



US Department
of Transportation

Federal Aviation
Administration

ROTORCRAFT EXTERNAL-LOAD OPERATOR CERTIFICATE APPLICATION

Paperwork Reduction Act Statement: The information collected on this form is solicited in order to comply with Title 14, Code of Federal Regulations, Part 133. This information is used to establish eligibility for the issuance of the Rotorcraft External-Load Operator Certificate. Confidentiality is neither requested nor provided. We estimate that it will take approximately 0.3 hours to complete the form. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this connection is 2120-0044. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20

TEAR OFF
BEFORE USE

SUPPLEMENTAL
INFORMATION

FAA Form 8710-4 (6-84) THIS PART SUPERSEDES FAA FORM 8000-32

Electronic Version (Adobe)

DETACH THIS PART BEFORE USING FORM BELOW



Rotorcraft External-Load Operator Certificate Application

INSTRUCTIONS: Submit this form in triplicate to local FAA District Office

1. APPLICATION FOR (CHECK APPLICABLE BOX) <input type="checkbox"/> ORIGINAL ISSUANCE <input type="checkbox"/> AMENDMENT <input type="checkbox"/> RENEWAL	CERTIFICATE NO. (For amendment or renewal only.)	EXTERNAL - LOAD CLASS AUTHORIZATION (S) <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
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2. NAME AND ADDRESS OF APPLICANT (Include Zip Code)	3. PRINCIPAL OR LOCAL BASE OF OPERATIONS (Airport, City, State, and Zip Code)
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TELEPHONE NUMBER	TELEPHONE NUMBER
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4. NAME OF CHIEF PILOT OR PILOT IN CHARGE OF LOCAL OPERATION	AIRMAN CERTIFICATE	GRADE	NUMBER
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5. ROTORCRAFT TO BE USED								
REGISTRATION NUMBER	TYPE		LOAD CLASS (X)			ATTACH PREV	DEVICE APPD.	REMARKS
	MAKE	MODEL	A	B	C	YES	NO	

CERTIFICATION

I certify that the statements made on this application form and any attachments are true and correct, and that the operations indicated on this application will be conducted within the requirements of the Federal Aviation Act of 1958 and the applicable Federal Aviation Regulations.

DATE	TITLE OF AUTHORIZED OFFICER	SIGNATURE OF APPLICANT OR AUTHORIZED OFFICER
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INSPECTION REPORT

(To be completed by FAA District Office Representative)

ROTORCRAFT		REGISTRATION NUMBER	APPROVAL DATE	CLASS	WEIGHT AUTHORIZED	LIMITATIONS AND REMARKS	INSPECTOR'S SIGNATURE
MAKE	MODEL						

REMARKS

CHIEF PILOT KNOWLEDGE AND SKILL REQUIREMENTS MET BY:

NAME OF CHIEF PILOT	<input type="checkbox"/> CLASS A	DATE	SIGNATURE OF INSPECTOR
	<input type="checkbox"/> CLASS B		
	<input type="checkbox"/> CLASS C		

Applicant is Fully Qualified to Conduct External - Load Operations in Class (es) <input type="checkbox"/> CLASS A <input type="checkbox"/> CLASS B <input type="checkbox"/> CLASS C	CERTIFICATE NUMBER	ISSUED ON
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APPLICATION DISAPPROVED REASONS:

FAA DISTRICT OFFICE	SIGNATURE OF SUPERVISING INSPECTOR
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