

Drone Use Application-Appendix A (Subject to any FAA, compliance mandates or updates)

Who Is Requesting The Drone?	Name of Requestor: _____ Department (if applicable): _____ Name of Supervisor (if applicable): _____ Email Address: _____ Business Phone: _____ Mobile Phone: _____	<u>Relationship to Eastern University:</u> <input type="checkbox"/> Undergrad Student <input type="checkbox"/> Conference <input type="checkbox"/> Grad Student <input type="checkbox"/> Vendor <input type="checkbox"/> Faculty <input type="checkbox"/> Contractor <input type="checkbox"/> Staff <input type="checkbox"/> Visitor/Guest <input type="checkbox"/> Other _____
Who Will Be Operating The Drone:	Name of Operator: _____ Company Name (if applicable): _____ Company Address: _____ _____ Email Address: _____ Business Phone: _____ Mobile Phone: _____	Federal Aviation Administration Small UAS Certificate Registration Certificate Holder: _____ Certificate#: _____ _____ Issued: _____ Expires: _____
What Is The Purpose Of The Flight?	Please Explain:	
How Will The Photos Or Video Footage Be Used?	Please Explain: Will the photos or video be posted on the internet or on social media? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, which sites: Will the drone be used to capture recognizable images of University signs and campus buildings? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, Institutional Advancement must approve this drone usage request. Will the drone be used to capture recognizable images of individuals? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, how will this personal information be protected (check all that apply)? <input type="checkbox"/> The faces of individual that are recognizable will be blurred. <input type="checkbox"/> The individual that are recognizable will sign a photo/video release. <input type="checkbox"/> The drone will only capture images or video of large groups at a distance and resolution where individual recognition is not easily accomplished. <input type="checkbox"/> Other (please explain): _____ Will signs be posted to inform bystanders that their images may be recorded by drones? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, sign must inform bystanders about who to contact if there are concerns about how the video footage will be used?	
When Will The Drone Be Flying?	Flight Date: _____ Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM Flight Date: _____ Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	
Drone & Camera Information	Model of Drone: _____ Will still photos be taken using the drone? <input type="checkbox"/> Yes <input type="checkbox"/> No Drone Serial #: _____ If yes, what image resolution will be used? _____ Model of Camera: _____ Will video be taken using the drone: <input type="checkbox"/> Yes <input type="checkbox"/> No Combined weight of Drone & Camera: _____ If yes, what video resolution will be used? _____	
Map	Using the campus map in this document or one the operator provides, please detail the perimeter boundary where the drone will be flying.	

CAMPUS CONTACTS FOR ASSISTANCE:
 Public Safety at (860)465-5310 or (860)465-5313
 Institutional Advancement at (860)465-5267

