK ACCOUNT FOR PAYMENT OF PRESCRIBED FEE

Bank: Standard Bank of SA Ltd Branch: Brooklyn, Pretoria Branch Code: 011245 Account Number: 013007971

COMPULSORY CLIENT PAYMENT CODE (to be completed on deposit slip)

Service/transaction Over the counter payments EFT, Internet, Wire, Electronic payments

Notification of differences training

NOTIFICATION OF AIRCRAFT DIFFERENCES OR FAMILIARISATION TRAINING

DETAILS OF PILOT

Surname and Initials		Licence number	
Telephone number		Cell phone number	
SIGNATURE OF PILOT		NAME IN BLOCK LETTERS	
		DATE	

TRAINING DETAILS

Place		Date of training completion	
Name of ATO (only for differences training)		ATO number	
Differences training		Familiarisation training	
		Flight time	FSTD time
Trained as	Pilot	Restrictions (If any)	Co-pilot
	Pilot Instructor		Third pilot
			Other

AIRCRAFT DETAILS

Designator		Registration		MCM		Kg
Systems	Variable pitch propeller	Retractable undercarriage	Turbo/super charged engine	Pressurised cabin	Tail wheel aircraft	

DETAILS OF GRADE II OR GRADE I FLIGHT INSTRUCTOR

Surname and Initials		Licence number	
I confirm that the differences or familiarisation training was conducted in compliance with the SACATS and that the pilot is competent to safely fly the aircraft stipulated above.			
SIGNATURE OF INSTRUCTOR		NAME IN BLOCK LETTERS	
		DATE	

DETAILS OF GRADE III FLIGHT INSTRUCTOR WHO CONDUCTED THE TRAINING (if applicable)

Surname and Initials		Licence number	
I confirm that the differences or familiarisation training was conducted in compliance with the SA-CATS			
SIGNATURE OF INSTRUCTOR		NAME IN BLOCK LETTERS	
		DATE	