

# Drone Use Request Form

Must be submitted to Risk Management 10 days in advance of proposed date

Contact Information	
Name of Requestor:	
Department or Company:	
Contact Phone #:	
E-Mail Address:	
Flight Details	
Purpose of drone flight:	
Proposed Dates of Flight:	
Proposed Time of Flight:	
Estimated Flight Duration:	
Estimated Flight Altitude:	
Where Do You Propose To Fly the Drone:	
Drone Information	
<b>Drone Description:</b>	
Make / Model	
FAA Registration #:	
Approximate Weight:	
Aircraft Owner (If other than RSCCD):	
Pilot Information	
Pilot Name:	
Attach Copy of Remote Pilot Certificate	