



Occupational Safety Program

Workplace Safety Program

Form

Small Unmanned Aircraft Systems (sUAS) Flight Request Application

Prepared by: KC, FHB 5/10/2024

This form is for all individuals, departments, and organizations requesting to use sUAS ("Drones") on or above Towson University property.

Submit completed applications at least seven (7) business days in advance of the requested flight date to drones@towson.edu.

The use of recreational Drones and Model Aircraft in, on, or above University Property is STRICTLY PROHIBITED!

Application is only good for primary flight date/time & proposed rain date requested. Submit a new application for each additional flight date/time. Use additional blank pages as needed to complete the application.

1	Requestor Name:
2	Requestor Organization/Department:
3	Requestor Email Address:
4	Requestor Phone Number:
5	Drone Operator/Pilot Name:
6	Drone Operator/Pilot Email Address:
7	Drone Operator/Pilot Telephone Number:
8	Drone Operator/Pilot FAA UAS Registration Number:
a.	Please submit a legible copy of the FAA Registration Certificate with this Application
9	Please submit Drone Operator/Pilot Certifications/Credentials
10	Will there be any additional Flight Crew? If Yes, List Names & Flight Responsibilities
11	Primary Date & Time of Proposed Drone Flight:
a.	If Applicable - Proposed Flight Rain Date (Time & Location Must Remain the Same):
12	Campus Location of Proposed Drone Flight? (Include Campus Map with Flight Area Clearly Indicated):
13	If Applicable, Location of Off-Campus Drone Flight? (Include Map with Flight Area Clearly Indicated):
14	Known Flight Hazards (If Any) & How They Will be Mitigated:
15	Does the Drone Have Surveillance/Detection Capability? (If Yes, Briefly Explain) <input type="text"/> Yes/ No
16	Purpose of Proposed Drone Flight:
a.	If Applicable, What Data or Photos Will be Collected During Flight?
b.	If Applicable, Describe On-Board Data Collection Equipment (Camera, IR Detection, etc.):
c.	If Applicable, Where Will Data Be Evaluated, Stored & Who Will Have Access?
d.	If Applicable, How Long Will Images Be Retained?
17	Description of Drone (Make, Model Number, etc.):
a.	Drone Weight (Including Any Payload):
b.	Drone FAA Registration Number or Certificate:
c.	Does the Drone Have GPS & "Geo-Fencing" Capability? <input type="text"/> Yes/ No
d.	Does the Drone Have "Return to Home" Capability? <input type="text"/> Yes/ No

Small Unmanned Aircraft Systems (sUAS) Flight Request Application, Page 2

18	Required Submittals: In addition to this application, ALL of the documentation listed below MUST be submitted with the application in order for a prompt and complete review for approval. Failure to submit all requested documentation may delay flight approval.
a.	Legible & Complete Copies of ALL FAA Certificates, Permits & Registrations
b.	Legible & Complete Copies of ALL Pilot Training Accreditations, Certificates & Credentials
c.	Proof of Insurance with Towson University Named as Additionally Insured (Only Applies to Outside Contractors). A minimum of \$ 1 Million/\$ 3 Million General Liability Coverage is Required.
d.	FAA Flight Coordination: In accordance with FAA requirements regarding airports & helipads, TU will proactively provide flight notification including Pilot contact information to nearby (≤ 5 miles) airports/helipads. This is provided in the event there is nearby flight activity which requires immediate grounding of your aircraft. <u>THE PILOT IS RESPONSIBLE FOR IMMEDIATELY COMPLYING WITH ALL AIRPORT/HELIPAD REQUESTS.</u> Failure to comply will result in loss of future Towson University Drone flight privileges.
19	Pilot Certification:
a.	I certify that my aircraft will <u>NOT</u> be carrying hazardous materials or pyrotechnic devices that explode or burn or any other materials that may separate from the aircraft while in flight. Pilots Initials: _____
20	IN CASE OF EMERGENCY
a.	<u>ALL</u> Drone crashes/malfunctions involving personal injury or property damage will be IMMEDIATELY REPORTED to the TUPD at (410) 704-4444 (24 hours/day, 7 days/week).
b.	In case of a Drone-related personal injury, IMMEDIATELY call 911.

Signature of Applicant: _____

Date of Application: _____

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COMMENTS: