



Application for Unmanned Aircraft Systems (UAS)
Commercial Drone Companies and Civil Users

Permit # _____

Commercial Companies and Civil UAS operators must have a fully-executed Operating Agreement with the University of Nebraska-Lincoln prior to any and all UAS services conducted on or above property owned or controlled by the University.

Required Data Elements

UNL Project Leader

Name
Email
Campus Phone Number
Emergency Contact Number (Cell)

UNL Department

Department Name
Campus Address
City/State/Zip
Phone Number
Email

Commercial Company or Civil UAS User

Name
Street Address
City/State/Zip
Phone Number
Email

Project Summary

A. Justification or Purpose

1 Purpose of Use (Check all applicable uses)

- Advertising/Marketing
Aerial Testing/Demonstration
Atmospheric/Weather Research
Building Maintenance/Real Estate Sales
Cargo/Freight Carrying
Construction/Engineering/Industrial
Crop Management/Extension
Education/Training
Other uses not indicated above (explain)
Public Safety - Police, Fire, Emergency Management
Homeland Security/Military (Non-combat)
Mapping
Photography/Video/Film Prod./Marketing/Communication
Pipeline/Powerline Patrol
Surveillance
Thermal Imagery/Ground Sensing
Wildlife Observation

2 Describe specific objectives of UAS use, including the type of data, photos or video to be collected

3 Describe how the UAS achieves these objectives

4 Identify the authority under which UAS operations will be conducted (COA, 333 Exemption, SAC, Authorization from requisite foreign civil aviation authority, or Part 107)

B. Proposed Aircraft Type and Weight

- 1 Aircraft platform (aircraft type [fixed wing, etc.]
2 Make and Model
3 Registration Number (if applicable)

4 Manufacturer Serial Number _____
If aircraft has no registration number or manufacturer's serial number, please describe how aircraft can be positively identified in the event of an incident, accident, or claim

5 Date Purchased _____

6 New or Used _____

7 Price Paid _____

8 Present Estimated Value with all attached equipment/and any modifications made since purchase _____

9 Aircraft Type (check all that apply)

- | | |
|------------|---------------|
| Fixed-wing | Glider |
| Rotor-wing | Single-engine |
| Balloon | Multi-engine |

10 Does this aircraft burn combustible fuel?

- | | |
|-----------|----|
| Yes, type | No |
|-----------|----|

11 Normal Control

- | | | |
|----------------|-----------------|------------------|
| Manually flown | Semi-autonomous | Fully autonomous |
|----------------|-----------------|------------------|

12 Type of launch

- | | | |
|-------------------------------|------|------|
| Traditional takeoff | Hand | Rail |
| Other (please describe) _____ | | |

13 Type of recovery

- | | | |
|-------------------------------|------------------|-----------|
| Traditional landing | Net/Line capture | Parachute |
| Other (please describe) _____ | | |

14.1 Weight of UAS (Specify lb) _____

14.2 Maximum Gross Take-off Weight (including installed/carried equipment & payload [Specify lb/Kg]) _____

15 Wingspan/Rotor Diameter (Specify cm, in, feet, or meters) _____

16 Maximum Endurance (in hours) _____

17 Maximum Operating Altitude (in feet) _____

18 Maximum Range (Specify feet, yards, meters, miles, or kilometers) _____

19 Maximum Speed (in nautical mile per hour) _____

20 Does UAS have the ability to independently detect/avoid other aerial traffic? Yes No

21 In the event of a lost link between the ground control station and the aircraft, does the UAS contain an automated recovery program that allows for it to safely return to a predetermined point?
Yes No

22 Are there redundancies built in for the aircraft's propulsion system? Yes No

23 Are there redundancies built in for the aircraft's flight control surfaces? Yes No

24 Are there redundancies built in for the aircraft's navigation/communication systems?
Yes No

25 Aircraft Manufacturer's website _____

26 Website (e.g., YouTube) where video of UAS can be viewed _____

27 Associated payload (example: number and types of cameras, etc.) _____

28 Describe manufacturer's aircraft and payload specifications

29 Describe your preventive maintenance plan, general repair practices, and sourcing for replacement parts

30 Identify the owner of the aircraft _____

C. UAS Operator Information

UAS Operator information is required for EACH Operator. (Duplicate this section as necessary for multiple operators.) Attach a copy of your pilot/remote pilot certification as required by the FAA (Exhibit D). Complete the remainder of Section C ONLY IF the UAS being operated is owned by the University of Nebraska.

