

## Request to Operate a Remotely Piloted Aircraft System (RPAS)

(Please Print/Type)

Department/Company:

Pilot Name:

Supervisor Name:

Cell Phone:

Cell Phone:

Email:

Email:

Humber Employee: Y N

Humber Employee: Y N

Pilot Certificate: Y N                      Advanced      or      Basic

RPAS Transport Canada Registration Number:

Marked on RPAS: Y N

Is flight activity connected with an academic program? Y N

If Yes, which program:

Date of flight:

Time:

Location of flight:

Purpose of flight:

NAV Canada authorization received to operate in restricted air space: Y N

- Provide copy of authorization with this application.

Is flight occurring at an advertised event? Y N

Does RPAS weigh more than 25 kilograms? Y N

Will flight operate above 122 meters (400 ft)? Y N

Is flight operating outside the rules of Basic or Advanced Operations? Y N

Is the Pilot from a country other than Canada/not a permanent resident of Canada? Y N

If **YES** to any of the above, has a Special Flight Operations Certificate (SFOC) been obtained from Transport Canada? Y N

Provide a copy of SFOC with this application if applicable.

Pilot has read and understands Humber's policy and procedures related to RPAS use on campus Y N

If pilot is anyone other than a Humber College or University of Guelph-Humber employee, proof of liability insurance is required.  
Please attach certificate of insurance if applicable.

Signature of Requestor/Pilot:

Date:

Signature of Supervisor:

Date:

Authorization to proceed with Flight as requested: Y N

Public Safety Authorization:

Date: