



West Virginia Board of Risk & Insurance Management



RISK MANAGEMENT PROFILE APPLICATION FOR UNMANNED AIRCRAFT SYSTEMS (UAS)

Dear Applicant:

The following five pages contain your West Virginia Board of Risk and Insurance Management risk management profile application for Unmanned Aircraft Systems (UAS), i.e., drones.

It is divided into nine sections, with each section addressing a different profile area.

The purpose of this application is to provide BRIM with information needed to better assess the need for Unmanned Aircraft Systems (UAS) Insurance.

Thank you for completing this application.

I. GENERAL INFORMATION:

1. Name of **Applicant**: _____

Mailing Address: _____

City, State, ZIP Code: _____

UAS Storage Address
& Postcode (if different): _____

Website Home Page Address: _____

Who is your Certifying Authority?
(FAA, NAV Canada, Other?): _____

Applicant Organization Type: Public Entity Non-Profit
 Government Other (describe)

Description of Applicant's UAS Operations: _____

Name of individual completing this form: _____

Title: _____

Phone Number: _____

E-mail Address: _____

**QUESTIONS REGARDING THIS QUESTIONNAIRE SHOULD BE
DIRECTED TO BRIM'S UNDERWRITING & LOSS CONTROL DEPARTMENT**

AT

(304) 766-2646

OR

TOLL FREE AT (800) 345-4669

II. UAS INFORMATION:

Serial Number or ID	Year	Make & Model	Specification (Wingspan, Length, Max Weight, Payload Weight)				Value
							\$
							\$
							\$
							\$
							\$

III. BASE STATION AND TRANSMITTER INFORMATION:

Serial Number or ID	Year	Make & Model	Specification	Value
				\$
				\$
				\$
				\$
				\$

**IV. PAYLOAD INFORMATION
(Optical Sensors, Video Downlink, Gimbal (Camera Stabilizers):**

Serial Number or ID	Year	Make & Model	Specification Payload Type and Use	Value
				\$
				\$
				\$
				\$
				\$

V. OPERATIONAL INFORMATION:

- a. Is the applicant a Manufacturer or End User: _____
- b. Annual hours each UAS(s) will be operated: _____
- c. Maximum Endurance (flight duration) of UAS: _____
- d. Top Speed of UAS: _____
- e. Primary means of control
(Line of sight/computer guided): _____
- f. Does UAS(s) have "auto-land" capability: _____
- g. How many UASs does the applicant own/rent: _____
- h. Is UAS gas powered or electric: _____
- i. Is UAS designed to deploy/drop payload: _____
- j. How long have the UAS(s) been flying: _____

Fully Describe any Hazardous Flying Conditions
(Weather, Visibility, Power Lines, Night Operations):

VI. NAMED PILOTS:

Pilot Name	Hours Flying Types of Equipment

Pilots are: Employees of Applicant Contract Pilots Other: _____
 Pilot(s) have completed: Formal UAS Pilot or Operator Training (please provide documentation)

VII. ADDITIONAL INFORMATION:

- a. Does Applicant currently hold an FAA certificate of Authorization (COA/333 Exempt)? _____
- b. Aircraft maintenance provided by? _____
- c. Will aircraft be used outside the continental United States? Yes No
- d. Does the applicant own/lease any other aircraft? Yes No
- e. Will anyone other than named pilots operate the insured aircraft? Yes No
- f. Will applicant Use/Arrange use of any Non-Owned Aircraft or UAS? Yes No
- g. Has Applicant or named pilot ever had any incident/accident/violation? Yes No
- h. Has applicant/named pilot ever had any felony convictions/license suspensions? Yes No
- i. Does applicant provide training in the operation of UAS's to third parties? Yes No

(Explain all "Yes" answers on comments page of form, attach separate sheet if necessary.)

VIII. DOCUMENTATION :

In addition to answering the questions within this questionnaire, please provide the following documents as an attachment to this questionnaire:

- a. Evidence of formal ground and flight school completion records, including FAA Ground School
- b. Maintenance Log & Build Log
- c. Flight Log
- d. UAS written safety policy

COMMENTS