

APPLICATION FOR REGISTRATION OF UNMANNED AIRCRAFT SYSTEM (UAS) (Under Regulation 5 of Civil Aviation (Unmanned Aircraft System) Regulations)

Issue: 1 Revision: 0

Date: 09 December 2024

1.	REGISTRATION TYPE	E		
you □ C	ose recreational / comr will be operating your U perating for Recreational perating for Commercia	JAS. (ple al	ease tick	
2.	APPLICANT DETAILS			
Title		Mr □	Mrs □	Miss □
Full Name				
Date of Birth				
Nati	onality			
Mauritian National Identification Number				
Passport Number				
Contact/Mobile Number				
Email Address				
Full Residential Address				
If registering for business purp		ose		
Con	npany Name			
	iness Address			
It no	t the UAS Operator			

If you are not the UAS Operator, please fill-in part 3, otherwise, proceed to part 4.



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3. UAS OPERATOR DETAILS						
Title	Mr □ Mrs □ Miss □					
Full Name						
Date of Birth						
Nationality						
Mauritian National Identification Number						
Passport Number						
Contact/Mobile Number						
Email Address						
Full Residential Address						
4. UAS SPECIFICATION						
UAS Status	New □ Used □					
UAS Manufacturer						
Date of Manufacture						
UAS Make						
UAS Model						
UAS Serial Number						
Country of Manufacture						
UAS Weight						
Type of UAS	Fixed Wing □ Multi-Rotor □ Hybrid □ If other, please specify					



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Purpose of UAS	Aerial Media □ Aerial Spott Aerial Survey □	ing □ Aerial Agriculture □					
	If other, please specify						
5. IF PREVIOUSLY REGIS	STERED IN ANOTHER COUNT	RY					
Country of Registration							
UAS Registration Number							
Note: If registered in another country, you are required to submit a proof of cancellation of registration from the issuing Authority.							
6. TYPE APPROVAL OF THE UAS ISSUED BY INFORMATION AND COMMUNICATION TECHNOLOGIES AUTHORITY (ICTA) OF MAURITIUS							
Type Approval Reference							
Note: Please check the list of type approved UAS on ICTA website. If the type of your UAS is not available, an application should be made to ICTA.							
7. ATTACHMENTS							
Submission of the followin	g documents are mandatory	Comments (optional)					
Copy of Passport and/or National Identity Card	□ attached						
Photograph of your UAS (front view)	□ attached						
Photograph of your UAS serial number	□ attached						

UAS Registration Form Page 3 of 4

Signature:

Signature:

Recommended for approval by:

Signature:

Verified by:



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I hereby declare:						
accurate and corr (b) that I have read a	accurate and correct in every respect. that I have read and understood the UAS requirements and regulations published by DCA.					
Full Name						
Signature						
Date						
9. FOR OFFICE USE ONLY						
Remarks:						
Comply with our requ	uirements?					
Comply with our requ ☐ Yes ☐ No	uirements?					
☐ Yes ☐ No	uirements? on Identification:					

Approved by:

Name: _____ Position: _____ Date: _____

Name: Date:

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