



## UAS (Drone) Use Application

- Application must be submitted to beers1@uakron.edu at least 1 weeks prior to planned flight
- Operator must possess a copy of the approved application at all times during flight activity
- The UofA maintains the authority to suspend any activity deemed not in compliance or in the best interest of the University

Name of Operator: \_\_\_\_\_

UofA Dept or Company Name: \_\_\_\_\_

Address/City: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If Vendor, UofA Contracting Dept: \_\_\_\_\_

UAS Make/Model/Description: \_\_\_\_\_

FAA Registration #: \_\_\_\_\_

Purpose of Operation: \_\_\_\_\_

Date(s) of Operation: \_\_\_\_\_ Time(s) of Operation: \_\_\_\_\_

Please submit the following:

Description of flight plan, including operational area of flight

Copy of UAS pilots license and copy of Part 107 recert certificate if you been flying longer than two years

Copy of TRUST Certificate must be provided by the recreational UAS pilot.

LAANC Authorization or FAA Authorization (COA or 333), if required

Vendor Operations: submit signed contract

Vendor Operations: submit Certificate of Insurance (minimum \$1,000,000) with UA as additional insured

Data collection plans, and intended use of data collected

Operator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*By signing, I attest the above and supplied information is correct to the best of my knowledge. I also attest I have read the UofA UAS (Drone) Use Approval Process and comply.

EOHS	UAPD	Risk Management
Approved _____ Denied _____	Approved _____ Denied _____	Approved _____ Denied _____
Comments:	Comments:	Comments:
Reviewed By:	Reviewed By:	Reviewed By:
Review Date:	Review Date:	Review Date: