

# Application for Renewal / Variation of Unmanned Aircraft (UA) Operator Permit

## Personal Data Collection Statement

The personal data provided for this application will only be used for purposes directly related to this application. For the purpose of fulfilling statutory obligations, relevant information may be transferred to police authorities and other authorized entities.

Note : UA Operator permit is required for operation of unmanned aircraft having total mass **exceeding 7 kg but not exceeding 25 kg** in Macao.

### Instructions and advice for completing this application form:

1. Timeframe for applications:
  - 1.1 **Application for renewal** of a UA Operator Permit shall be made **at least 1 month** in advance of the date of expiry of the existing UA operator permit.
  - 1.2 **Application for variation** of a UA operator permit shall be made **at least 2 weeks** in advance of the proposed effective date for the intended variation.
2. Please read Aeronautical Circular, AC/GEN/013 - *Operator Permit for Unmanned Aircraft Operations in Macao*.
3. The UA operator permit holder shall be an operator which refers a person or an organisation to conduct the unmanned aircraft operations or offering to engage in unmanned aircraft operations as service provider, but should not be the client who engages the services.
4. Completed application form, accompanied by all required supporting documents, shall be submitted by post or e-mail to Civil Aviation Authority – Macao, China.:  
**Address: 18/F, Cheng Feng Commercial Centre, 336-342, Alameda Dr. Carlos D' Assumpção, Macao**  
**Email: [flightstandards@aacm.gov.mo](mailto:flightstandards@aacm.gov.mo)**
5. Failure to complete this form or incomplete application package will be rejected or cause delay in processing the application.

## 1. General Information

<b>Nature of application(s)</b>	<input type="checkbox"/> Renewal <i>(please complete section 2A)</i>	<input type="checkbox"/> Variation <i>(please complete section 2B)</i>	<input type="checkbox"/> Renewal and Variation <i>(please complete section 2A &amp; 2B)</i>
<b>Existing UA Operator Permit :</b>	Permit No.	Valid until:	
<b>Operator</b>	<input type="checkbox"/> Personal Application		<input type="checkbox"/> Organisational Application
	Name:		
	Name of Organisation <i>(if applicable)</i> :		
	Telephone:	Email:	
	Address:		
<b>Contact person for this application</b>	Name:		
	Name of Organisation <i>(if applicable)</i> :		
	Telephone:	Email:	
	Address:		

## Application for Renewal / Variation of Unmanned Aircraft (UA) Operator Permit

### 2A. Applicable for renewal of a UA Operator Permit

#### Supporting Documents Submitted with this Application:

#	Item (s)	Applicant's Remarks	Office Use Only
1	Copy of valid UA pilot licence / certificate		
2	Records of flight activities carried out by the UA pilot(s) for the unmanned aircraft specified in the UA operator permit		
3	Records of maintenance conducted on the unmanned aircraft		
4	If the UA used is customised or modified, supporting evidence that it has been re-certified by the UA manufacturer		
5	If the UA used is <b>not</b> customised or modified, a declaration by the accountable person stating that there is no uncertified modification to the UA		
6	Records of training attended by UA pilot(s) as specified in the operator's operation manuals		
7	Summary of any unmanned aircraft safety occurrences OR a declaration, for no safety occurrences occurred, signed by the accountable person		
8	Other(s)		

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## 2B. Applicable for variation of a UA Operator Permit

<b>Reason(s) of Variation</b>	<input type="checkbox"/> Addition, removal or modification of UA specified in the UA operator permit
	<input type="checkbox"/> A change in the type(s) of operation specified in the UA operator permit
	<input type="checkbox"/> Others (Please specify): .....

**UA Equipment** (For addition, removal or modification of UA specified in the UA operator permit ONLY):

		Type	Total Mass (kg)	Features			Modified UA
				Geofencing	Low power/ weak signal warning	Automatic safe landing	
1	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
2	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
3	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
4	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
5	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
6	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					
7	<input type="checkbox"/> Add	.....		<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<input type="checkbox"/> Remove	Brand					
	<input type="checkbox"/> Modify	Model					
		Serial no.					

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### 2B. Applicable for variation of a UA Operator Permit

#### Supporting Documents Submitted with this Application:

#	Item (s)	Applicant's Remarks	Office Use Only
1	Revised operations manual		
2	If the UA used has been modified, supporting evidence that it has been re-certified by the UA manufacturer		
3	Supporting documents for the intended variation to the UA operator permit		
4	Other(s)		

### 3. Declaration by the accountable person

*(Note: Accountable person as required by the paragraph 4.1 of the AC/GEN/013)*

I hereby declare that the information given in this application form and supporting document is true and correct in every respect to the best of my knowledge and belief.

Name:

.....

Name of Organisation:

*(if applicable)*

.....

Signature:

.....

Date:

.....