



## Non-Drake Request to Operate Unmanned Aircraft Systems (UAS) Application

**Instructions:** Complete each of the following questions. Incomplete forms will not be considered for approval. Once application is complete submit to [durisk@drake.edu](mailto:durisk@drake.edu).

### Requestor Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone #: \_\_\_\_\_

### Operator of Drone Information

Please submit the following:

- ✓ FAA Certificate Registration
- ✓ Certificate of Drone Insurance
- ✓ Declaration of compliance, if required

Name of Operator: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone #: \_\_\_\_\_

*(In addition to the actual operator, will others be assisting with the operation?)* \_\_\_\_\_

Flight Dates(s) and Time(s): \_\_\_\_\_

Maximum Height the UAS will be flown: \_\_\_\_\_

UAS Make/Model: \_\_\_\_\_ FAA Registration #: \_\_\_\_\_

Remote ID, if required:  Yes  No

Describe location where your flight will take place:

Explain purpose of the flight:

Explain how photos or video footage be used:

### **UAS Application Agreement**

- I agree to read and follow Drake University's [UAS Policy](#)
- I will check flight restrictions prior to flight using the FAA ALOFT app and will follow any guidance by using this app.
- I will follow all applicable FAA air traffic and general operating rules
- I will take adequate measures to prevent capturing images or video that may be private and will submit my videos or photos to the Risk and Insurance Office if asked
- I will notify the Risk and Insurance Office if and when a UAS becomes disabled in an inaccessible location, such as a roof. I will not attempt to retrieve the drone without assistance from a Public Safety or Facilities Planning and Management team member.
- I accept full responsibility for any injury or property damage caused by the UAS. Should such injury or damage occur, I will notify the Risk and Insurance Office to write up a formal report.

### **Release of Liability**

I understand and agree that the operation of a small UAS involves certain risks, to myself and others, including but not limited to: 1) Death, coma, paralysis, head injury, cuts, contusions, broken bones, or other bodily or emotional injury or distress. 2) Property damage to the UAS, and to anything whatsoever on which the UAS may land, or with which the UAS may collide, including but not limited to buildings, power lines, vehicles, mobile equipment, animals, and landscaping. 3) Damages, whether real or alleged, caused by invasion of privacy, harassment, personal injury, defamation of character, slander, libel, advertising injury, or copyright infringement. I understand and agree to accept these risks, and any other risk related to the operation of the UAS is not otherwise specified or anticipated.

In consideration of receiving permission from Drake University to operate a small UAS in the airspace over Drake University property, I hereby, knowingly and voluntarily, for myself, my heirs, executors, administrators, and assigns, agree to indemnify, release, and hold harmless Drake University, the Drake University Board of Trustees, administrators, instructors, volunteers, agents, officers, successors and assigns, from any and all liability associated with the operation of this UAS, and the collection or use of images, video or audio obtained by the UAS during its flight, including but not limited to liability for claims, causes of action, or lawsuits, for bodily injury, personal or advertising injury, wrongful act, property damages, breach of contract, or consequential loss resulting in damages, judgements, settlements, or any monetary loss, including attorney's fees. I understand that this release is intended to

be as broad and inclusive as permitted by laws of the state of Iowa, and agree that if any portion is held invalid, the remainder of this release will continue in full legal force and effect. I further agree that the venue for any legal proceedings shall be in Polk County in the state of Iowa.

I affirm that I am of legal age (age 18 or over) and that I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of Drake University or any of the parties listed above.

Check all that apply:

- I am the UAS Owner
- I am the UAS Operator
- Control the use of images, video and audio that will be collected using the UAS

UAS Operator Signature: \_\_\_\_\_

Date: \_\_\_\_\_

UAS Operator Print Name: \_\_\_\_\_

Drake University Approval: \_\_\_\_\_

Date: \_\_\_\_\_