

**Austin Police Department Air Support Robotics Unit  
Unmanned Aerial Operations Request  
Unmanned Aerial Flight Team Information**

Remote Pilot In Command (RPIC) PRINT Name: \_\_\_\_\_  
Drivers License/ID number: \_\_\_\_\_ DL/ID State: \_\_\_\_\_  
DOB: \_\_\_\_\_ Sex: M / F Race/Ethnicity: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Company: \_\_\_\_\_ Address: \_\_\_\_\_  
UA/Mission Insurance Company: \_\_\_\_\_  
UA Insurance Policy #: \_\_\_\_\_ UA Insurance Company Phone #: \_\_\_\_\_  
Remote Pilot License Number: \_\_\_\_\_ (Attach RENEWAL CERTIFICATE if issued over 24MO)  
Visual Observers/Additional Flight Team Support used: Y/N Visual Observer Skilled/Certificated Remote Pilot:  
Y/N  
VO FAA Remote Pilot License #: \_\_\_\_\_ (Attach RENEWAL CERTIFICATE if issued over 24MO)  
**\*If listing additional Flight Team members please include as an attached document.**

**Unmanned Aerial System Information**

UA Platform being used: **Circle all that apply** custom built / manufactured / Multirotor/VTOL / fix-wing / other  
Manufacture Make: \_\_\_\_\_ Model: \_\_\_\_\_  
All Up Weight (AUW): \_\_\_\_\_ Dimensions: \_\_\_\_\_ Max Speed: \_\_\_\_\_  
Hours on platform: \_\_\_\_\_ Hours on platform with added display/payload/cargo: \_\_\_\_\_  
Maintenance Log available: Y/N Weather/wind effects on platforms configuration for flight: \_\_\_\_\_  
UA Platform FAA Registration ID (**Must be clearly displayed on aircraft**): \_\_\_\_\_

**Unmanned Aerial Mission Information**

Date/s Requested for Operation: \_\_\_\_\_ Time: \_\_\_\_\_  
Rain/Weather Makeup Date/s Requested: \_\_\_\_\_  
Flight operations area/location: \_\_\_\_\_

**\*If listing additional locations please include as an attached document.**

Launch/Land Area Requested (Be specific, address/latitude and longitude): \_\_\_\_\_  
Maps/Diagram of Flight Operations Area Available: Y/N **\*If yes please attach to this document**  
Maps/Diagram of Flight ingress and egress: Y/N **\*If yes please attach to this document**  
FAA Waivers needed: Y/N **\*If Yes which waiver is required:** \_\_\_\_\_  
Required FAA Waivers ID #: \_\_\_\_\_  
Emergency Plan/Procedure: Y/N **\*If yes please attach to this document**  
Weather contingency plan: Y/N **\*If yes please attach to this document**  
Flight duration: \_\_\_\_\_ Flight altitude (AGL): \_\_\_\_\_  
How many Flights Planned or time frame flight started and will conclude: \_\_\_\_\_  
UA Command and Control: **Circle one** automated or autonomous (controlled by computer)/ manually (RPIC)  
(\*Unless a FAA waiver is presented for multiple UA system operated by single RPIC, each UA is required to have a RPIC at controls.)

Summary of Requested Unmanned Aerial Operating: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Please attach any additional documents, diagrams or material associated with this requested aerial operation.**

**Signature Disclaimer**

**\*I hereby certify that the above information is true, complete and accurate to the best of my knowledge.**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Questions Email APDdronereview@austintexas.gov