FAA Home ► Unmanned Aircraft Systems ► Request a Waiver or Operation in Controlled Airspace ► Request a Waiver **Unmanned Aircraft** Systems Request a Part 107 Waiver Getting Started Beyond the Basics We encourage applicants to review the instructions for completing this waiver **Top Tasks** Where to Fly application (PDF). Frequently Asked Read the Summary of the Small Questions/Help You are not required to respond to this Waivers and ATC Authorization in Controlled UAS Rule (PDF) collection of information unless it displays a Airspace under Part 107 Programs, Partnerships and Register your UAS valid OMB control number. OMB control number: 2120-0768 Opportunities Expiration date: February 28, 2017 Become a UAS pilot Research & Development Request a Waiver or Operation in * required field Resources Controlled Airspace * Acknowledgment Contact Us Report an Accident ☐ I have read the waiver safety explanation guidelines Report an Accident (PDF), waiver application instructions (PDF), and **More Information** Report an Event Request a Waiver or Operation Responsible Person (PDF) 14 CFR Part 107 in Controlled Airspace Person responsible for the safety of the operation § 107.205 List of Regulations Part 107 Waivers Granted * First name: Subject to Waiver Request a Waiver Request to Operate in Controlled * Last name: Request to Operate in Airspace instructions (PDF) Organization: Controlled Airspace Waiver Application instructions Mailing address Waiver Safety Explanation * Street address: Guidelines (PDF) * City: Part 107 Waivers Granted * State: * Zip code: f you would prefer to email the FAA your form, please * Phone: (nnn) nnn-nnnn use Form 7711-2 This This phone number should be for the person whom FAA can process will likely take longer contact for additional information as needed. than using the online form.

☐ The following remote pilot information is the same as the responsible person information.

* Email address:

* Confirm email

Remote Pilot (PDF)

Mailing address — Street address:

First name:

	(nnn) nnn-nnnn
	(nnn) nnn-nnnn
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Remote Pilot Certificate Number:	
Rating:	Small UAS
Your Waiver Applica	ation —
Select only the regulation	n(s) that you need waived to conduct your operation. 107.25 Operations from a moving vehicle or aircraft 107.29 Daylight operation 107.31 Visual line of sight aircraft operation 107.33 Visual observer 107.35 Operation of multiple small unmanned aircraft 107.37(a) Operation near aircraft 107.39 Operation over people 107.51(a) Operating limitations: ground speed 107.51(b) Operating limitations: altitude

For each regulation subject to waiver that you checked above, please provide details about how you will meet the Waiver Safety Explanation Guidelines (PDF). * Waiver safety explanation: Character count: 0/5,000 You will receive a confirmation email once your waiver application has been in-processed by the FAA. Follow the instructions in this email to submit supporting documentation for your waiver request. Supporting documents must be provided within 7 days of receiving the confirmation email. * When do you want to fly? Dates cannot be in the past or exceed 48 months from today's date. Start date: mm/dd/yyyy End date: mm/dd/yyyy Launch Date Picker Launch Date Picker Date Picker keyboard shortcuts Date Picker keyboard shortcuts Provide a street address or landmark(s), and distance and direction from the nearest public airport (ex: 123 Main St. Anytown, VA, near Mount Rushmore, 3 miles SE of This County Airport). * Where do you want to fly?

Proposed Maximum Flight Altitude Above	
Ground Level (AGL):	
Small UAS Details	
Make:	
Model:	
Aircraft Registration Number:	
	Add another small UAS
Other Part 107 Waiv	ers or Requests
	•
* Does anyone associa	ated with this waiver request already have a pending o
approved Part 107 wai	ver?
	Yes
	○ No
* Waiver/Reference	
numbers(s):	
(separated by commas)	
	Character count: 0/5
	I'm not a robot
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	Privacy - Terms
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	Please verify the accuracy of the data entered on this form prior to submitting the request.

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