



Fédération Aéronautique Internationale

RECORD CLAIM STATEMENT

Pilot Information

Surname: _____ First name: _____
FAI Sporting License: _____ Validity: _____ (DD-Month-YYYY)
Issued by: _____
Name of Crew/Copilot: _____

Rotorcraft Information

Registration: _____
Manufacturer: _____ Model: _____
Weight (ref. 4.4.): _____
 Actual takeoff weight Certified maximum takeoff weight

Powerplant Information

Manufacturer: _____ Model: _____
Power: _____ Number of Engines: _____
Type: Piston (Group I) Turbine (Group II) Mixed Propulsion (Group III)

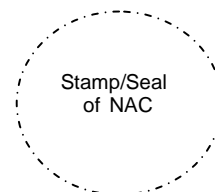
Record Information

Class: E-1 Helicopters E-2 Tilt Rotor E-3 Autogyros
Category: General Feminine
Weight Classification (Sub-Class): _____
Date of Record (UTC date, DD-Month-YYYY): _____
Type of Record: _____ (as per SC9 - 3.1)
Record Course: _____
Performance: _____ (altitude in meters, distance in km, speed in km/h)

NAC Certification

This is to certify that this national record was established in accordance with the rules and regulations of the FAI Sporting Code, General Section and the FAI Sporting Code Section 9, and was properly controlled and measured by qualified officials.

NAC Claiming Record: _____
Name of NAC Official: _____
Title: _____
Signature: _____
Date of Signature: _____





Fédération Aéronautique Internationale

CERTIFICATION OF TAKEOFF - Form 1 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Airport or Start Point Information

Airport Name: _____

City: _____

Identifier: _____

Latitude: _____

Longitude: _____

Official Certification

I hereby certify that takeoff of the rotorcraft was accomplished as follows:

Date (UTC date): _____
(DD-Month-YYYY)

Time of last contact with surface (UTC): _____
(HH:MM:SS)

Time source: _____

Observation taken from: _____

Signature of O.O. or Air Traffic Controller: _____

Date of Signature: _____

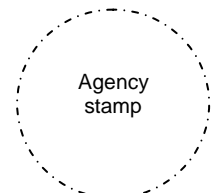
Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____



Please return this form directly to:



Fédération Aéronautique Internationale

CERTIFICATION OF START - Form 2 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Start Point Information

Name of Start Point (if applicable): _____

Identifier (if applicable): _____

Latitude: _____

Longitude: _____

Official Certification

I hereby certify that the rotorcraft reached the start point as follows:

Date (UTC date): _____
(DD-Month-YYYY)

Time at start point (UTC): _____
(HH:MM:SS)

Altitude: _____

Time source: _____

Observation taken from: _____

Signature of OO or Air Traffic Controller: _____

Date of Signature: _____

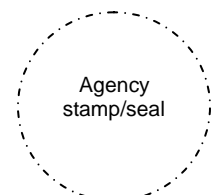
Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____



Please return this form directly to:



Fédération Aéronautique Internationale

DESCRIPTION OF COURSE FLOWN - Form 3 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Course Information

- Type of Course: Distance over a closed circuit
 Distance
 Speed over a straight course,
 Speed over closed circuit
 Speed around the World Eastbound Westbound
 Speed over both Earth's Poles
 Speed over recognized courses

Course length: _____ km, with payload

- Length Determined by: Measurement of Course (attach survey report)
 Great Circle Distance: WGS 84 (attach calculation)

Official Certification

I hereby certify that the course flown complied with the appropriate record requirements:

Date of record (UTC date): _____
(DD-Month-YYYY)

Signature of OO: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Agency
stamp/seal

Please return this form directly to:



Fédération Aéronautique Internationale

CERTIFICATION OF TURN / CONTROL POINTS - Form 4 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Turn/Control Point Information and Official Certification

I hereby certify that the Rotorcraft rounded or reached the turn/control point(s) as follows:

Point 1

Name/Identifier: _____ Date (UTC date): _____
(DD-Month-YYYY)

Latitude: _____ Time (UTC): _____
(HH:MM:SS)

Longitude: _____

Point 2

Name/Identifier: _____ Date (UTC date): _____
(DD-Month-YYYY)

Latitude: _____ Time (UTC): _____
(HH:MM:SS)

Longitude: _____

Point 3

Name/Identifier: _____ Date (UTC date): _____
(DD-Month-YYYY)

