

## **Designee Review and Appeals Board**

### **Request for Review**

To Whom It May Concern:

Thank you for contacting the Designee Review and Appeals Board. This Board was established to provide an objective, un-biased, and deliberate process for the review of complaints or actions taken against a Designated Pilot Examiner (DPE). This Designee Review and Appeals Board, through its actions, will help build confidence and trust in Designated Pilot Examiners and the FAA resulting in a safer aviation community with enhanced communication. This Designee Review and Appeals Board will advocate fairness and respect for all individuals seeking access, accountability of all public employees and DPEs, open communication with the aviation community, and equal access for all who seek action by this board.

Please carefully read this page and all instructions on the forms that follow prior to completing them. In order for the Designee Review and Appeals Board to open an investigation, a Complaint must be signed under penalty of perjury.

You may submit your Complaint online in the near future. In the meantime, you may print out, complete this form in its entirety, sign and return the Complaint form along with any evidence you wish to submit in support of your Complaint. You may mail, email, or fax the completed forms to the postal or email address listed above or the facsimile number.

The Designee Review and Appeals Board will hear complaints alleging misconduct, improper, unfair, or biased actions by a DPE or such actions taken by the FAA against a DPE in the performance of their duty as a designee. This process is not intended to be used for litigation of Federal or State employment or discrimination law. The Board shall only accept Requests for Reviews regarding Unresolved Complaints either open or closed within certain guidelines. The FAA may initiate a review at their discretion. The technical rules of evidence applicable to judicial proceedings do not apply to hearing before this Board. The Board may receive any evidence or hear any testimony which the Board considers relevant to the Request for Review. The Board may exclude any testimony or evidence that is cumulative, repetitive, or not relevant to the Request for Review. The Confidentiality of the information submitted to this Board is paramount and will be protected to the fullest extent of the law.

All findings, reports, and recommendations of this Board submitted to the FAA are advisory and non-binding. These proceedings may NOT change your outcome.

The Board can refuse to hear a Request for Review that has not been submitted within the proper time frame (60 days from actions taken), the Board has no jurisdiction over the Request for Review, The complaint is clearly without merit or the Request of Review is a duplicate Review previously submitted.

The Designee Review and Appeals Board does not have jurisdiction over internal FAA policy, criminal matters, regulatory matters, or non-specific Complaints.

We also ask that you fill out FAA form 8060-69 and send to the FAA. We also request a copy of the form to be included in your application packet.

Thank you for your Request for Review and we look forward to the Review process regarding your Complaint.

Sincerely,

The Designee Review and Appeals Board

**INSTRUCTIONS:**

Please provide all information requested in full. Provide a detailed description of the event (s) that led to this Request for Review. Dates, times, aircraft, airports, locations, witnesses, names and such information are crucial. If more space is needed, attached additional sheets of paper as required to detail your event(s).

Your statement must be true and accurate to best of your knowledge. You must sign and attest to the truthfulness of the contents of this Request for Review under the penalty of perjury.

Complaints and evidence submitted this this Board may be deemed confidential and are not disclosed to the public unless compelled by court order. A redacted summary of the final report will be published by industry.

You will be notified in writing of the acceptance of your Request for Review, date of any hearing scheduled, additional information needed concerning your Complaint, and the final findings of the Board.

Below is the official fee schedule for the DRAB’s services. If you are submitting this form online you can click the “Pay Now” button and pay the fees necessary to begin the investigation process. If you are faxing your application, please call 610-791-4359 and make payment over the phone. If you are mailing your application, you may include a check or fill out the information below to make payment. If you do not wish to send your card number through the mail, please feel free to call 610-791-4359 to make payment.

Name of Card Holder \_\_\_\_\_

Address of Card Holder: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip Code \_\_\_\_\_

Phone Number of Card Holder \_\_\_\_\_

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code on Back \_\_\_\_\_ Type of Card \_\_\_\_\_

**Initial Fee Schedule**

	<u>FSANA Member</u>	<u>FSANA Non-Member</u>
Pilot	\$250	\$500
DPE	\$1000	\$2000
Flight School	\$500	\$1000

**REQUEST FOR REVIEW**

**DESIGNEE REVIEW AND APPEALS BOARD**

**COMPLAINANT INFORMATION:**

Complainant Full Name or Name of School if a School is Making the Compliant:

\_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone (Home, Work, Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Pilot Certificate Number: \_\_\_\_\_

Pilot Certificates and Rating: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Medical Certificates (type and date issued): \_\_\_\_\_

Designee Number: \_\_\_\_\_

**INDIDENT OR ACTIONS INFORMATION:**

Date of incident or actions: \_\_\_\_\_

Airport: \_\_\_\_\_ Location: \_\_\_\_\_ FSDO \_\_\_\_\_

DPE: \_\_\_\_\_

Full Name of the ASI or FAA Official and FSDO:

\_\_\_\_\_

Aircraft: \_\_\_\_\_

Name and Contact of Witness (s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_







I \_\_\_\_\_, make this official Request for Review under the penalty of perjury to the Designee Review and Appeals Board to investigate my Complaint in its entirety.

I understand and agree to the following:

- (a) All information and evidence submitted will protect confidential information and will not be disclosed to the public unless compelled by a court of law or otherwise stated herein.
- (b) I will be notified in writing of the acceptance of my Request for Review, date of any hearing scheduled, additional information needed concerning my complaint, and the final findings of the Board.
- (c) I may testify before the Board.
- (d) Lack of cooperation with the Board can result in my Request for Review being dismissed.
- (e) The Board's findings are advisory and non-binding.
- (f) I am not waving my right to bring a claim or bring a civil suit against any party involved in this Complaint.
- (g) I agree that my signature gives my consent for the Board to receive any confidential material needed to properly investigate this Request for Review.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_