UAV OPERATION REQUEST FORM
Cornell University

Please complete this form and return it to The Office of Risk Management and Insurance at least two weeks prior to the requested UAV operation in the airspace above Cornell University.

Operator’s name:
Operator’s affiliation with Cornell University:
Operator’s age:
Operator’s cell phone number:
Operator’s email address:

What is the Operator’s Part 107 Remote Pilot in Command (RPIC) certificate number?
Does the Operator have general liability insurance for operating the UAV?
Please describe the Operator’s level of experience flying the UAV:
Does the Operator have a FAA airspace waiver to operate in restricted airspace?
What is the FAA Registration number on the UAV?
How much does the UAV weigh in pounds?

Please provide the purpose of the operation and a detailed flight plan, including the following:

- General description of the operation:

- Date of the operation:

- Approximate duration of the operation:

- Location of the operation (Please list all locations):

-PLEASE SEE NEXT PAGE-
Safety and privacy practices agreement

I, the undersigned, hereby agree that I have read and will adhere to the following safety and privacy practices throughout the duration of the above-mentioned UAV operation at Cornell University. I further acknowledge that I am at least 18 years old and legally competent to sign this agreement. Please initial next to each safety and privacy practice and sign on the signature line below.

_______ All operations at Cornell University must comply with FAA regulations, state and local laws / ordinances and University regulations.

_______ UAV shall not exceed an altitude of 400 feet above ground level.

_______ UAV speeds shall not exceed 20 miles per hours (MPH).

_______ The UAV must always be within the operator's line-of-sight.

_______ UAV shall not interfere with manned aircraft.

_______ UAV shall not fly over large crowds or people.

_______ Operators shall take reasonable precautions to respect other people’s privacy.

_______ Operators shall reasonably attempt to notify people in the area about the operation.

_______ Operators shall not control the UAV from moving vehicles.

_______ Operators shall not recklessly operate the UAV.

_______ Operators shall not operate the UAV while under the influence of drugs or alcohol.

_______ Operations shall only occur during daylight hours, unless the operator has received FAA authorization to operate at night and obtained approval from Risk Management.

_______ Operations shall not occur if the FAA issues any Temporary Flight Restrictions for the airspace over the University.

_______ Operators using a UAV at the University, but not for University business purposes, shall agree to indemnify and HOLD Cornell University, its’ trustees, officers, agents and employees HARMLESS from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to the operation including any act or omission of any third party.

_________________________________________  __________  ______________________________
Operator’s Signature      Date    Printed Name

Please submit this form to the Office of Risk Management and Insurance
341 Pine Tree Rd., Ithaca, NY 14850
Risk_mgmt@cornell.edu
607-254-1575