



Application for Operation of a Small Unmanned Aircraft (SUA) in Cayman Islands Airspace

Air Navigation (Overseas Territories Order 2013 Articles 73, 126 & 127 references.

This form can be filled in on screen (preferred method) then printed, signed and submitted as instructed. Alternatively, print, then complete in BLOCK CAPITALS using black or dark blue ink

Please read the attached Guidance Notes before completing this form.

FALSE REPRESENTATION STATEMENT		
It is an offence under Article 173 of the Air Navigation (Overseas Territories) Order 2013 to make, with intent to deceive, any false representation for the purpose of procuring the grant, issue, renewal or variation of any certificate, licence, approval, permission or other document. This offence is punishable on summary conviction by a fine up to KYD 6,800, and on conviction on indictment to a fine or imprisonment for a term not exceeding two years or both.		
1. TYPE OF APPLICATION: (tick applicable box)		
Initial Issue of:	Permission for Aerial Work for (SUA)	SUSA Permission
Renewal of:	Permission for Aerial Work for (SUA)	SUSA Permission
Variation to:	Permission for Aerial Work for (SUA)	SUSA Permission
Previous Permission (if applicable) Reference:		Expiry date:

This application will be considered in respect of and, if appropriate, granted or issued to, the applicant(s) named below.

2. APPLICANT DETAILS (The Applicant is the person responsible for payment of CAACI charges)		
a) Individual (including sole traders and partnerships)		
Title:	Forename:	Surname:
Address:		
Country	Postcode:	
Telephone:	Fax:	
E-mail:	Mobile Telephone:	
Trading Name: (if applicable)		
Website address:		
In the case of a partnership, please complete details of all partners. Continued on a separate sheet		

This application will be considered in respect of and, if appropriate, granted to, the Company Name as registered under the Company Number provided on this form.

b) A Company		
Registered Company Name (in full):		
Registered Company Number:		
Country of Company Registration:		
Registered Office Address:		
.....	Postcode:	
Telephone:	Fax:	
E-mail:		
Trading Name: (if applicable)		
Trading Address (primary site):		
Country	Postcode:	
Website address:		

Authorised Representative of Company

This application is to be signed by either a Director or Company Secretary or a person authorised by the Board to act on behalf of the Company.

Title: Forename: Surname:
 Position in Company:
 Telephone No: E-mail:

If you are not a Director or Company Secretary and have been authorised to sign the application form on behalf of the Company, proof of that authority must be provided with the completed application form.

3. ADDRESS FOR CORRESPONDENCE (if different from above)

Postal Address (if different from above):
 Postcode:

4. SUA/SUSA REMOTE PILOT(S)

Remote Pilot's Name:
 Remote Pilot's Flying Experience*: *
 Remote Pilot's Qualification Held; BNUC™ BNUC-S™ Other:
 Additional Remote Pilot's Name (if applicable):
 (* continue in Section 8 if necessary)

5. SUA/SUSA

SUA/ SUSA	First SUA/ SUSA	Second SUA/ SUSA
SUA / SUSA Name:
Manufacturer:
Type:
Registration / Serial Number:.....
Wing/ Rotorspan (m):
Overall Diameter (multi-rotors only) (m):.....
Length (m):
Mass (kg):
Command and Control Frequency:.....
Number of Engines:
Engine Type:
Piston: (CC)(CC)
Turbine:(Thrust) (Thrust)
Electric: (Size) (Size)

Additional SUA/SUSA - Continue on a separate sheet.

6. OPERATIONS MANUAL

Version Dated.....

7. FLYING ACTIVITY DETAILS

Location of Flying Activity: CI Or Specific Location:

Latitude & Longitude coordinates:

All flights must be conducted within Visual Line of Sight (VLoS) defined as within 400ft vertically and 500ft horizontally of the operator. Flights Beyond Visual Line of Sight (BVLOS) are not permitted within the Cayman Islands.

- Type of Flying:
- Survey (Forestry, Agriculture, Construction, Infrastructure)
 - Photography
 - Filming and Media
 - Research and Development
 - Security / Emergency Services
 - Other.....

(continue in Section 8 below if necessary)

8. ADDITIONAL INFORMATION

(continue separately if necessary, following the submission instructions given in Section 12)

9. DECLARATION

I, the applicant, agree that the SUA/SUSA will be operated in accordance with the Air Navigation (Overseas Territories) Order 2013 as amended. I hereby declare that to the best of my knowledge the particulars entered on this application are accurate

Signature: Date:

I have enclosed the following supporting documentation:

Photograph of SUA / SUSA (Note 7)

Operations Manual

Copy of Remote Pilot Qualification

Copy of Insurance Details (where applicable)

10. CHARGES

The charge(s) required as calculated in accordance with the CAACI Air Navigation (fees) Regulations 2010, as amended, to be paid on application are enclosed herewith.

NB: This application will not be processed until the applicable charges have been received.

Total charges included are: KYD

Where charges are to be paid other than by the applicant, please enter the name of the person/company who is paying:

.....

IMPORTANT NOTES:

Additional Charges: Where the cost of the CAACI investigations exceeds the application charge payable, the applicant shall pay additional charges to recover those excess costs incurred by the CAACI in accordance with the Scheme of Charges.

Overseas Visits: If a Member or employee of the CAACI is required to travel overseas in respect of this application you are advised to read the CAACI Scheme of Charges to which this application relates and the section entitled 'Additional charge where functions are performed abroad'. All expenses incurred in pursuance of this application by virtue of travelling overseas will be payable by the applicant on demand.

Withdrawal/Cancellation of Application: In the event that this application is withdrawn or cancelled by the applicant, the application fee less the cost of any work carried out by the CAACI to that date, may be refunded.

11. SUBMISSION INSTRUCTIONS

Return the completed form, associated documents and payment, to arrive at least 28 days before any operations are due to commence, 'to:

Post/ Fax:

Director of Air Safety Regulation
Civil Aviation Authority
P.O. BOX 10277
Unit 2 Cayman Grand Harbour
Grand Cayman KY1-1003 Cayman
Islands

E-mail:

Civil.aviation@caacayman.com

Tel: 345-949-7811 ext 230

Fax: 345-949-0761

12. NOTES

1. Images must meet the following criteria:

- The photographs must be in JPEG format or on paper.
- The image file must be a maximum of 1 MB.
- The image must be a maximum of 1,200 pixels in width.
- The UA must not have been altered since the photograph was taken.
- The photograph must have been taken within the previous 12 months and not modified.

2. Insurance needs to comply with Regulation (EC) No. 785/2004.

3. Beyond VLoS (above 400 ft and/or beyond 500 m of the operator) may require a separate application.