



Airman Certificate and/or Rating Application – Repairman (14 CFR Part 65)

- ☒ ORIGINAL ISSUANCE ☐ § 65.101 REPAIRMAN ☒ § 65.104 EXPERIMENTAL AIRCRAFT BUILDER REPAIRMAN ☐ § 65.107 LIGHT-SPORT AIRCRAFT REPAIRMAN
☐ ADDED RATING/PRIVILEGES ☐ Inspection Rating
☐ OTHER _____ ☐ Maintenance Rating

I. APPLICANT INFORMATION

A. Name (Last, First, Middle) Fahmy, George			B. Date of Birth (MM/DD/YYYY) 08/14/1990		C. Place of Birth (City and State) or (City and Country) San Jose, CA	
D. Height (Inches) 73	E. Weight (Pounds) 215	F. Hair Color (Spell out) Dark Brown	G. Eye Color (Spell out) Hazel	H. Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	I. Citizenship / Nationality: <input checked="" type="checkbox"/> USA <input type="checkbox"/> Other: _____	
J1. Physical Location/Address (Required) <input type="checkbox"/> Directions are attached. 4450 TERRA BRAVA PL SAN JOSE CA 95121		J2. Mailing Address (will show on certificate) <input checked="" type="checkbox"/> Same as J1.		K. Do you now hold or have you ever held an FAA airman certificate? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, Certificate type and number: Private Pilot, 3852708		
				L. Have you ever had an FAA airman certificate suspended or revoked? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
				M. Do you read, write, speak, and understand the English language? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
N. Have you ever been convicted for violation of any Federal or State statutes relating to narcotic drugs, marijuana, depressant or stimulant drugs or substances? Refer to § 65.12 and §91.19(a). <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, Date of Final Conviction (MM/DD/YYYY): _____						

II. APPLICATION BASIS Complete Section III, Record of Experience, when application basis is A below. Continue additional information on a separate sheet if necessary.

A1. Specify Repairman Privileges/Limitations Requested:

☐ A. § 65.101 REPAIRMANA2. ☐ I have attached a letter from my employer recommending me for the privileges/limitations sought, and certifying that I meet the requirements of the requested privileges/limitations.

☒ B. § 65.104 EXPERIMENTAL AIRCRAFT BUILDER REPAIRMAN

B1. Make FAHMY GEORGE W S	B2. Model VANS RV-7	B3. Serial Number F-01	B4. Certification Date
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C1. LSA Class: ☐ Airplane ☐ Glider ☐ Lighter-Than-Air ☐ Powered Parachute
☐ Weight-Shift-Control ☐ Gyroplane (Insp. Rating Only)

☐ C. § 65.107 LIGHT-SPORT AIRCRAFT REPAIRMAN

C2. LSA Training Course Provider

C3. Course Name

C4. Course Number:

C5. Course Completion Date:

C6. Course Hours:

For Inspection Rating Only: C7. N Number:

C8. Serial Number:

III. RECORD OF EXPERIENCE OR TRAINING Continue additional information on a separate sheet if necessary.

☐ Mark this box if separate sheet attached for additional information.

1. DATE FROM (MM/YYYY) 2. DATE TO (MM/YYYY) 3. EMPLOYER/TRAINER NAME & LOCATION (Name, City, State) 4. TYPE OF WORK PERFORMED/TRAINING RECEIVED

IV. APPLICANT'S CERTIFICATION This area is completed by the applicant at the time application is made.

I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any FAA certificate to me. I have received the Pilot's Bill of Rights Written Notification of Investigation that accompanies this form. I have also read and understand the Privacy Act statement that accompanies this form.

Applicant's Signature

Date (MM/DD/YYYY)

9/29/2025

Name (as shown on page 1 of application): Fahmy, George	Date of Birth (MM/DD/YYYY): 08/14/1990	Certificate Number (if any):
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A. Have you ever had an FAA airman certificate suspended or revoked? ☒ NO ☐ YES

B. Have you ever been convicted for violation of any Federal or state statutes relating to narcotic drugs, marijuana, or depressant or stimulant drugs or substances? ☒ NO ☐ YES, Date of Final Conviction: _____

I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as a part of the basis for issuance of any FAA certificate to me. I have received the Pilot's Bill of Rights Written Notification of Investigation that accompanies this form. I have also read and understand the Privacy Act statement that accompanies this form.

Applicant's Signature _____ Date (MM/DD/YYYY) _____

I have examined this applicant's papers, and I have indicated the result as: ☐ APPROVED (Temporary Certificate Issued) ☐ DISAPPROVED

FAA Signature (Print Name and Sign) _____ Date (MM/DD/YYYY) _____ FAA Office/Designation No. _____

☐ Letter

☐ Temporary Certificate

☐ Other See Remarks block

Form of ID	State or Country
ID Number	Expiration Date
Telephone No	Email Address

FAA Signature (Print Name and Sign)	Date (MM/DD/YYYY)	FAA Office
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