

Paperwork Reduction Act Burden Statement

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0607. Public reporting for this collection of information is estimated to be approximately 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are voluntary. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524

INSTRUCTIONS FOR COMPLETING FAA FORM 8060-XX

PURPOSE: This form allows pilots who do not have access to the FAA Pilot Records Database (PRD) to grant or revoke access for air carriers or operators to view the pilot's PRD records.

Name: Enter your last name, first name and middle name as displayed on your FAA pilot certificate. (Required)

Date of Birth: Enter your date of birth in the format MM/DD/YYYY. (Required)

FAA Pilot Certificate Number: Enter your certificate number as displayed on your FAA COMMERCIAL or ATP pilot certificate. If you do not hold a Commercial or ATP certificate, enter the number from your Remote Pilot Certificate. (Required)

Email Address: Enter your email address. (Optional)

Current Mailing Address, City, State, Zip Code: Enter your mailing address, city, state, and Zip code as displayed on your FAA pilot certificate. If you need to change your address printed on your certificate, contact the Airmen Certification Branch at 866-878-2498. Entering a different address here will not update your FAA address on record and may delay consent or revocation being granted via the PRD. Copies of your PRD Airman Record will be mailed to the address of record only. (Required)

Granting or Revoking Consent Statement: Select if you intend to grant consent or withdraw a previously provided consent to air carriers/operators. If you do not make a selection, consent will not be granted or withdrawn in the PRD for this company. (Required)

Air Carrier Name(s) and Designator(s): Enter the **full name** of the air carrier or operator that will be allowed to review your PRD Airman Records. Ask the air carrier or operator what should be entered, as it may not be the same as the commonly used company name. Also enter the **FAA designator** assigned to the air carrier or operator. Ask the air carrier or operator what should be entered. You may list up to four carriers/operators. If you require more carrier/operator entries, please submit any number of separate FAA Forms XXXX-X. (Required)

Consent Time Period: Select how long you would like your PRD Airman Records to be available for download for each air carrier or operator. Do not make a selection if you are using this form to withdraw consent. If left unchecked, the carrier/operator access period will be 30 days. (Optional)

Perjury Statement: Your signature below this statement declares that you understand the penalties for making a false statement on this form.

Signature: You must sign and date the form for consent or withdrawal to be granted. Typed, printed or electronic signature is not acceptable. (Required)



U.S. DEPARTMENT OF TRANSPORTATION
Federal Aviation Administration

U.S. Department of Transportation
Federal Aviation Administration

PILOT CONSENT/REVOCATION FOR AIR CARRIER ACCESS TO PILOT RECORDS DATABASE

PRIVACY ACT: This information is required under the authority of Transportation Title 49 U.S.C. Section 44703 et. seq., the Privacy Act at 5 USC § 552a(b), and the Freedom of Information Act at 5 USC § 552. The principal purpose for which the information is intended to be used is to 1) enable the agency to locate and retrieve the records that you are requesting, and 2) ensure that any applicable Privacy Act requirements for access to these records have been met.

Last Name (as appears on your FAA pilot certificate; required) First Middle

Date of Birth (MM/DD/YYYY) FAA Pilot Certificate Number (required) Email Address (optional)

Current Mailing Address: Street Address, Apt./Suite No., PO Box/Rural Route No.

City State ZIP Code

I grant or revoke consent to the air carriers and/or operators listed below to access my records within the Pilot Records Database, and I authorize the Federal Aviation Administration to record that consent or revocation in the PRD.

Check one (required): [] Consent [] Revoke

Air Carrier Name(s) (required) Air Carrier Designator(s) (required)

Blank lines for entering Air Carrier Name(s) and Air Carrier Designator(s)

If consenting, please check the appropriate box for length of time that air carriers(s) will have access (optional; 30 days default)

[] 30 Days [] 45 Days [] 60 Days

Statement Under Perjury: I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct, and that I am the person named above, and I understand that any falsification of this statement is punishable under the provisions of 18 U.S.C. Section 1001 by a fine of not more than \$10,000 or by imprisonment of not more than five years or both, and that requesting or obtaining any record(s) under false pretenses is punishable under the provisions of 5 U.S.C. 552a(i)(3) by a fine of not more than \$5,000.

Airman Signature Date

(Typed, printed or electronic signature is not acceptable.)