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# Request a Part 107 Waiver

We encourage applicants to review the instructions for completing this waiver application (PDF).

You are not required to respond to this collection of information unless it displays a valid OMB control number.

Waivers and ATC Authorization in Controlled Airspace under Part 107  
OMB control number: 2120-0768  
Expiration date: February 28, 2017

\* required field

### \* Acknowledgment

I have read the [waiver safety explanation guidelines \(PDF\)](#), [waiver application instructions \(PDF\)](#), and [§ 107.200](#).

### Responsible Person (PDF)

Person responsible for the safety of the operation

\* First name:

\* Last name:

Organization:

Mailing address

Mailing address

\* Street address:

\* City:

\* State:

\* Zip code:

\* Phone:

*This phone number should be for the person whom FAA can contact for additional information as needed.*

\* Email address:

\* Confirm email address:

### Remote Pilot (PDF)

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

First name:

Last name:

Mailing address

Street address:

City:

### Top Tasks

[Read the Summary of the Small UAS Rule \(PDF\)](#)

[Register your UAS](#)

[Become a UAS pilot](#)

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### More Information

[14 CFR Part 107](#)

[§ 107.205 List of Regulations Subject to Waiver](#)

[Request to Operate in Controlled Airspace instructions \(PDF\)](#)

[Waiver Application instructions \(PDF\)](#)

(PDF)

[Waiver Safety Explanation Guidelines \(PDF\)](#)

[Part 107 Waivers Granted](#)

**+** If you would prefer to email the FAA your form, please use [Form 7711-2](#). This process will likely take longer than using the online form. **x**

State:

Zip code:

Phone:

Remote Pilot  
Certificate Number:

Rating: Small UAS

### Your Waiver Application

\* What regulation(s) do you want waived?

Select only the regulation(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
- 107.51(c) Operating limitations: minimum visibility
- 107.51(d) Operating limitations: minimum distance from clouds

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:

End date:

[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 Waivers or Requests**

\* Does anyone associated with this waiver request already have a pending or approved Part 107 waiver?

- Yes
- No

\* Waiver/Reference numbers(s):   
(separated by commas)

Character count: 0/500

I'm not a robot



Please verify the accuracy of the data entered on this form prior to submitting the request.

**Submit**

Page last modified: February 10, 2017 10:16:12 AM EST

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