

REQUEST TO OPERATE UNMANNED AIRCRAFT SYSTEMS



Please complete all sections of this form and submit with a \$100 deposit (Checks made payable to the Georgia World Congress Center Authority) to your Event Services Representative. Incomplete forms will be returned for completion or result in the request not being approved.

Event: _____ Event Dates: _____

First Name: _____ Last Name: _____

Email: _____ Phone Number _____

Address: _____

FAA Pilot's License Number of person who will be operating the UAS on site: _____

Certificate of Authorization number: _____

Make and Model of your unmanned aircraft system: _____

Written Description of your UAS (including the color and the approximate size and weight)

Where on the GWCCA Campus do you seek to operate the UAS? _____

On what dates do you seek to operate the UAS? _____

Who will be operating the UAS? _____

From what specific location will operator be operating the UAS? _____

UAS Number _____

Intended use of UAS _____

Is your UAS equipped with a camera? YES NO

Is your UAS capable of releasing any form of payload? YES NO

Attach a photograph
of your UAS (required)

The Applicant listed below hereby requests authorization to operate an Unmanned Aircraft System ("UAS") as that term is defined in the Georgia World Congress Center Authority's Campus Regulations and Ordinances (Section, 4.29), which UAS shall take off from, operate within or over, and/or land within the Georgia World Congress Center Authority's campus. By signing this form I certify that all information stated herein is true and that I have read the Georgia World Congress Center Authority Regulations and Ordinances, Section 4.29, regarding Unmanned Aircraft Systems.

Signature: _____ Print Name: _____ Date: _____