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| VI. PRODUCTION FLIGHT TESTING | A. MANUFACTURER | | | |
| | NAME Lockheed Martin Mission Systems & Sensors | | ADDRESS 1801 State Route 17C, Owego, NY 13827-3900 | |
| | B. PRODUCTION BASIS (Check applicable item) | | | |
| | <input type="checkbox"/> PRODUCTION CERTIFICATE (Give production certificate number) | | | |
| | <input checked="" type="checkbox"/> TYPE CERTIFICATE | | | |
| VII. SPECIAL FLIGHT PERMIT PURPOSES OTHER THAN PRODUCTION FLIGHT TEST | <input checked="" type="checkbox"/> OTHER: Program Letter for Desert Hawk III UAS for a Special Flight Permit | | | |
| | C. GIVE QUANTITY OF CERTIFICATES REQUIRED FOR OPERATING NEEDS | | 1 | |
| | DATE OF APPLICATION 11/30/2011 | NAME AND TITLE (Print or type) Todd A Kopl, Program Mgmt Subcontract Asc Mgr | SIGNATURE <i>Todd A. Kopl</i> | |
| | A. DESCRIPTION OF AIRCRAFT | | REGISTERED OWNER | |
| | REGISTERED OWNER | | ADDRESS | |
| | BUILDER (Make) | | MODEL | |
| | SERIAL NUMBER | | REGISTRATION MARK | |
| | B. DESCRIPTION OF FLIGHT | | | |
| | FROM | | TO | |
| | VIA | | DEPARTURE DATE | DURATION |
| C. CREW REQUIRED TO OPERATE THE AIRCRAFT AND ITS EQUIPMENT | | | | |
| <input type="checkbox"/> PILOT <input type="checkbox"/> CO-PILOT <input type="checkbox"/> FLIGHT ENGINEER <input type="checkbox"/> OTHER (Specify) | | | | |
| D. THE AIRCRAFT DOES NOT MEET THE APPLICABLE AIRWORTHINESS REQUIREMENTS AS FOLLOWS: | | | | |
| | | | | |
| E. THE FOLLOWING RESTRICTIONS ARE CONSIDERED NECESSARY FOR SAFE OPERATION: (Use attachment if necessary) | | | | |
| | | | | |
| F. CERTIFICATION - I hereby certify that I am the registered owner (or his agent) of the aircraft described above; that the aircraft is registered with the Federal Aviation Administration in accordance with Title 49 of the United States Code 44101 et seq. and applicable Federal Aviation Regulations; and that the aircraft has been inspected and is safe for the flight described. | | | | |
| DATE | NAME AND TITLE (Print or type) | SIGNATURE | | |
| | | | | |
| VIII. AIRWORTHINESS DOCUMENTATION (FAA Designee use only) | <input type="checkbox"/> A. Operating Limitations and Markings in Compliance With 14 CFR Section 91.9, As Applicable | | <input type="checkbox"/> G. Statement of Conformity, FAA Form 8130-9 (Attach when required) | |
| | <input type="checkbox"/> B. Current Operating Limitations Attached | | <input type="checkbox"/> H. Foreign Airworthiness Certification for Import Aircraft (Attach when required) | |
| | <input type="checkbox"/> C. Data, Drawings, Photographs, etc. (Attach when required) | | <input type="checkbox"/> I. Previous Airworthiness Certificate Issued in Accordance With 14 CFR Section _____ CAR _____ (Original attached) | |
| | <input type="checkbox"/> D. Current Weight and Balance Information Available in Aircraft | | <input type="checkbox"/> J. Current Airworthiness Certificate Issued in Accordance With 14 CFR Section _____ (Copy attached) | |
| | <input type="checkbox"/> E. Major Repair and Alteration, FAA Form 337 (Attach when required) | | <input type="checkbox"/> K. Light-Sport Aircraft Statement of Compliance, FAA Form 8130-15 (Attach when required) | |
| | <input type="checkbox"/> F. This inspection Recorded in Aircraft Records | | | |