



## Application for Drone Waiver Exception

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

Department: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

1. Please identify the manufacturer and model of the drone.

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2. Will the drone be purchased with state funds through a contract, grant, or cooperative? Please explain and attach any supporting documentation.

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3. Identify the necessity for the waiver request:

- ☐ Exigent circumstances
- ☐ Counter Unmanned Aircraft Systems
- ☐ Criminal Investigative purposes

a. Please explain your selection above.

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Please send completed form to [tss@arkansas.gov](mailto:tss@arkansas.gov).