MAP KEY

F - FACULTY
 R - RESIDENT
 S - STAFF
 C - COMMUTER

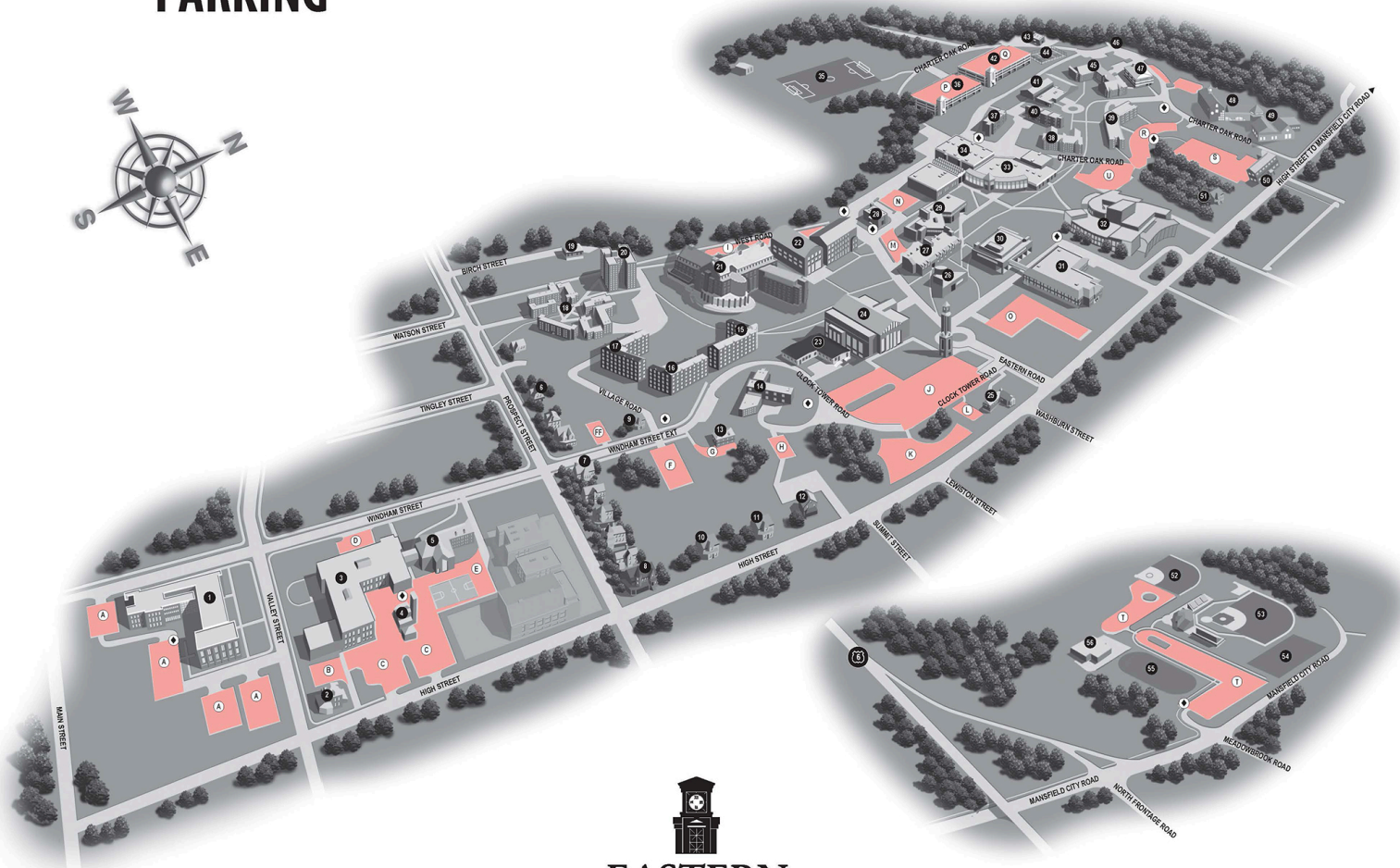
● SHUTTLE STOPS
 A Noble - R
 B Beckert - F/S

C Shafer (High Street) - R
 D Shafer (Windham Street) - R
 E Burr - R
 FF Laurel - R
 F Multifaith Center (Lower lot) - R
 G Multifaith Center (Upper lot)
 H Winthrop (Upper lot) - R
 I Webb - F/S

J Library - F/S/C
 K Parent's Park - R
 L Admissions
 M Goddard/Communication - F/S
 N Sports Center - F/S
 O Gelsi Young - F/S
 P Shakespeare Garage
 1, 3, 4 - F/S/R/C; 2 - F/S/C Only

Q Cervantes Garage
 1, 2, 3, 4 - F/S/R/C
 R Occum - R
 S Public Safety - F/S/C
 T Mansfield Athletic Complex - F/S/R/C
 U Fine Arts Center - F/S

