**Application Form**

**for**

**Remotely Piloted Aircraft System**

**(RPAS) Scheme**

The certificate will be transferred to the Certification Body

as and when they are approved under the Scheme

**AMENDMENT SHEET**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **S. No.** | **Page No.** | **Clause No.** | **Date of Amendment** | **Amendment** | **Reasons** | **Authorised Signature** |
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### Information & Instructions for completing an Application Form

1. Application shall be made in the prescribed form only. The application shall consist of the following:

* Completed application form with duly filled annexures
* Remotely Piloted Aircraft System (RPAS) Manual
* Prescribed application fees

Incomplete application, fraudulent behavior, false information and concealing the information may lead to rejection of application or termination of the assessment process. ***Do not leave any clause empty in the application. Mention NA wherever it is Not Applicable.***

1. Applicant are advised to ensure that the approved version of QCI RPAS Scheme is available with the manufacturer and abided by while submitting the application and the RPAS equipment(s).
2. The application fee and other related charges (including assessment man-days, testing charges, facility fees of host organisation) related to certification for the QCI RPAS Scheme shall be required to be deposited to QCI. The man-days for Stage I and Stage II shall not normally exceed 10 man-days. In the event of exceeding the mentioned number a proper justification will be offered to the applicant.
3. Applicant are advised to familiarize themselves with Civil Aviation Requirements Section 3 Series X Part I, DGCA RPAS Guidance Manual and RPAS Scheme requirements before filling up this form.
4. The applicant shall provide copies of any of the following document(s) in support of the legal status claimed:

a. Proprietorship firm (Bank passbook, Account statement, ID of the Proprietor)

b. Partnership (Copy of Registration under 1932 Act)

c. Company Act (Copy of Registration under 1956 Act)

d. Societies Registration Act (Copy of Registration under 1860 Act)

e. Indian Trust Registration Act (Copy of Registration under 1882 Act)

f. Limited Liability Partnership (Limited Liability Partnership Act, 2008)

g. Government (Copy of Government Notification / Declaration etc.)

1. The applicant shall intimate the QCI about any change in the information provided in this application such as, personnel, and location etc. within 05 days from the date of changes.
2. It is expected that applicant to follow the test methods as mentioned in the section 4 of the Certification Criteria of the RPAS Scheme.
3. The applicant shall also inform QCI in advance about any reservation with valid reason regarding appointment of Assessor for the assessment. This will be in accordance to Section 4: Certification Process; Clause 3.4.5.
4. The application must be filled up carefully to provide required information in such a manner that further correspondence for seeking clarifications are not required.
5. The applicant shall offer the QCI or its representative cooperation in:
6. undertaking any check to verify competence to carry out operations related to RPA by the applicant.
7. providing names of all personnel competent to carry out operations like the personal involved in ground operation, flying of RPA, maintenance of RPA etc.
8. examination of all relevant documentation and records as mentioned in the RPAS Scheme
9. interaction with all relevant personnel.
10. Complete RPA and its parts as stipulated in the Certification Criteria.
11. The application shall be kept confidential (until required by law) by QCI and information obtained during the processing of application, assessment visit and grant of certification shall be safeguarded and dealt with impartiality. The procedure for processing of application for certification is given in QCI RPAS Scheme available on <https://www.qcin.org/RPAS.php> .
12. The applicant needs to furnish updated documents as mentioned in the RPAS Scheme. An indicative list but not limited to the below is as under:
    1. Detailed drawings (Structural airframe, 3D view, wiring diagram, pictures, etc.)
    2. Analysis Reports
    3. Test Report (Ground/ Flight)
    4. Manufacturing Process
    5. Material procurement record
    6. Consolidated hardware and software independently verified and validated
    7. RPA flight manual/ manufacturer’s operating manual
    8. Maintenance manual/ guidance/ procedure
    9. Maintenance inspection schedule/ overhaul interval
    10. User manual (Self-explanatory information booklet for end users)
    11. Other relevant technical literature/ reports or any other requirements to meet the Certification Criteria as prescribed by the RPAS Scheme (e.g. NPNT compliance, equipment compliance etc.).

--xxxx--

### Application Form for Certification of Remotely Piloted Aircraft System (RPAS)\*

We apply to QCI for certification of our **Remotely Piloted Aircraft System** as per details given below:

|  |  |  |  |
| --- | --- | --- | --- |
|  | First Certification |  | Renewal of Certification |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Provisional approval from DGCA |  | If yes, details there off: |
|  |  |  |  |

*If certified by QCI, please provide certificate no. & validity (in case of renewal)*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Manufacturer/ Importer**
2. ***Name of Applicant***

*(In case of Company/ Corporation, Provide names of owners/ directors and their nationalities)*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Details of Organization (if different)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Location(s) and Address(s)**

***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

1. **Telephone No**. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. ***Legal identity of the* Applicant**

*(Please give Registration No. and name of authority who granted the registration in case of an organization. Copy of the certificate shall be enclosed).*

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

* 1. ***Goods and Services Tax (GST) Number along with PAN/ TAN Number (****as applicable****)***

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

* 1. **Type of organization:** *(please tick in appropriate box)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Government |  | Public |  | Private |  |

