



**4. PAYMENT METHODS**

Please complete form SSR\1187.

**5. DECLARATION**

**To be completed by the Applicant**

**DETAILS TO BE PUBLISHED**

I understand that the UK CAA will publish details in accordance with Part ARA.FCL.205. Please note your personal address details will not be published. I hereby confirm my compliance with Part-FCL reference FCL.1010 & FCL.1030 and declare that the information provided on this form is correct.

Signature ..... Date .....

It is an offence to make, with intent to deceive, any false representations for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. Persons doing so render themselves liable and subject to prosecution under the current applicable regulation. Refer to the Civil Aviation (Safety) Regulations, 2017

**6. SUBMISSION INSTRUCTIONS**

Send your completed application form to:

Seychelles Civil Aviation Authority  
Personnel Licensing Office  
Safety & Security Regulation Department  
P.O Box 181  
Mahe  
Seychelles.

OR

Email this application form to [PEL@scaa.sc](mailto:PEL@scaa.sc)

OR

Attach this application form to the correct application type on the **Centrik Applications Module**. Please contact the **SCAA** or your **Seychelles Operating Company** for guidance on submitting your application through Centrik.

Please note failure to submit all of the required documentation will lead to a delay in processing your application.