



## Application for an Operating License from a Model Club / Association

Application for a permit for UAS operations within the framework of a model flight club or a model flight association in accordance with Art. 16 of the Implementing Regulation (EU) 2019/947 on the rules and procedures for the operation of unmanned aircraft



Please fill in the application form and send it signed together with the enclosures by e-mail to [info@drones.gov.cy](mailto:info@drones.gov.cy) or by mail to: Department of Civil Aviation, Pindarou 27, 1429, Nicosia, Cyprus

### 1 Applicant Information

Name of Model Aircraft Club / Model Aircraft Association

Street address

Postcode

Municipality

Telephone number

e-mail address

Website address

Registration number (optional)

### 2 Authorized Representative Contact Details

Full Name

Street address

Postcode

Municipality

Telephone number

email address

### 3 Information on the requested flight location

Description (e.g. owned/leased model airfield, approved sports facility etc)

Street address

Postcode

Municipality

Telephone number

email address

Coordinates of the flight area where model flying will take place (corner points) in degrees (°) minutes and seconds

Altitude (MSL) in meters

Airspace class

Model flight obstacles (if available, specify distance and height)

Distance from the outer edge of the flight area to any residential, commercial, industrial and recreational areas in meters

Safety measures to protect uninvolved people and / or unauthorised access (provide evidence)



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### 4 Information on the requested operation

Requested flight altitude in m (AGL)	Max. characteristic dimensions and MTOM of aircraft models used
<input type="text"/>	<input type="text"/>

Operating hours	Flight Model types
<input type="text"/>	<input type="text"/>

List of requested deviations from "Open Category" (flights above 120m, BVLOS, dropping of goods etc)

Minimum Competency requirements for remote pilots

Minimum age of remote pilots	Maximum permissible sound level at a distance of 25m in dBA
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### 5 Required Documentation

- Copy of the official National ID of the authorized representative
- Facilities Lease agreement or extract of the Land Registry
- Insurance policy agreement
- Map of the model airfield with scale (Location including marked flight area, spectator areas, barriers, etc.)
- Evidence of the procedures, organizational structures and management systems that ensure compliance with the requirements of Article 16 (2) (b) of Regulation (EU) 2019/947
- DCAC Declaration of Compliance document

I, the undersigned, hereby declare that UAS operations will comply with:

- All applicable Union and Member State regulations relating to privacy, data protection, liability, insurance, security and environmental protection;
- the applicable requirements of Implementing Regulation (EU) 2019/947; and
- the requirements and conditions defined in the operating license issued by the competent authority are complied with.

### 6 Data Protection

Personal data included in this declaration is processed by the competent authority pursuant to Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation). It will be processed for the purposes of the performance, management and follow up of the oversight activities according to Commission Implementing Regulation (EU) 2019/947. If you require further information concerning the processing of your personal data or you wish to exercise your rights (e. g. to access or rectify any inaccurate or incomplete data), please refer to the contact point of the competent authority either by e-mail address to [mpsilogenis@dca.mcw.gov.cy](mailto:mpsilogenis@dca.mcw.gov.cy) or telephone: (+357) 22404197. The applicant has the right to make a complaint regarding the processing of the personal data at any time to the national Data Protection Supervisory Authority.

Full Name

Date

Signature