

**APPLICATION FOR AUTHORIZATION TO USE
UNMANNED AIRCRAFT SYSTEMS (UAS)**

This application must be completed and submitted to stonege@gbc.edu by any person who intends to operate a UAS on College property. The application must be completed and submitted prior to any UAS operations on any College property, at any College sponsored event, or as part of their College employment. All forms and required attachments must be submitted not less than two (2) weeks in advance of flight operations. The requester will receive a response from the College within 10 working days of request receipt.

**ANY OMISSION OF INFORMATION REQUESTED IN THIS APPLICATION MAY
RESULT IN A DELAY OF PROCESSING OF APPLICATION AND APPROVAL.**

Date of Application: _____

SECTION 1: REQUESTOR INFORMATION

1. Applicant

1.1. Full Name of Applicant: _____

1.2. Title and Affiliation: _____
(list current College faculty, staff, student, vendor, etc.)

1.3. Address: _____

1.4. Phone Number(s): _____
(include cell phone #)

1.5. Email: _____

2. Is the Applicant the UAS Owner **YES** **NO**

If the answer is NO, please provide the following information:

2.1. Full Name of UAS owner: _____

2.2. Title and Affiliation: _____

2.3. Address: _____

2.4. Phone Number(s): _____
(include cell phone #)

2.5. Email: _____

Is the UAS Owner Affiliated with the College? **YES** **NO**

SECTION 2: PURPOSE OF UAS REQUEST/PROPOSED ACTIVITY

Provide full details of flight purpose (education, research, promotional, etc.), including identity of the UAS operator(s) and/or flight team. Depending upon your intended use and activities associated with the use of the UAS, there may be other College approvals required before you can operate the UAS on College property or at university events. Please include whether the UAS activity will involve videography, photography, or recording devices of any type.

1. Purpose of planned flight:

- Research
- Promotional
- Educational
- Other College Business

2. Persons involved in the operation of the UAS

2.1. Name of the Pilot (or Remote Pilot) in Command: _____
(“PIC”)

Title and Affiliation: _____
(list current College faculty, staff, student, vendor, etc.)

Address: _____

Phone Number(s): _____
(include cell phone #)

Email: _____

2.2. Name of the Visual Observer(“VO”): _____

Title and Affiliation: _____
(list current College faculty, staff, student, vendor, etc.)

Address: _____

Phone Number(s): _____
(include cell phone #)

Email: _____

3. Specific Location of planned flight:

Latitude and longitude of the location: _____

Maximum altitude planned for the flight: _____

Maximum distance of the UAS from the PIC: _____

Air space classification of the proposed location: _____

Are any additional approvals required for flying in this airspace*:

YES

NO

* If the answer is **YES**, (i.e. additional approvals are required for flying in this airspace), attach the required approvals.

4. Activity details

Expected date(s) of operation: _____

Expected start time: _____

Expected end time: _____

SECTION 3: UAS DESCRIPTION, SPECIFICATIONS, AND LIABILITY INSURANCE

3.1 Are you planning to use a commercially made UAS that has not been customized in any way?

If "Yes", indicate the make and model: **YES** **NO**

Make: _____ Model: _____

Serial Number: _____ Power Source: _____

Weight and Dimensions of UAS without payload: _____

Weight and Dimensions of UAS with payload: _____

Provider of liability insurance: _____

Is the UAS or any other technology used in the proposed operation export-controlled*?

YES **NO**

* If the answer is **YES** (i.e. UAS or any other technology used in the proposed operation export-controlled), please attach an explanation.

If you have previously requested approval of UAS flight provide the following:

Date of previous approval: _____

3.2 Please include any other information that may assist the College in its review:

A large, empty rectangular box with a black border, intended for the user to provide additional information that may assist the College in its review.

Certification

I certify under penalty of perjury that the information provided in this Application for Authorization and the attached documents are true and correct. I further certify that all authorized UAS operations will be in strict compliance with all applicable federal, state and local rules and regulations, and all applicable College policies. I am aware of, and hereby take responsibility for, all pre-flight notification requirements and post-flight reporting requirements.

Signature of Applicant	Date
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Geoff Stone Video Producer and Photographer	Date
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Request Approved: **YES** **NO**

Comments or requirements for operation are listed below and must be observed. **All approved applicants MUST carry this approved application in their possession during the entirety of the UAS activity.**

References and Resources

- FAA UAS Frequently Asked Questions - <https://www.faa.gov/uas/faqs/>
- FAA Modernization and Reform Act (FMRA) 2012 - <https://www.congress.gov/112/crpt/hrpt381/CRPT-112hrpt381.pdf>
- FAA Part 107 Regulations - https://www.faa.gov/news/fact_sheets/news_story.cfm?newsid=20516
- FAA Part 107 Summary - https://www.faa.gov/uas/media/Part_107_Summary.pdf
- FAA Part 333, 334 & 336 Summary - https://www.faa.gov/uas/media/Sec_331_336_UAS.pdf
- FAA Notice on Public Assembly and Sporting Event Flight Restrictions - https://www.faa.gov/uas/where_to_fly/airspace_restrictions/media/Sports_TFR-UAS_Handout.pdf
- FAA Airspace Classifications - https://www.faasafety.gov/gslac/ALC/course_content.aspx?cID=42&sID=505&preview=true
- Information on Certificates of Waiver or Authorization (COA) – <https://www.faa.gov/uas/faqs/>
- FAA Fact Sheet – State and Local Regulation of UAS - <https://www.faa.gov/news/updates/?newsId=84369>
- NTIA Voluntary Best Practices for UAS Privacy, Transparency, and Accountability - https://www.ntia.doc.gov/files/ntia/publications/uas_privacy_best_practices_6-21-16.pdf
- FAA memo on educational use of UAS - https://www.faa.gov/uas/resources/uas_regulations_policy/media/interpretation-educational-use-of-uas.pdf