

1. Change Title

Please enter a title for this intended change, (max 80 characters): *

EG D0 26 LULWORTH - UNMANNED AIRCRAFT SYSTEMS BVLOS OPERATIONS

2. Change Sponsor Details

Please select the appropriate category and complete. *

A Company

- An Unincorporated Association or other body
- Individual (including sole traders and partnerships)

2a. A Company

Registered Company name (in full) *

DEFENCE INFRASTRUCTURE ORGANISATION, SERVICE DELIVERY TRAINING

Registered Company Number

Country of Company Registration

UNITED KINGDOM

Registered Office Address

BLDG 99, WATERLOO LINES, IMBER RD, WARMINISTER, WILTSHIRE

Postcode

BA12 0 DJ

E-mail

Trading name (if applicable)

Trading Address (primary site)

Country

Postcode

Website address

Primary Point of Contact Name *







Secondary Point of Contact Name



Telephone



E-mail



3. Independent Aviation/Airspace Consultancy

Is an Independent Aviation/Airspace Consultancy involved in this proposal?

4. Summary of Intended Change

Please use the check boxes below to indicate the nature of the intended change(s): *

Flight Information Region (ENR 2.1)	Upper Information Region (ENR 2.1)	Terminal Control Area (ENR 2.1)
Other Regulated Airspace (ENR 2.2)	Lower ATS Routes (ENR 3.1)	Upper ATS Routes (ENR 3.2)
Area Navigation Routes (ENR 3.3)	Helicopter Routes (ENR 3.4)	Other Routes (ENR 3.5)
En-Route Holding (ENR 3.6)	Name-Code Designators (ENR 4.4)	Prohibited/Restricted/Danger Areas (ENR5.1)
Military Exercise/ Training Areas (ENR 5.2)	Other Danger/ Hazard (ENR 5.3)	Aerial/Sporting/Recreational Activities (ENR 5.5)
Bird Migration/Sensitive Fauna (ENR 5.6)	(AD-EGXX-2.17)	Flight Procedures (AD-EGXX-2.22)
(AD-EGXX-5)	(AD-EGXX-6)	(AD-EGXX-7)
Instrument Approach Procedure (AD-EGXX-8)	Visual Reference Point	Release of Controlled Airspace

Please use the check box below to indicate whether this is an administrative change:

Does your proposal represent an administrative change to the Aeronautical Information Publication (AIP)?

5. Statement of Need

Please provide a brief 'Statement of Need' expressing explicitly what airspace issue or opportunity you are seeking to address. Your Statement of Need should clearly articulate the current situation, the issue (and the cause of it) to be resolved or the opportunity to be addressed along with any other factors or requirements. *

Approval is sought for Beyond Visual Line Of Sight (BVLOS) Unmanned Aircraft Systems within Danger Area D026 Lulworth. The Danger Area is currently authorized for the use of Unmanned Aircraft Systems (VLOS), as listed in the AIP at ENR 5.1, however the expansion of BVLOS systems into increasingly specialist military training requires additional designated areas to utilize these platforms. BVLOS operations will be restricted to air systems of <20 Kgs with a maximum airspeed of <150 Kts. It is believed that this proposal should be considered as a Level 0 change as defined in CAP 1616 Appendix A, Table A2 under Category Prohibited, Restricted and Danger Areas, Proposed Changes to Remarks. The current airspace structure will not be affected in any way by this proposal as all flying will be accommodated within the present DA. In order to comply with the CAA Buffer Policy for Unusual Airspace Activities, use of BVLOS UAS in D026 will be restricted to the southern half of the Danger Area. This will be designated as a Restricted Operating Zone (ROZ) and will ensure that the minimum required lateral separation from the adjacent Bournemouth Control Area will be maintained at all times – this can be 3nm under the Policy dispensations. The northernmost boundary will coincide with a public road which will provide easy identification for the air system operators. Vertical separation from adjacent airspace structures will be achieved by limiting the upper level of the ROZ to FL115.

Please specify the altitudes (where applicable) affected by your Statement of Need:

Surface to below 4,000 feet

4,000 feet to below 7,000 feet

7,000 feet to below 20,000 feet

20,000 feet and above

6. Proposed Dates

Please provide your proposed date for the submission of your change proposal to the CAA. This should be the date on which you are expecting to submit your formal airspace change proposal to the CAA. Please note that your formal airspace change proposal must be submitted alongside all of the supporting documentation required by the CAA to complete our regulatory assessment of the Proposal; consequently the date on which you place in this field should represent the point at which you will have the formal airspace change proposal **and all** of the supporting documentation ready to submit to the CAA. This date is required to assist us with the allocation of the required CAA-resource to your proposal and therefore it is a key date in our planning process. Whilst we will try to accommodate your specified timescales, there may be occassions where it is not possible for us to do so given the large number of projects that are already 'in process' You should also note that any changes to the above date may impact our ability to process your airspace change proposal within your preferred timescales. It should also be noted that from September 2018 any amendments submitted by a Data Originator or ANSP for onward promulgation in the UK IAIP will be subject to the Aeronautical Data Quality Requirements. See <u>Commission Regulation (EU) No 73/2010</u> (updated by 1029/2014) and <u>CAP 1054</u>: Aeronautical Information Management guidance material for further information. These requirements will be discussed in greater detail during the course of your initial meeting with

the CAA.

Confirmation of Understanding *

Please provide your proposed date for the submission of your change proposal to the CAA. *

02 Apr 2018

Please provide your proposed AIRAC effective date *

AIRAC 06/2018

If this change forms a part of a modular airspace change proposal please provide the relevant title and further information below (Note we will require individual submissions for each module). *

Not Applicable

If this change requires the implementation of a Five-Letter Name Code (5LNC) please specify your requirements below: *

Not Required