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| **UAS Flight Planning Checklist** |
| **Task Details** |
| Flight Planning Checklist No (from header): | Provide your own FPCL number here. |
| Task Details 1: | Click here to enter text. |
| Task Details 2: | Click here to enter text. |
| Flight Dates: | Click to enter a date. | Click to enter a date. | Click to enter a date. |
| Time of Day: | Day only: |[ ]  Night only: |[ ]  Day + Night: |[ ]
| Line-of-Sight: | VLOS: |[ ]  E-VLOS: |[ ]  B-VLOS: |[ ]  Other: |[ ]
| Flight Modes: | Auto: |[ ]  Semi-Auto: |[ ]  Manual: |[ ]  Other: |[ ]
| **The UAS** |
| UAS Make and Model: | Click here to enter text. |
| Payloads Required: | Click here to enter text. |
|  | Click here to enter text. |
|  | Click here to enter text. |
| UAS Ground Control System: | Click here to enter text. |
| UAS Radio Controller: | Click here to enter text. |
| UAV Launch System: | Click here to enter text. |
| UAV Recovery System: | Click here to enter text. |
| **Safety Personnel** |
| UAV Pilot: | Click here to enter text. |
| UAS Technician: | Click here to enter text. |
| Task Specialists: | Click here to enter text. |
|  | Click here to enter text. |
|  | Click here to enter text. |
| Safety Representative: | Click here to enter text. |
| Security Representative: | Click here to enter text. |
| **Area of Operations** |
| Country: | Enter text. | Province/County: | Enter text. |
| Closest Town/City: | Enter text. | District: | Enter text. |
| Farm/Lodge/Reserve/Park name: | Click here to enter text. |
| Mine/Plant/Site/Factory/Building name: | Click here to enter text. |
| General Area name: | Click here to enter text. |
| GPS Coordinates: | Enter coords. | Elevation (ASL): | Enter text. |
|  | Enter coords. | Elevation (AGL): | Enter text. |
| Is a Safety Footprint Required? | Yes |[ ]  No |[ ]
| If yes, has it been defined/developed? | Yes |[ ]  No |[ ]
| If yes, has it been submitted to the Aviation Regulator? | Yes |[ ]  No |[ ]
| **Expected Environment** |
| Expected Terrain: | Click here to enter text. |
| Expected Population Density: | Click here to enter text. |
| Expected Buildings and Dwellings: | Click here to enter text. |
| Expected Roads: | Click here to enter text. |
| Expected Man-Made Obstacles: | Click here to enter text. |
| Expected Natural Obstacles: | Click here to enter text. |
| Expected Sources of EME: | Click here to enter text. |
| Expected Climate: | Click here to enter text. |
| **Airspace** |
| Airspace Class: | Enter text. | Airspace Type: | Enter text. |
| Controlled or Uncontrolled Airspace: | Click here to enter text. |
| Nearest Aerodrome: | Enter text. | Dst: | km |
| On Approach Path: | Enter text. | On Take-off Path: | Enter text. |
| **Permissions Required** |
| *Entity* | *Required?* | *Received?* | *Contact Details*  |
|  | *Yes* | *No* | *Yes* | *No* |  |
| City Council |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Local Municipality |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Local Law Enforcement |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Regional Body |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Nature Conservation |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Air Traffic Control |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Site Owner |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Land Owner |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Tribal Leader |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Facility Owner |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Home Owner |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Other |[ ] [ ] [ ] [ ]  Click here to enter text. |
| **Emergency Contact Details** |
| *Entity* | *Required?* | *Pre-Informed?* | *Contact Number* |
|  | *Yes* | *No* | *Yes* | *No* |  |
| Local Law Enforcement |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Local Fire Services |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Local EMS |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Local GP/Doctor |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Aviation Authority |[ ] [ ] [ ] [ ]  Click here to enter text. |
| Immediate Owner |[ ] [ ] [ ] [ ]  Click here to enter text. |
| OO Hotline |[ ] [ ] [ ] [ ]  Click here to enter text. |
| **Flight Planning Checklist Completed By:** |
| **Name:** | Click here to enter text. | **Title:** | Click here to enter text. |
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|  |  |  |
|  | signed |  |
|  | **Signed on:** | Choose date. |  |
| *NOTES:** *FPCL = Flight Planning Checklist.*
* *This Checklist is to be completed during the initial planning phase, prior to deployment to the Area of Operations.*
* *An overview of all tasks to be executed during the flight should be provided.*
* *All payload types to be utilised during the flight must be specified.*
* *A “General Area name” may be specified if the task will not be flown over a specific town, lodge, farm, facility or other “named area”, e.g. “the Gobi Desert”, or “the Australian Outback”.*
* *The Flight Planner should consider the development of a Safety Footprint for high-risk tasks.*
* *EME = Electromagnetic Emissions.*
* *Dst = distance to nearest aerodrome in km.*
* *The “Airspace Type” may include Restricted-, Prohibited-, Segregated-, Flexible Use- or other Special Use Airspace.*
* *An Aerodrome includes major airports, minor airports, airfields, airstrips, bush/farm airstrips, water-ports, helipads or any ground-based location where manned aircraft or helicopters may operate from.*
* *OO = UAS Operating Organisation.*
* *The “Title” is the post title held by the individual signing off the FPCL, e.g. UAV Pilot, CEO / Accountable Manager, etc.*
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