



Unmanned Aerial Vehicle (UAV) Registration Form

Agency Information

Public Agency Name: _____ Public Agency Address: _____
 Point of Contact Name: _____
 Title: _____
 E-mail Address: _____ Telephone Number: _____

Does Agency have an approved Certificate of Authorization (COA) issued by FAA? Yes No
Attach copy of COA

UAV Operations Information

Description of UAV use and capabilities:

Number of UAV Operators: _____ FAA Registration Number: _____

Name and Contact Information for each Operator (attach additional sheets as necessary):

Operator Name: _____	Operator Name: _____
Title: _____	Title: _____
E-mail Address: _____	E-mail Address: _____
Telephone Number: _____	Telephone Number: _____
Street Address: _____	Street Address: _____

Operator Name: _____	Operator Name: _____
Title: _____	Title: _____
E-mail Address: _____	E-mail Address: _____
Telephone Number: _____	Telephone Number: _____
Street Address: _____	Street Address: _____

UAV Identifying Information

General Description:

Aircraft Builder's Name: _____ Aircraft Model Designation: _____
 Year Manufactured: _____ Aircraft Serial Number: _____
 Color(s): _____ Wingspan: _____

Photo attached (required)