## **Application for Drone Operation Permit**

Name of Applicant:	
Address:	
Email:	Phone:
Requested Date of Operation:	Requested Time:
Requested Location:	
Statement of scientific purpose, educational purpose, or other purpose of public or great general interest:	
Name of Pilots:	• •
Name of Spotters:	
Please attach the following documentation:	
<ul> <li>Proof of a minimum \$2,000,000.00 liability insurance policy.</li> <li>Proof of Remote Pilot Certificate under Small UAS Rule (Part 107).</li> <li>If the proposed operation of the drone is over a populated area, applicants shall provide proof of waiver from FAA allowing drone to fly over a populated area.</li> <li>Proof of a registered, UAS certificate number, including address type/model of UAS, weight/dimensions, and power source.</li> <li>Photo ID of applicant (pilot) and spotter.</li> </ul>	
I verify that I have read, and will comply with, the Fairfield County Park District Drone Permit Policy. I further understand that, if my permit application is approved, prior to the permit being issued, I will need to execute an indemnification agreement with the Park District and pay the required fee. I further certify that all statements made in this application are true and accurate.	
Applicant Signature:	Date:
For Park District Use	
Application received on: By:	
Director's Determination:   Approved  Denied	Initials: Date:

