TYPE OR PRINT ALL ENTRIES IN INK

Form Approved
OMB. No. 2120-0022 12/31/2020

U.S. Department of Transportation
Federal Aviation Administration

AIRMAN CERTIFICATE AND/OR RATING APPLICATION

- [x] REPAIRMAN
- [ ] MECHANIC
- [ ] AIRFRAME
- [ ] POWERPLANT

RII Inspector for the Viking DHC-400
(Specify Rating)

- [ ] PARACHUTE RIGGER
- [ ] SENIOR [ ] MASTER
- [ ] SEAT [ ] CHEST
- [ ] BACK [ ] LAP

APPLICATION FOR: [ ] ORIGINAL ISSUANCE [ ] ADDED RATING

I. APPLICANT INFORMATION

A. NAME *(First, Middle, Last)*: Mark Albin Hedlund

B. SOCIAL SECURITY NO.: 574606152

C. DOB *(Mo., Day., Yr.)*: 03,17,1964

D. HEIGHT: 70 IN.

E. WEIGHT: 210

F. HAIR: Blond

G. EYES: Blue

H. SEX: Male

I. NATIONALITY *(Citizenship)*: USA

J. PLACE OF BIRTH: Lake Tahoe, CA

K. PERMANENT MAILING ADDRESS
2405 Clements Dr
NUMBER AND STREET, P.O. BOX, ETC.
Anchorage
CITY
Alaska 99515
STATE ZIP CODE

L. HAVE YOU EVER HAD AN AIRMAN CERTIFICATE SUSPENDED OR REVOKED?
- [x] NO
- [ ] YES (If "Yes," explain on an attached sheet keying to appropriate item number).

M. DO YOU NOW OR HAVE YOU EVER HELD AN FAA AIRMAN CERTIFICATE? [ ] NO [x] YES
SPECIFY TYPE: ATP MEL 3043781

N. HAVE YOU EVER BEEN CONVICTED FOR VIOLATION OF ANY FEDERAL OR STATE STATUTES PERTAINING TO NARCOTIC DRUGS, MARIJUANA, AND DEPRESSANT OR STIMULANT DRUGS OR SUBSTANCES? [x] NO [ ] YES
DATE OF FINAL CONVICTION

II. CERTIFICATE OR RATING APPLIED FOR ON BASIS OF -

- [ ] A. CIVIL EXPERIENCE
- [ ] B. MILITARY EXPERIENCE
- [ ] C. LETTER OF RECOMMENDATION FOR REPAIRMAN *(Attach copy)*

- [ ] D. GRADUATE OF APPROVED COURSE — (1) NAME AND LOCATION OF SCHOOL; (2) SCHOOL NO.; (3) CURRICULUM FROM WHICH GRADUATED; (4) DATE
- [ ] E. STUDENT HAS MADE SATISFACTORY PROGRESS AND IS RECOMMENDED TO TAKE THE ORAL/PRACTICAL TEST (FAR 65.80) — (1) SCHOOL NAME; NO.; (2) SCHOOL OFFICIAL'S SIGNATURE
- [ ] F. SPECIAL AUTHORIZATION TO TAKE MECHANIC'S ORAL/PRACTICAL TEST (FAR 65.80) — (1) DATE AUTH.; (2) DATE AUTH. EXPIRES; (3) FAA INSPECTOR SIGNATURE; (4) FAA DIST OFC.

III. RECORD OF EXPERIENCE

A. MILITARY COMPETANCE OBTAINED IN → (1) SERVICE; (2) RANK OR PAY LEVEL; (3) MILITARY SPECIALITY CODE

B. APPLICANT'S QTHER THAN FAA CERTIFICATED SCHOOL GRADUATES. LIST EXPERIENCE RELATING TO CERTIFICATE AND RATING APPLIED FOR. *(Continue on separate sheet, if more space is needed).*

DATES: MONTH AND YEAR FROM	TO	EMPLOYER AND LOCATION	TYPE WORK PERFORMED
07/2020	11/2020	MARITIME HELICOPTERS, INC HOMER, AK 99603	SUCCESSFULLY COMPLETED MARITIME HELICOPTERS FAA APPROVED TRAINING PROGRAM.

C. PARACHUTE RIGGER APPLICANTS: INDICATE BY TYPE HOW MANY PARACHUTES PACKED

SEAT	CHEST	BACK	LAP

FOR MASTER RATING ONLY

PACKED AS A - [ ] SENIOR RIGGER [ ] MILITARY RIGGER

IV. APPLICANT'S CERTIFICATION

I CERTIFY THAT THE STATEMENTS BY ME ON THIS APPLICATION ARE TRUE

A. SIGNATURE: Mark Hedlund

B. DATE: 12/01/2020

V.

I FIND THIS APPLICANT MEETS THE EXPERIENCE REQUIREMENTS OF FAR 65 AND IS ELIGIBLE TO TAKE THE REQUIRED TESTS.

DATE | INSPECTOR'S SIGNATURE | FAA DISTRICT OFFICE

FOR FAA USE ONLY

Emp.	.reg.	D.O.	.seal	.con	iss.	Act	.lev	.TR	.s.h.	.Src	#rte	Rating (1)	Rating (2)	Rating (3)	Rating (4)

LIMITATIONS