PARKING



**EASTERN
 CONNECTICUT
 STATE UNIVERSITY**

BUILDINGS

25 Admissions Building	12 Counseling and Psychological Services	51 Institute for Sustainable Energy	3 Shafer Hall
46 Arboretum	40 Crandall Hall	54 Intramurals Field	26 Shakespeare Garage
56 Athletic Locker Facility	23 Eastern Hall	24 J. Eugene Smith Library	52 Softball Field
53 Baseball Field	47 Facilities Management, Planning and Maintenance	13 Knight House Multifaith Center	34 Sports Center
2 Beckert Hall	43 Facilities Warehouse	16 Laurel Hall	33 Student Center
37 Burnap Hall	32 Fine Arts Instructional Center	18 Low Rise Apartments	44 Tennis Courts
5 Burr Hall	31 Gelsi Young Hall	45 Mead Hall	55 Track/Turf Field
7 Center for Community Engagement	27 Goddard Hall	35 Nevers Field	10 University Honors House
48 Center for Early Childhood Education	8 Grant House	38 Njejadlik Hall	22 Webb Hall
42 Cervantes Garage	19 Health & Accessibility Services	1 Noble Hall	26 Wickware Planetarium
49 Child and Family Development Resource Center	28 Heating Plant, North	17 Nutmeg Hall	9 160 Windham Street Extension
29 Communication Building	4 Heating Plant, South	39 Occum Hall	14 Winthrop Hall
15 Constitution Hall	20 High Rise Apartments	6 393 Prospect Street	30 Wood Support Services Center
11 Counseling and Psychological Services	41 Hurley Hall/Dining Services	50 Public Safety	
		21 Science Building	

Drone Use Conditional Approval Agreement-Appendix B

Drone Use Requestor or Operator Responsibilities	<p>Check All that Apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> I agree to read and follow the Eastern Connecticut State University Campus Drone Procedures and Policy. <input type="checkbox"/> I certify that the drone used for this project is registered with the FAA on the Unmanned Aircraft Systems (UAS) Registration website. <p>For drones used commercially, I certify that the drone operator holds a Remote Pilot Airman Certificate (14 CFR Part 107) with a Small Unmanned Aircraft Systems (UAS) rating.</p> <ul style="list-style-type: none"> <input type="checkbox"/> I promise that I will check flight restrictions prior to flight using an approved FAA app (e.g.FAA B4UFLY), and will follow any guidance given by this app, including the standing requirement to contact airports within a 5 mile radius to notify the airport operator and the air traffic controller tower (if one is present) of my flight. <input type="checkbox"/> I promise to follow all applicable FAA air traffic and general operating rules listed in 14 CFR Subchapter F, including the Small Unmanned Aircraft Rule(14 CFR Part 107). <input type="checkbox"/> I promise to follow all Eastern University specific rules for the usage of drones as listed in this procedures document. I agree to take adequate measures to prevent capturing images or video that may be private, and to follow the procedures listed in this policy should the recording of such images or video occur. <input type="checkbox"/> I agree to take adequate measures to prevent the disclosure of personal information without consent including: Blurring the faces of individual that are recognizable. Obtaining a signed photo/video release for each individual that is recognizable and delivering copies of these signed releases to Eastern Public Safety Department. (Appendix D) <input type="checkbox"/> Capturing images or video only of large groups at a distance and resolution where individual recognition is not easily accomplished. <input type="checkbox"/> Other (Please Explain): <input type="checkbox"/> I agree to provide a certificate of insurance that meets the insurance requirements listed in this policy. Should personal injury, property damage, or any other liability claim occur I agree to allow Eastern Connecticut State University unhindered access to this policy. (Appendix C) <input type="checkbox"/> I agree to obtain a Release of Liability (Appendix E) from each drone owner, drone operator, and person who has control over the use of images, video and audio that will be collected using the drone. I will deliver a copy of these releases to Eastern Connecticut State University Public Safety Department via email or hard copy. <input type="checkbox"/> I agree to submit my images, video and audio collected using the drone to Eastern Public Safety for review. <input type="checkbox"/> I agree to address individual concerns that may be raised by any person who contacts Eastern Public Safety concerning the permitted drone use and images or video captured during the flight, and to delete or blur images or video as requested by individuals captured therein. <input type="checkbox"/> I agree to notify Eastern's Public Safety and/or Facilities Maintenance if and when the drone becomes disabled in an inaccessible location such as a roof. I will not attempt to retrieve the drone without assistance from Public Safety and/or Facilities Maintenance. I understand and agree that if Facilities Maintenance needs to use special equipment to retrieve the drone this will be at my expense. <input type="checkbox"/> I agree to accept full responsibility for any injury or property damage caused by the drone. Should such injury or damage occur, I will submit to a follow-up investigation by Eastern Public Safety and/or any authority having jurisdiction. <input type="checkbox"/> Additional Agreements: Contact Eastern Connecticut State University Public Safety at time when damage or injury is caused so that a formal Incident Report is filed.
Eastern CT State Univ. Public Safety Notification/Responsibility	<p>Check All that Apply:</p> <ul style="list-style-type: none"> <input type="checkbox"/> I agree to inform or have another official inform the campus community via e-mail where and when the drone will be flying, who is operating the drone, the purpose of its flight, and how the captured images or video will be used. <input type="checkbox"/> I agree to field incoming questions and concerns pertaining to the permitted drone use and images or video captured during the flight. Concerns that cannot be adequately addressed by Eastern Public Safety will be relayed to drone flight permit holder or key department contact for this contracted activity. <input type="checkbox"/> I agree to obtain additional comments from the departments of Facilities, Public Safety, Institutional Advancement and/or University Relations to consider in determining approval for the flight to occur. Additional Agreements: A copy of the Drone application will be provided for review and comment to key department contacts of those departments listed.

CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING!

Printed Name of Requestor: _____ Mobile Phone: _____

Email Address: _____ Other Phone: _____

Signature: _____ Date Signed: _____

Name of Eastern Public Safety Approver: _____ Office Phone: _____

Signature of Eastern Public Safety Approver: _____

Insurance--Certificate of insurance Requirements-Appendix C

Eastern Connecticut State University UAS (Drones) Certificate of Insurance Instructions/Form Requirements: *Fill out the request form and email or fax form to your insurance carrier.*

Waiver of Insurance Request

I am currently a Full Time University Employee in any capacity

The drone being used is the property of the University

The drone use in this instance is directly related to a University classroom or other educational experience

The drone use has been requested by a University senior administrator or public safety department

Eastern Connecticut State University requires a Certificate of Insurance from insured with the following limits:

Minimum coverage limits as pertains to the service are:

INSURED NAME

- General Liability: \$1 million per occurrence and \$2 million aggregate, must not exclude UAS (Drones).
- Workers Compensation: \$100,000 per accident per employees/\$500,000 policy limit (if applicable)
- Auto: \$1 million combined single limit (if applicable)
- Aviation/Drone: \$1 million per occurrence

Additional Insured Language: "Eastern Connecticut State University must be named as additional insured on the general liability coverage." Insurance is primary without right of contribution from any other insurance available to Eastern Connecticut State University.

CERTIFICATE: Certificate should read:
Eastern Connecticut State University
83 Windham St.
Willimantic, CT 06226

Fax, email or mail certificate to:

[Jeffrey A. Garewski](mailto:garewskij@easternct.edu)
garewskij@easternct.edu
Eastern CT State University
Public Safety Department
83 Windham St.
Willimantic, CT 06226

or

[Melissa Colonese](mailto:colonesem@easternct.edu)
colonesem@easternct.edu

FAX: (860) 465-5597

Eastern Connecticut State University
Small Unmanned Aircraft Systems (UAS) Photo, Video and/or Audio Release-Appendix D

I hereby grant the drone operator permission to photograph, video record, audio record, me and/or my minor child(ren) for the project described below. I additionally grant Eastern Connecticut State University and the drone image, video, or audio, intellectual property holder permission to reproduce and use these images and recordings with or without the individual names being disclosed. I understand that the images and recordings may be used in promotional and advertising materials, and in internal and external communications at the sole professional discretion of Eastern Connecticut State University and the intellectual property holder which includes distribution through prints, publications, website postings, social media, email, digital storage, and any other storage, use or distribution deemed appropriate, including use in promotional materials and advertising, by Eastern Connecticut Sate University and the intellectual property holder.

I hereby forever release, hold harmless and covenant not to sue Eastern Connecticut State University and the intellectual property holder, from any and all liability stemming from the use of my image or recording, and/or the image or recording of my minor child(ren) in accordance with this agreement. This release is so granted without any compensation payable to the undersigned.

Name of the drone operator: _____ Phone #: _____

Name of the intellectual property holder: _____ Phone#: _____

Description of Project:

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CAUTION; READ THIS DOCUMENT CAREFULLY BEFORE SIGNING!

