Request to Operate UAS

Send the completed form to the office of Environmental Health & Safety at ehs@binghamton.edu at least 5 business days prior to intended flight. The more complete the information you provide, the sooner the University can evaluate and reply.

Name of Person Submitting Request: _____

Affiliation with the University: _____

Date Submitted: _____

Name of Remote Pilot in Command: _____

Applicable certificate information: _____

Purpose of flight: _____

Time and Place of Flight(s):

Date: _____

Time: _____ am / pm

Place: _____

Proposed Flight Path: _____

Distance to nearest airport/helipad: _____ miles

Class of airspace: _____

[1] [If flight will be in controlled airspace (Class B, C, D or within the lateral boundaries of the surface area of Class E airspace) supply a copy of the required ATC authorization.]

If intended flight is in the area of School of Pharmacy or the Nursing School in Johnson City pilot in command must contact UHS Security due to proximity to Wilson Hospital Heliport. Contact AJ Manager UHS Security 607-427-5413 at launch and after landing. UHS Security will contact pilot in command to land immediately if helicopter is inbound. Initial here to confirm you understand these instructions.
_____

Is a COA required: ð No   ð Yes   If yes, attach a copy

Aircraft make/model, type: _____

FAA registration certificate number: _____

Take-off weight and maximum speed: _____

Provider or Liability Insurance/Liability Limit   _____ _____

Flight profile/operational limits and safety concerns and mitigations:

_____
_____

_____   _____
Applicant's Signature   Applicant's Printed Name

_____   _____
Parent/Guardian Signature   Parent/Guardian Name
(required if applicant is under the age of 18)

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If applicant differs from Remote Pilot in Command:

_____   _____
Remote Pilot in Command's Signature   Remote Pilot in Command's Printed Name

 Emergency contact information: _____ _____
                                                            _____ _____

Provide cell phone numbers for the Remote Pilot in Command and each designated observer which can be used to reach the Remote Pilot in Command and each designated observer prior to and during the flight(s).

CERTIFICATION

I certify under penalty of perjury that the information provided in this Request to Operate UAS and any attachments are true and correct. I further certify that all authorized UAS operations will be in strict compliance with all applicable federal, state and local rules and regulations, and all applicable University policies including Binghamton University Policy 419 of the Binghamton University Policies and Procedures (https://www.binghamton.edu/operations/policies/policy-419.html).   I am aware of, and hereby take responsibility for, all pre-flight notification requirements and post-flight reporting requirements.

Remote Pilot in Command Initial here   _____

BINGHAMTOM UNIVERSITY USE ONLY
Determination Regarding Request to Operate

The Request to Operate is:

ð   Approved

ð   Rejected

ð   Approved with the following conditions:

ð   Returned for the following additional information:

Notes: _____

_____

_____

EH&S has faxed approved permit to BUPD _____Yes

Date: _____   Signature: _____
                                                                                        EH&S UAS Manager

[1] A flight on Binghamton University grounds is over 5 miles from the Greater Binghamton Airport (BGM), 3.2 miles from Wilson Memorial Hospital (UHS) Helipad. For flights off-grounds, consideration must be given to any nearby airports and heliports; operators are urged to consult B4UFLY for up-to-date information.

"Following University policy, third parties planning to use UAS must provide proof of FAA approval. In addition, operation of a UAS by a third party or hobbyist over University property must be 1.) at the request of a Binghamton University department for academic / research / business use, and/or 2.) under a Revocable Permit which holds the University harmless from any resulting claims or harm to individuals and damage to University property and provides insurance as required by Risk Management and Counsel. In addition to the request and scheduling approval process, please provide copies of the following with the request submission:

a.   a minimum $1M drone/aviation liability Certificate of Insurance (listing State University of New York and Binghamton University as additional insureds)

b.   copy of valid Pilot Airman Certification/License

c.   copy of UAS Certificate of Registration Card from the FAA"