



# Civil Aviation Authority of Sri Lanka

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 Receipt No.....  
 Fees paid on .....

Form No: CAA/AS/017

## Application for Operation of Pilotless Aircraft

**(Unmanned Aerial Vehicles Unmanned Aircraft Systems /Remotely Piloted Aircraft/Drones)**

(To be submitted to the Director General of Civil Aviation via Postal address ; Civil Aviation Authority of Sri Lanka, No 04, Hunupitiya Road, Colombo 02 , Fax +94 11 2304641 or email scaiais@caa.lk , aiso1@caa.lk , hosans@caa.lk )

<To be filled in tick where applicable>

a	Name of the Operator : (approved person/approved organization) i. Postal Address :  ii. Telephone/ Fax : iii. e-mail :																															
b	i. Registration of Pilotless Aircraft : (attach copy of certificate) ii. Registration of Operator of Pilotless Aircraft : (attach copy of certificate)	Yes <input type="radio"/>	No <input type="radio"/>	Reg No ..... .....																												
c	i. Drone Specifications including Gross Mass (Weight) of the drone :  ii. Whether any Data retrieval tools such as aerial photographic cameras are fitted?	Yes <input type="radio"/>	No <input type="radio"/>																													
d	Purpose of operation :	Leisure <input type="radio"/>	Education <input type="radio"/>																													
		Commercial <input type="radio"/>	Other.....																													
e	Date of Operation :																															
f	Place of Operation :																															
g	If request is made for more than one operation, Please fill-up the following table :																															
		<table border="1"> <thead> <tr> <th></th> <th>Place of Operation</th> <th>Date</th> <th>Remarks</th> </tr> </thead> <tbody> <tr> <td>i</td> <td></td> <td></td> <td></td> </tr> <tr> <td>ii</td> <td></td> <td></td> <td></td> </tr> <tr> <td>lii</td> <td></td> <td></td> <td></td> </tr> <tr> <td>lv</td> <td></td> <td></td> <td></td> </tr> <tr> <td>v</td> <td></td> <td></td> <td></td> </tr> <tr> <td>vi</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Place of Operation	Date	Remarks	i				ii				lii				lv				v				vi				
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h	Security clearance from the Ministry of Defence (MOD) / Office of the Chief of Defence Staff (OCDS) attached :	Yes No	<input type="radio"/> <input type="radio"/>																													
i	Applicable Payment : (Pink colour payment receipt attached)	Yes No	<input type="radio"/> <input type="radio"/>																													
j	Other supportive Documents/clearances if applicable : i Archeology Department ii Filming Cooperation iii Forest Department iv .....	Yes <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	No <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>	N/A <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>																												
k	Notification to Local police in charge of the area	Yes No	<input type="radio"/> <input type="radio"/>																													

Date : .....

Signature of the Applicant: .....