1 UAS Operator Name _____

2 UAS Operator Emergency Contact Phone Number at Time of Flight _____

3 Indicate the qualifications of each operator.

a Is the operator a certificated pilot? Yes No

b If a certificated pilot:

Airman Certificate Number _____

Limitations _____

c CURRENT PILOT CERTIFICATES AND RATINGS

Student: Since (date) _____

Private Commercial

Airline (ATP) Rotocraft

Instrument _____

Single Engine – Land Single Engine – Sea Center Line Thrust

Multi-Engine-Land Multi-Engine – Sea

Instructor Type Rated in (type of aircraft) _____

Glider Light Sport Aircraft A&P Mechanic

Other _____

d If not a certificated pilot, does the operator hold a Part 107 Remote Pilot Certificate?

Yes (date passed) _____ No

4 If **not** a certificated pilot or remote pilot:

a Have you successfully completed an FAA (or equivalent) Private Pilot ground instruction course?

Yes No

b If you answered “**yes**” to the question above, have you passed the FAA (or equivalent) Private Pilot written examination?

Yes (date passed) _____ No

5 Date manufacturer’s training for specific UAS to be insured was completed

6 ADDITIONAL TRAINING APPLICABLE TO UNMANNED AIRCRAFT

Name and Location of school/training/other provider _____

UAS Model(s) _____

Date Completed _____

Check all the apply: Initial Manufacturers Training
Recurrency Training
Crew Resource Management (CRM)
Simulator Proficiency/Recurrent

UNMANNED AIRCRAFT PILOT/OPERATOR EXPERIENCE AND CURRENCY

Itemized Pilot-In-Command / Primary Operator Experience with Unmanned Aircraft

UAS Group	Make(s) & Model(s)	Number of Missions Flown/Landed/Recoveries			
		Total	Last 90 Days	Last 30 Days	Last 12 Months
Insured Make and Model			/ /	/ /	/ /
GROUP 1 (MGTOW 0-20 lbs.)			/ /	/ /	/ /
GROUP 2 (MGTOW 21-55 lbs.)			/ /	/ /	/ /

- | | | | | |
|----|--|-----|----|-----|
| 8 | Have you ever had an aircraft claim, incident or accident? | Yes | No | |
| 9 | Have you ever been cited or fined for violation of an aviation regulation? | Yes | No | |
| 10 | Has your pilot certificate ever been suspended or revoked? | Yes | No | N/A |

D. Proposed Date(s) and Time(s) of UAS use

E. Location and Area of Use Information

1 Proposed location(s). Attach map of flight area(s). (Exhibit A)

2 Property owner(s) of proposed locations(s)

3 Proximity of proposed location(s) to inhabited areas such as campus structures, residential or business districts, etc.

4 Describe protocols for notifying adjacent property owners

F. Funding Source(s) for the Purchase and Use of UAS

G. I have attached my UNL Site Specific FAA 333 Exemption, FAA Certificates of Waiver or Authorization (COA), Special Air Worthiness Certificate (SAC), or Authorization from requisite foreign civil aviation authority, if applicable. (Exhibit B)

H. I have attached Insurance Certificates which reflect: (Exhibit C)

Occurrence based UAS Liability Insurance of \$1 million per occurrence
 General Liability insurance of \$1 million per occurrence and \$3 million aggregate
 Liability policies shall name the Board of Regents as "additional insured" and include coverage for personal injury.
 Statutory Workers' Compensation insurance with employer's liability coverage of \$1 million and an alternate employer endorsement, where applicable.
 Waiver of subrogation language is included in the policies
 Policies are primary and non-contributory
 Insured will provide 30-days notice of cancellation

**Signature Approval for Unmanned Aircraft Systems (UAS)
Commercial Drone Companies and Civil Users**

I have read and am in compliance with the University of Nebraska Executive Memorandum. I understand that any violation of university policies or student code of conduct by an individual will be administered in accordance with applicable university policies and procedures. Additionally, individuals who violate this policy may be subject to civil or criminal penalties and the seizure of UAS by campus police or security. Fines, damages, and claims against individuals who violate this policy may be the responsibility of that individual.

Approval Signatures (digital are accepted)

Company _____
(certifying all necessary approvals have been obtained)

Project Leader _____
(certifying all necessary approvals have been obtained)

UNL Department Chair _____

UNL Dean/Director _____

UNL Office of Research & Economic
Development _____

UNL Police Department _____

UNL Risk Management _____

UNL Vice Chancellor, Business and Finance _____

Exhibit A - Map of Flight Area (Application Section E.1)

Exhibit B - UNL Site Specific FAA 333 Exemption, FAA Certificates of Waiver or Authorization (COA), Special Air Worthiness Certificate (SAC), or Authorization from requisite foreign civil aviation authority, if applicable. (Application Section G)

Exhibit C - Insurance Certificates must be attached. (Application Section H)

Exhibit D - Pilot/Remote Pilot Certification as required by the FAA (Application Section C)