



U.S. Department
of Transportation
**Federal Aviation
Administration**

FAA RECORDS REQUEST (PRIA)

Pilot Records Improvement Act Of 1996
Title 49 U.S.C. § 44703(h), Records of Employment of Pilot Applicants, As Amended

Requests for FAA records should be addressed as follows:

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| Regular mail through the United States Postal Service (USPS). | Expedited mail service through the USPS or private carrier. |
| Federal Aviation Administration Attn.: Aviation Data Systems Branch, AFS-620 (PRIA) PO Box 25082 Oklahoma City, OK 73125-0082 | Federal Aviation Administration Attn.: Aviation Data Systems Branch, AFS-620 (PRIA) 6500 S. MacArthur Blvd., ARB Room 313 Oklahoma City, OK 73169 |

NOTICE

Request will not be deemed received or valid unless Parts I and II are completed as specified in the instructions.
Pursuant to 49 U.S.C. § 44703(h)(5), a person who receives a request for records under 49 U.S.C. § 44703(h)(1) shall furnish a copy of all such requested records maintained by the person not later than 30 days after receiving the request.

PART I: RECORDS REQUEST (PRIA)

_____ , _____ hereby requests records pertaining
(Air Carrier Name) (Air Carrier Certificate #)

to the airman consenting in Part II below concerning: (i) current airman medical certificate, current airman certificates and associated type ratings, including any limitations to those certificates and ratings; and, (ii) summaries of legal enforcement actions resulting in a finding by the Administrator of a violation of Title 49 U.S.C. or a regulation prescribed or order issued under this Title that was not subsequently overturned [as provided by 49 U.S.C. § 44703(h)(1)(A)].

Name: _____ Title: _____
(Print – Air Carrier Representative) (Print—Title of Air Carrier Representative)

Signature: _____ Date: _____
(Air Carrier Representative)

Mailing address: _____

Telephone _____ FAX _____

PART II: AIRMAN CONSENT TO RELEASE OF RECORDS

I _____ , consent to and authorize the Federal Aviation Administration
(Print – Airman’s First, Middle, and Last Name)

to release records concerning: (i) my current airman medical certificate, current airman certificates and associated type ratings, including any limitations to those certificates and ratings; and, (ii) summaries of legal enforcement actions resulting in a finding by the Administrator of a violation by me of Title 49 U.S.C. or a regulation prescribed or order issued under this Title that was not subsequently overturned, to the air carrier named in Part I above.

Airman Certificate Number(s): _____

Signature: _____ Date: _____
(Not valid unless signed and dated)

*Mailing address: _____

*Denotes required information
– see instructions #4

Telephone _____



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INSTRUCTIONS

FAA FORM 8060-10, FAA RECORDS REQUEST (PRIA)

Pilot Records Improvement Act Of 1996,
Title 49 U.S.C § 44703(h), Records of Employment of Pilot Applicants, As Amended

Air carriers **should** use this form to request FAA Records from the Federal Aviation Administration.

NOTICE

Request will not be deemed received or valid unless Parts I and II are completed as specified below.

This form may be photocopied for use.

This form is available on the Internet at <http://www.faa.gov/avr/afs/pria/>.

A separate form must be used for each airman whose records are requested.

DO NOT enter information on this form such as date of birth, social security number, home address*, or other information in which the airman may have a reasonable expectation of privacy.

Part I – FAA Records Request (PRIA): To be completed by the Air Carrier.

NOTE: All entries, except for signature, must be either type written or printed legibly with black or dark blue ink.

1. Name, title, and signature – enter the name, title, and signature of the person making the request on behalf of the air carrier.
2. Date – enter the date of the request.
3. Mailing address – provide a complete company mailing address to which FAA will mail the requested records.

Part II -- Airman Consent: To be completed by the Airman Applicant.

NOTE: All entries, except for signature, must be either type written or printed legibly with black or dark blue ink.

1. Name -- enter your name as it is shown on your airman certificate(s).
2. Airman Certificate Number -- enter your airman certificate number(s). In parenthesis after the certificate number, indicate the type of certificate by using S (Student), P (Private), C (Commercial), F (Flight Instructor), G (Ground Instructor), or A (Airline Transport Pilot). If you have multiple certificates with the same certificate number, list the certificate number once and indicate the types of certificates in parenthesis. For example, if you hold an Airline Transport Pilot Certificate as well as Flight Instructor and Ground Instructor Certificates using the same number, you should indicate as follows: Certificate No. 456231234 (A, F, G).
3. Signature and Date – Sign in ink using your legal signature and enter the date.
4. ***Mailing Address -- This information is required for the FAA to provide notice to the airman that a request for records has been received and of the airman's right to receive a copy of the records provided to the carrier.**

PAPERWORK REDUCTION ACT STATEMENT

Title 49 United States Code (49 U.S.C.) § 44703(h), Records of Employment of Pilot Applicants, as amended, requires all air carriers to request FAA records and Air Carrier and Other Records concerning an individual before allowing that individual to begin service as a pilot. 49 U.S.C. § 44703(h)(8) requires the FAA Administrator to promulgate standard forms to request records. The information entered on the standard forms will be used to facilitate search and retrieval of the required records. It is estimated that the average burden per respondent associated with the collection of FAA Records [this collection] is 10 minutes. If you wish to comment on the accuracy of this estimate or submit suggestions for reducing the burden, you may write to: Federal Aviation Administration, Air Transportation Division, AFS-200, 800 Independence Avenue, SW, Washington, DC 20591. The requirement to collect background information on the pilots before allowing the pilot to begin service is mandatory; the use of this form is not. 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 control number assigned to this collection is 2120-0607.