Latitude: _____ Time (UTC): _____
(HH:MM:SS)

Longitude: _____

Time source: _____

Observation taken from: _____

Signature of O.O. or Air Traffic Controller: _____

Date of Signature: _____

Name: _____

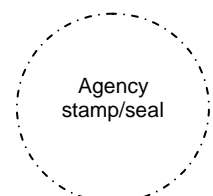
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:



Agency
stamp/seal



Fédération Aéronautique Internationale

CERTIFICATION OF INTERMEDIATE LANDING AND TAKEOFF - Form 5 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Airport Information

Airport Name: _____

City: _____

Identifier: _____

Latitude: _____

Longitude: _____

Official Certification

I hereby certify that landing of the Rotorcraft was accomplished as follows:

Date (UTC date): _____

(DD-Month-YYYY)

Time of first contact with surface (UTC): _____

(HH:MM:SS)

I hereby certify that takeoff of the Rotorcraft was accomplished as follows:

Date (UTC date): _____

(DD-Month-YYYY)

Time of last contact with surface (UTC): _____

(HH:MM:SS)

Time source: _____

Observation taken from: _____

Signature of O.O. or Air Traffic Controller: _____

Date of Signature: _____

Name: _____

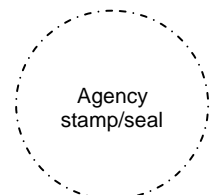
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:





Fédération Aéronautique Internationale

CERTIFICATION OF FINISH - Form 6 -

Pilot/Rotorcraft Information

Name of Pilot: _____
Rotorcraft Registration: _____
Manufacturer: _____
Model: _____

Finish Point Information

Name of Finish Point (if applicable): _____
Identifier (if applicable): _____
Latitude: _____
Longitude: _____

Official Certification

I hereby certify that the rotorcraft reached the finish point as follows:

Date (UTC date): _____
(DD-Month-YYYY)
Time at finish point (UTC): _____
(HH:MM:SS)
Altitude: _____
Time source: _____
Observation taken from: _____

Signature of O.O. or Air Traffic Controller: _____

Date of Signature: _____

Name: _____

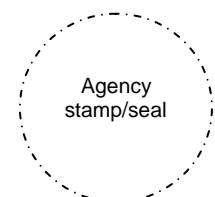
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:





Fédération Aéronautique Internationale

CERTIFICATION OF LANDING - Form 7 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Airport or Finish Point Information

Airport Name: _____

City: _____

Identifier: _____

Latitude: _____

Longitude: _____

Official Certification

I hereby certify that landing of the Rotorcraft was accomplished as follows:

Date (UTC date): _____
(DD-Month-YYYY)

Time of first contact with surface (UTC): _____
(HH:MM:SS)

Time source: _____

Observation taken from: _____

Signature of O.O. or Air Traffic Controller: _____

Date of Signature: _____

Name: _____

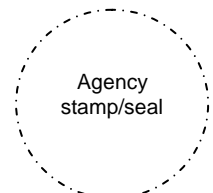
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:





Fédération Aéronautique Internationale

CERTIFICATION OF ALTITUDE - Form 8 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Altitude Information

Type of Record: Altitude, Altitude with Payload, Highest Take-Off,
 Greatest Mass carried to a height of 2'000m,
 Time to Climb, Time to Climb with Payload,

Official Certification

I hereby certify that the altitude was reached as follows:

Altitude reached: _____

Method of determining altitude: Altimeter Radar
 Barograph Other (describe)

Time of Lift Off (Time to Climb only) (UTC): _____
(HH:MM:SS)

Time upon reaching altitude (UTC): _____
(HH:MM:SS)

Date of record (UTC date): _____
(DD-Month-YYYY)

Signature of O.O.: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Agency
stamp/seal

Please return this form directly to:



Fédération Aéronautique Internationale

CERTIFICATION OF FLIGHT REQUIREMENTS - Form 9 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Official Certification

I hereby certify that the following flight requirements were met:

Signature of O.O.: _____

Date of Signature: _____

Name: _____

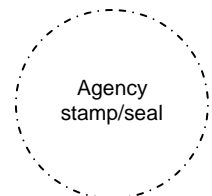
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:



Agency
stamp/seal



Fédération Aéronautique Internationale

CERTIFICATION OF BAROGRAPH / FR HANDLING - Form 10 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Barograph / Flight Recorder Information

