



City of North Little Rock  
Parks and Recreation Department

**Request to Operate  
Unmanned Aerial Systems (UAS)**

Office Use Only

Date Rec'd: \_\_\_\_\_

☐ Approved \_\_\_\_\_

☐ Denied \_\_\_\_\_

*Submission of this application does not guarantee approval. If approved, this permit will allow you to operate during the dates and times approved. Completed request must be submitted to the Director of Parks and Recreation either in person or by mail "UAS Request, c/o NLR Parks and Recreation, 2700 Willow Street, North Little Rock, AR 72114" or fax to 501-791-8528 or email to parksandrec@nlr.ar.gov.*

**CONTACT INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone 1: (\_\_\_\_)\_\_\_\_-\_\_\_\_ x\_\_\_\_ Phone 2: (\_\_\_\_)\_\_\_\_-\_\_\_\_ x\_\_\_\_

Email: \_\_\_\_\_

**FLIGHT INFORMATION**

Date of Flight: \_\_\_\_\_ Time of Flight: \_\_\_\_\_ Duration: \_\_\_\_\_

Location/Area: \_\_\_\_\_

Aircraft Make and Model: \_\_\_\_\_ Aircraft Registration #: \_\_\_\_\_

Purpose of Flight: ☐ Commercial ☐ Academic ☐ Recreational ☐ Other: \_\_\_\_\_

Flight Description/Plan: \_\_\_\_\_

Remote Pilot in Command (RPIC): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

RPIC UAS Certificate #: \_\_\_\_\_

Visual Observer (if different from RPIC): \_\_\_\_\_

**AGREEMENTS**

I agree that I will abide by the conditions of this permit, follow all applicable FAA guidelines, follow all applicable state and local ordinances, and Parks and Recreation rules, policies, and guidelines. I understand I will be held financially responsible for the repair, clean-up, loss incurred by the Department and/or adjacent private property owner caused by my operation, launching, landing, and recovery of my UAS.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date