1. **RPAS Specifications (**Please replicate for more than one model**)**

**RPAS MODEL SPECIFICATIONS**

**(Please add more rows if required)**

|  |  |
| --- | --- |
| Manufacturer’s Name |  |
| RPAS Model |  |
| Serial No(s). |  |
| Description |  |
| **RPA Details** | |
| RPA Category |  |
| RPA Type |  |
| Maximum all-up-weight (including payload) in kg |  |
| Overall dimensions (l x b x h) in mm |  |
| **Payload Details** | |
| Details of Compatible Payload |  |
| Variable Load/Consumables (Like fluid etc., if any) |  |
| **Power plant Details** | |
| Engine/Motor |  |
| Power Rating |  |
| No. of Engines/ Motors |  |
| Total fuel capacity (kg)/ Battery capacity (mAh) |  |
| Propeller details |  |
| **Equipment Details** | |
| GNSS |  |
| Autonomous Flight Termination System or Return Home (RH) |  |
| Flashing anti-collision strobe lights |  |
| RFID and GSM SIM Card/ NPNT |  |
| Flight controller (with flight data logging capability) |  |
| SSR transponder (Mode ‘C’ or ‘S’) or ADS-B OUT equipment |  |
| Barometric equipment (with capability for remote sub-scale setting) |  |
| Geo-fencing Capability |  |
| Detect and Avoid Capability |  |
| Remote Pilot Station |  |
| **Remote Pilot Station** | |
| Ground Control Station Model No. |  |
| GCS App. Version |  |
| **C2 Link** | |
| Equipment details |  |
| Frequency Band |  |
| ETA issued by WPC Wing, DoT |  |
| **Performance Details** | |
| Maximum Endurance (hr/m) |  |
| Maximum Range (in km) |  |
| Maximum Speed (in m/s) |  |
| Maximum Height attainable/ Maximum Ceiling Height (in ft) |  |
| Operating Altitude (in ft) |  |
| Operational Envelope |  |
| Engine limits (Maximum RPM) / Max. Battery Temperature (in deg C) |  |
| Propeller limits |  |
| **Documents / Manuals in Box** | |
| Remotely Piloted Aircraft Flight Manual/ Manufacturer’s Operating Manual (as applicable) |  |
| Manufacturer’s Maintenance guidelines (as applicable) |  |
| Maintenance Inspection Schedule/ Overhaul interval |  |
| User Guide/ Self Explanatory Information Booklet for end users |  |
| **Intended Applications** | |
| Intended Applications |  |

1. **Name and address of the applicant that should appear on the certificate** *(In English)*
2. **Organization** 
   1. **Senior Management***(Name, Designation, telephone, Fax, e-mail)*
      1. Person responsible for the management system\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
      2. Contact person for QCI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
      3. Organization Chart
      4. Employees (List of Employees along with roles and responsibility related to RPAS Certification)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S. No. | Name and Designation | Authorized for which specific area | Academic and Professional Qualifications\* | Experience related to present work (in years) | Training |
|  |  |  |  |  |  |

1. **Application Fees:** The application fee needs to be deposited as advance. The man-day and the other charges shall be computed and invoiced after the assessment. The assessment report shall be issued once the dues are cleared in entirety.
   1. Application Fees (Rs.) TEN THOUSAND
   2. DD/NEFT Transactions \_\_\_\_­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Application Form - Check List**

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Information / details provided as part of application** | **Availability** |
|  | Application form duly filled |  |
|  | Detailed drawings of RPA (Structural airframe, 3D view, wiring diagram, pictures) |  |
|  | Application fees |  |
|  | Copy of Legal Identity (Registration Details of the applicant) |  |
|  | Goods and Service Tax (GST) Number along with PAN/TAN Number (If required) |  |
|  | Self-attested copies of at least two out of three valid identity proofs viz. Passport, Driving License or Aadhar Card of the key personnel. |  |
|  | Copy of ETA from WPC Wing, Department of Telecommunication for RPA  operating in de-licensed frequency band(s) (as applicable) |  |
|  | RPA flight manual/ manufacturer’s operating manual |  |
|  | Details of Senior Management with Designation and Contact Details |  |
|  | Organization Chart |  |
|  | List of Documents submitted. |  |
|  | Copy of import permission / information of local acquisition (where applicable) |  |
|  | Following documents to be submitted:   * Original Equipment Manufacturer (OEM) Certificate * Import Clearance obtained from DGCA (where applicable) * Import License obtained from DGFT (where applicable) |  |
|  | RPAS and its components for Testing |  |
|  | Declaration about the Consultant (if any) |  |

Verified the above details and confirmed the availability of all required documents/ details as part of application form.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date & Place with Stamp/Seal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Declaration by the Applicant**
   1. We are familiar with the terms and conditions of maintaining certification which is enclosed and will abide by them.
   2. The RPAS shall be used only for the purpose for which it is has been certified.
   3. We agree that RPAS shall meet the requirements of the RPAS Scheme at all times.
   4. We agree to comply with certification procedures, pay all costs for assessment, including visit (if any), irrespective of the result.
   5. We agree to co-operate with the assessment team appointed by QCI and Certification Body certified by QCI for examination of all relevant documents by them and their visits to those parts that are part of the scope of certification
   6. We declare that the complete RPAS or its parts as per the requirements of Certification Criteria will be submitted.
   7. We will continue to abide by all national, regional and local regulatory requirements for operating Remotely Piloted Aircraft System
   8. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has provided consultancy for preparing towards QCI certification. (Information regarding any individual or organization who provided consultancy (if any) for QCI certification shall be declared.
   9. No adverse action has been initiated / taken in the past from either regulatory authority or any other court of law. (If yes, please provide the details with present status \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)
   10. All information provided in this application is true.
   11. We agree to sign an agreement with QCI to comply with all the applicable scheme requirements including payment of fee and abide by the Rule for Use of Certification Mark.

Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date & Place \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seal/Stamp \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_