

DRONE AUTHORISATION FORM

It is illegal to fly any drone at any time within Solent Airports Air Traffic Zone unless you have permission from Solent Airports Operations department.



SECTION 1 TO BE COMPLETED BY APPLICANT ALL REQUIRED FIELDS MUST BE COMPLETED — See page 2 for instructions

1.	Applicant/Pilot Name (& Company Name if applicable)	App/Pilot:
		Company:
2.	Flyer ID & Operator ID (If held)	Flyer ID:
		Operator ID:
3.	Applicant Contact Number	
4.	Applicant Email	
5.	Type of Drone and Weight (kg)	
6.	Maximum height of Drone Above Ground Level (AGL)	
7.	Drone operating location	
8.	Grid Reference (Latitude & Longitude)	N W
9.	Max Operating Radius (m)	
10.	Start Time/Date	
11.	End Time/Date	
12.	Pilot Name ON SITE (If different to applicant)	
13.	Pilot Number ON SITE (If different to applicant)	
14.	Date of Application	

SECTION 2 TO BE COMPLETED BY AIRPORT AUTHORITY

Operational requirements specified to the operator:			
Drone location in WGS84:	Latitude:	Longitude:	
		Yes	No
Is the Drone operating within the ATZ?			
Has the operator/pilot been asked to notify Airport Operations at the start and finish of operation by phone?			
NOTAM action required?			
<u>NOTAM Wording</u>			
NOTAM Reference:	Notam Validity:		
<u>Operational Restrictions</u>			
Finance Informed:	Payment Received:	Invoice Ref.:	
<u>Authorised by</u>	<u>Signature</u>	Date:	
		<u>Permit Number</u>	

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INSTRUCTIONS FOR SECTION 1

1.	Applicant/Pilot Name (& Company Name if applicable)	<i>Name of the person compiling this form and , if applicable, the name of the company conducting the operations.</i>
2.	Flyer ID & Operator ID	<i>The Flyer ID & Operator ID issued by the CAA, if held by the operator.</i>
3.	Applicant Contact Number	<i>Telephone number for the person compiling this form</i>
4.	Applicant Email	<i>Email address for the person compiling this form</i>
5.	Type of Drone Used and Weight (Kg)	<i>Please specify the make/model of drone that will be used with weight in kg</i>
6.	Maximum height of Drone Above Ground Level (AGL)	<i>Please specify the maximum height that the Drone will fly Above Ground Level (ft)</i>
7.	Drone operating location	<i>Please explain where the Drone will be situated via road name, building, stand number etc.</i>
8.	Grid Reference	<i>Please supply a Grid reference of the operating location using latitude and longitude.</i>
9.	Max Operating Radius	<i>Please specify the maximum distance the drone will be flown from the above grid reference, in Metres.</i>
10.	Start Time/Date	<i>Date and time that the Drone will start to be operational (dd/mm/yyyy) (hh:mm)</i>
11.	End Time/Date	<i>Date and time that the Drone will cease to be operational (dd/mm/yyyy) (hh:mm)</i>
12.	Pilot Name ON SITE (If different to applicant)	<i>Name of the pilot responsible if this is not the applicant</i>
13.	Pilot Number ON SITE (If different to applicant)	<i>Telephone number of the Pilot responsible if this is not the applicant</i>
14.	Date of Application	<i>Date that the application is submitted</i>

If there are any questions regarding the operation of Drones especially those within the Airports Air Traffic Zone, then please contact Operations on 01329 82 4748 or email controltower@solentairport.co.uk.

On completion of this form, please send to controltower@solentairport.co.uk and cc airportmanager@solentairport.co.uk.

No Drones will be permitted to operate without authorisation from the Airport General Manager.

Alternatively, hand the form in to the Operations Department at the following address:

Solent Airport,
Control Tower,
Lee-on-the Solent,
Hampshire,
PO13 9FZ

SECTION 2 IS FOR THE AIRPORT AUTHORITY TO COMPLETE.

DRONE FLIGHTS MUST NOT COMMENCE PRIOR TO THE APPLICANT RECEIVING A SIGNED COPY OF THIS FORM FROM THE AIRPORT AUTHORITY.