Participant's Name (print)	Participant's Signature	Date Signed

Parent, Adoptive Parent or Legal Guardian of Participant (if participant is under the age of 18)		
Name (print)	Signature	Date Signed

Release of Liability for Party Who Owns or Operates Unmanned Aircraft Systems (UAS) Operated in Eastern Connecticut State University Airspace-Appendix E

Instructions:

The following release of liability must be signed by each party who owns, or operates small Unmanned Aircraft Systems (UAS) "Drones" on Eastern Connecticut State University property or in Eastern Connecticut State University airspace, or who controls the collection, use, publication or distribution of images, video, or audio obtained through the use of these devices. Employees of Eastern University who hire drone services, or who operate college owned drones for official college business functions, are not required to sign this release. All other parties who have substantial control over drone operation or the images, video or audio collected thereby must sign this release as a prerequisite to drone operation on the Eastern University campus.

Release of Liability:

I understand and agree that the operation of a small Unmanned Aircraft System (UAS) involves certain risks, to myself and others, including but not limited to: 1). Death, coma, paralysis, head injury, cuts, contusions, broken bones, or other bodily or emotional injury or distress. 2). Property damage to the UAS, and to anything whatsoever on which the UAS may land, or with which the UAS may collide, including but not limited to buildings, power lines, vehicles, mobile equipment, animals, and landscaping. 3). Damages, whether real or alleged, caused by invasion of privacy, harassment, personal injury, defamation of character, slander, liable, advertising injury, or copyright infringement. I understand and agree to accept these risks, and any other risk related to the operation of the UAS that is not otherwise specified or anticipated.

In consideration of receiving permission from Eastern Connecticut State University to operate a small Unmanned Aircraft System (UAS) in the airspace over Eastern Connecticut State University property, I hereby, knowingly and voluntarily, for myself, my heirs, executors, administrators, and assigns, agree to indemnify, release, and hold harmless Eastern Connecticut State University, the State of CT, Eastern Connecticut State University administrators, instructors, volunteers, agents, officers, successors and assigns, from any and all liability associated with the operation of this UAS, and the collection or use of images, video or audio obtained by the UAS during its flight, including but not limited to liability for claims, causes of action, or lawsuits, for bodily injury, personal or advertising injury, wrongful act, property damage, breach of contract, or consequential loss resulting in damages, judgments, settlements, or any monetary loss, including attorney's fees. I understand that this release is intended to be as broad and inclusive as permitted by the laws of the State of Connecticut, and agree that if any portion is held invalid, the remainder of this release will continue in full legal force and effect.

I affirm that I am of legal age (age 18 or over) and that I have read this form and fully understand that by signing this form, I am giving up legal rights and/or remedies which may be available to me for the ordinary negligence of Eastern Connecticut State University or any of the parties listed above.

Check all that apply:

- I am the Drone Owner
- I am the Drone Operator
- I control the use of images, video and audio that will be collected using the drone.

CAUTION: READ THIS DOCUMENT CAREFULLY BEFORE SIGNING!

Printed Name: _____ Mobile Phone: _____

Email Address: _____ Other Phone: _____

Signature: _____ Date Signed _____

Eastern Connecticut State University Small Unmanned Aircraft Systems (UAS) Flight Permit-Appendix F

The following permit holder has permission from the Eastern Connecticut State University Department of Public Safety to operate an Unmanned Aircraft Systems (UAS) "Drone" at the following locations and times:

Eastern University Permit #: _____ Date Issued: _____ Expires: _____

Permit Holder Name: _____

FAA UAS Certificate #: _____ Date Issued: _____ Expires: _____

FAA UAS Certificate Holder Name: _____

Location of Flight: _____ Flight Date: _____ Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
Location of Flight: _____ Flight Date: _____ Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
Location of Flight: _____ Flight Date: _____ Start Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM End Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM

Authorized Public Safety

(Name): _____ Title: _____

Signature: _____ Date of Authorization: _____

Authorized Institutional Advancement

(Name): _____ Title: _____

Signature: _____ Date of Authorization: _____

If anyone has questions or concerns about this permit, please contact the Department of Public Safety at Eastern Connecticut State University. Telephone: 860-465-5310.

PLEASE CARRY THIS APPROVAL WITH YOU AT THE TIME OF FLIGHT