



APPLICATION FOR A DRONE PERMIT

Applicant: _____ Telephone: _____

Remote Pilot Certificate # _____

Address: _____ City: _____ ST: _____ Zip: _____

Email Address: _____

I am aware of the City of Deadwood Drone Ordinance by: _____ (Name of company owner/operator)

Drone Liability Insurance

Insurance Provider (Name of Business) _____

Policy Number: _____ Exp. Date: _____

Drone Mission Information

Date: _____ Duration: _____

Location(s): _____

Nature or Purpose: _____

I CERTIFY UNDER PENALTY OF PERJURY THAT THE STATEMENTS I HAVE MADE ON THIS FORM ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT.

Remote Pilot Signature: _____ Date: _____

CUT HERE-----

Upon review of the applicant information provided to the City of Deadwood in regards to the operation of a remote control Drone within the City limits of Deadwood. The application to operate a drone within the city limits of Deadwood has been APPROVED / DENIED. This permit is valid for _____ dates at _____ location.

Authorized by: _____ Date: _____