



City of Rolla

Drone Special Use Permit Application

Applicant Information		
Applicant Name:	Organization Name:	
Applicant Address:	City/State/Zip:	
Day Phone:	Evening Phone:	Cell Phone:
E-mail Address:		
Name of Alternate Contact:	E-mail Address:	
Evening Phone:	Cell Phone:	
Event Information		
Name of Event:		
Facility/Park Requested:	Date of Event:	
Event Start Time (include setup):	Event End Time: (include cleanup):	
Describe the Event and its purpose:		
Applicant Acknowledgment		Mo Tax ID #:
<p>I hereby attest that to the best of my knowledge the information contained in this application is true and correct. All forms, permits and insurance must be completed a minimum of 2 weeks prior to event start date. I also certify that I have registered my drone and will follow all FAA airspace restrictions. I also certify that will not fly over groups of people, public events, or any city facilities where people are present: ballgames, Splash Zone, playgrounds etc. Please provide proof of FAA registration.</p>		
Signature:		

Additional Information and Considerations:

- It is strongly recommended to reserve the facility to ensure its availability while your application is being processed. In the event your application is denied, the reservation fee will be refunded.
- A copy of your certificate of insurance coverage for your drone is required.
- A plan and/or drawing may be required with this application showing the location of the proposed flight.

Applicable Fees:	
_____ Pavilion Reservation Fee \$_____	
_____ Drone Special Use Permit \$15	
_____ Other Fee \$_____	
Total Fees Due: \$_____	
By: _____	Date: _____

Approval			
	Approved	Denied	Approved w/ Conditions
Administration			
Comm. Dev.			
Finance			
Fire			
Parks			
Police			
Public Works			

