|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Data protection:** Personal data included in this application is processed by the competent authority pursuant to [Regulation (EU) 2016/679](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32016R0679&amp;qid=1610371712444) 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](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A31995L0046&amp;qid=1610371877615) (General Data Protection Regulation). Personal data will be processed for the purposes of the performance, management and follow-up of the application by the competent authority in accordance with Articles 12 and 13 of [Regulation (EU) 2019/947](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32019R0947&qid=1625433223089) of 24 May 2019 on the rules and procedures for the operation of unmanned aircraft.  If the applicant requires further information concerning the processing of their personal data or exercising their rights (e.g. to access or rectify any inaccurate or incomplete data), they should refer to the point of contact of their competent authority.  The applicant has the right to file a complaint regarding the processing of their personal data at any time to the national data protection supervisory authority. | | | | | | |
|  | | | | | | | |
| New application | | | Amendment to confirmation of acceptability NNN-CBO-xxxxx/yyy | | | | |
| **1. UAS operator and approval data** | | | | | | | |
| * 1. **UAS operator registration number** | | |  | | | | |
| * 1. **UAS operator name** | | |  | | | | |
| **1.3  Operational point of contact**  Name  Telephone  Email | | |  | | | | |
| **1.4 Type of approval** | | | **1.4.1 Operational authorisation / LUC number issued by the MS of registration** | | | **1.4.2 Expiry date** | |
| Operational authorisation  LUC | | |  | | | DD/MM/YYYY | |
| **2. Locations** | | | | | | | |
| **2.1 Expected date of start of the operation** | | | DD/MM/YYYY | | **2.2 Expected end date** | | DD/MM/YYYY |
| **2.3 Intended location(s) for the operation** | | |  | | | | |
| **2.4 Operational volume height limit** | | | \_\_\_\_\_ m (\_\_\_\_\_\_ ft) | | | | |
| **2.5 Airspace of the intended operation** | | | A B C D E F G U-space Other, specify | | | | |
| **2.6. Applicable local conditions** | | |  | | | | |
| **3. Update of the application of the mitigation means and local conditions** | | | | | | | |
| **3.1 Updated ‘Location of UAS operation’ chapter of the operations manual (OM), if applicable** | | | |  | | | |
| **3.2 Compliance evidence for updated mitigation measures and local conditions, if applicable** | | | |  | | | |
| **4. Remarks** | | | | | | | |
|  | | | | | | | |
| **5. Declaration of compliance** | | | | | | | |
| *I, the undersigned, hereby request the confirmation of acceptability of the cross-border UAS operation in xxx (name of the Member State) and declare that the UAS operation will comply with:*   * *any national rules related to privacy, data protection, liability, insurance, security, and environmental protection;* * *the applicable requirements of Regulation (EU) 2019/947; and* * *the limitations and conditions defined in the operational authorisation provided by the competent authority of the Member State of registration and in the confirmation of acceptability of the cross-border UAS operation provided by the competent authority of the Member State of operation.*   *Moreover, I declare that the related insurance coverage, if applicable, will be in place at the start date of the UAS operation.* | | | | | | | |
| **Date**  DD/MM/YYYY | | **Signature and stamp** | | | | | |

Instructions for filling in the application form

If the application relates to an amendment to a confirmation of acceptability for a cross-border UAS operation, please indicate the number of the confirmation of acceptability and fill out in red the fields that are amended compared to the last confirmation of acceptability.

1.1 UAS operator registration number in accordance with Article 14 of the UAS Regulation.

1.2 UAS operator’s name as declared during the registration process.

1.3 Contact details of the person responsible for the operation, in charge to answer possible operational questions raised by the competent authority.

1.4 Select one of the two options.

1.4.1 Number of the operational authorisation or of the LUC terms of approval issued by the competent authority of the MS of registration. The referenced document should be attached to the application.

1.4.2 Expiry date of the document listed in 1.4.2. If the validity is unlimited, indicate ‘Unlimited’.

2.1 Date on which the UAS operator expects to start the operation.

2.2 Date on which the UAS operator expects to end the operation. The UAS operator may ask for an unlimited duration; in this case, indicate ‘Unlimited’.

2.3 Location(s) in the MS of operation where the UAS operator intends to conduct the UAS operation. The identification of the location(s) should contain the full operational volume and ground risk buffer (the red line in Figure 1). The location(s) should be expressed in the same way as in the operational authorisation (e.g. ‘generic’ or ‘precise’ (refer to GM2 UAS.SPEC.030(2)).

Operational area

Ground risk buffer

Adjacent area

Adjacent area

**Figure 1 — Operational area and ground risk buffer**

2.4 Insert the upper limit, expressed in metres and feet in parentheses, of the contingency volume (adding the air risk buffer, if applicable) using the AGL reference when the upper limit is below 150 m (492 ft) or use the MSL reference when the upper limit is above 150 m (492 ft).

2.5 Select one or more of the nine options. Select ‘other’ in case none of the previous is applicable (i.e. military areas).

2.6 List the local conditions applicable to the location(s) defined in point 2.3 (e.g. special frequency to be avoided, national insurance regulation, etc.). If needed, a separate document may be attached.

3.1 If operational procedures need to be updated to take into account the new locations or the local conditions, indicate either the identification and revision number of the OM or the document providing an extract of the OM including the chapter describing the operational procedures and the relevant information, amended by the UAS operator. This document should be attached to the application. Otherwise indicate ‘n/a’.

3.2 If procedures are updated to address the characteristics of the new location or to meet the local conditions, indicate the compliance evidence file identification and revision number. This document should be attached to the application. Otherwise indicate ‘n/a’.

4 Free-text field for the addition of any relevant remark.

*Note:* In case of LUC, point 3 should not be filled in if according to the LUC terms of approval the organisation has the privilege to extend the operational authorisation to different locations