Equipment Make: _____ Serial Number: _____

Drum rotation rate or sampling rate: _____

Date of last calibration: _____

Official Certification

I hereby certify that the equipment was installed in the Rotorcraft as follows:

Location: _____

Elevation: _____ Temperature: _____ Altimeter Setting: _____

Date (UTC date): _____ (DD-Month-YYYY)

Time of starting the equipment (UTC): _____ (HH:MM:SS)

I hereby certify that the equipment was removed from the Rotorcraft as follows:

Location: _____

Elevation: _____ Temperature: _____ Altimeter Setting: _____

Date (UTC date): _____ (DD-Month-YYYY)

Time of stopping equipment (UTC): _____ (HH:MM:SS)

Time source: _____

Signature of O.O.: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:

Agency
stamp/seal



Fédération Aéronautique Internationale

CERTIFICATION OF WEIGHT - Form 11 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Weight Information

Empty Weight of Rotorcraft: _____

Weight of Fuel: + _____

Weight of Payload: + _____

Weight of Pilot and Crew: + _____

Weight of Rotorcraft at takeoff: = _____

Official Certification

I hereby certify that the Rotorcraft weight was determined as follows:

Scales

Rotorcraft Manual

Other (Describe)

Date weight was determined (UTC date): _____ (DD-Month-YYYY)

Signature of O.O.: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:

Agency
stamp/seal



Fédération Aéronautique Internationale

CERTIFICATION OF REFUELLING - Form 12 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Refueling Information

The flight was accomplished with refueling.

Place of refueling: on the ground (specify location): _____

in flight (specify location): _____

The flight was accomplished without refueling.

The fuel tanks were sealed before takeoff.

The seals were intact at termination of the record attempt.

The Rotorcraft had no capability to undertake in-flight refueling.

Official Certification

I hereby certify that refueling was accomplished as noted above:

Date of record (UTC date): _____
(DD-Month-YYYY)

Signature of O.O.: _____

Date of Signature: _____

Name: _____

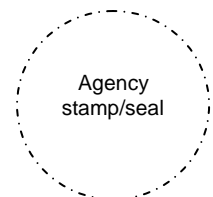
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:





Fédération Aéronautique Internationale

CERTIFICATION OF FLIGHT CREW - Form 13 -

Pilot/Rotorcraft Information

Name of Pilot: _____
Rotorcraft Registration: _____
Manufacturer: _____
Model: _____

Crew Information

Name: _____
FAI Sporting License: _____ Validity: _____ (DD-Month-YYYY)
Position/Duties: _____

- On board during the entire flight
 Not on board during the entire flight (specify)

Name: _____
FAI Sporting License: _____ Validity: _____ (DD-Month-YYYY)
Position/Duties: _____

- On board during the entire flight
 Not on board during the entire flight (specify)

Official Certification

I hereby certify that the crew information given above is correct and complete:

Date of record (UTC date): _____
(DD-Month-YYYY)

Signature of O.O.: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Agency
stamp/seal

Please return this form directly to:



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CERTIFICATION OF PAYLOAD - Form 14 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Official Certification

I hereby certify that the following payload was carried during the record flight

(indicate also the payload changes made during the flight, if any):

Signature of O.O.: _____

Date of Signature: _____

Name: _____

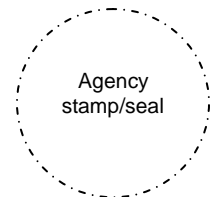
Title: _____

Address: _____

E-mail: _____

Telephone: _____

Please return this form directly to:





Fédération Aéronautique Internationale

CERTIFICATION OF TRANSITION FROM / TO HORIZONTAL FLIGHT - Form 15 -

Pilot/Rotorcraft Information

Name of Pilot: _____

Rotorcraft Registration: _____

Manufacturer: _____

Model: _____

Airport or Finish Point Information

Airport Name: _____

City: _____

Identifier: _____

Latitude: _____

Longitude: _____

Official Certification

I hereby certify that transition of the Tilt Rotor flight was accomplished as follows:

from vertical to horizontal flight

from horizontal to vertical flight

Date (UTC date): _____

(DD-Month-YYYY)

Time of first contact with surface (UTC): _____

(HH:MM:SS)

Time source: _____

Observation taken from: _____

Signature of O.O.: _____

Date of Signature: _____

Name: _____

Title: _____

Address: _____

E-mail: _____

Telephone: _____

Agency
stamp/seal

Please return this form directly to: