ENVIRONMENTAL HEALTH AND SAFETY
Policy #P&P-04
Use of Charter Aircraft for FAU Purposes

1. PURPOSE:

To set forth procedures governing the chartering of private aircraft for FAU purposes. This procedure will enhance the safety of university staff, faculty, and students engaged in flying on privately chartered aircraft for FAU business or research purposes.

2. POLICY STATEMENT:

The use of charter aircraft for FAU business or research purposes must be carefully planned to ensure the aircraft and pilot certifications are appropriate for the aircraft use. The safety of FAU passengers requires the full scope of use and proposed charter company be vetted through appropriate parties prior to procurement of charter services.

Piloting an aircraft by a member of the FAU community for FAU purposes and/or the use of a leased, rented, or personal aircraft for FAU purposes (including research) is not permitted.

3. CONCEPTS AND DEFINITIONS:

Charter Aircraft – Purchase of a 3rd party flight by an FAA-certified charter aircraft operator which includes a dedicated aircraft, commercial certified pilot, FAU required insurance, appropriate air certificate, and certificate of airworthiness. The charter aircraft company, pilot, and aircraft must be in compliance with FAA regulations. For more information on charter aircraft, visit the FAA Website.

4. RESPONSIBILITIES:

4.1. Department Head or Chair

It is the initial responsibility of the appropriate department chair to review the completed FAU Application to Charter Aircraft for FAU form (Appendix “A”) and the FAU Charter Aircraft for Research Scope of Work form (Appendix “B”) as submitted by the requestor and to grant approval by signature. After evidencing approval by signature, the documents shall be sent to the University Risk Manager located in the Office of Environmental Health and Safety.

4.2. Environmental Health and Safety

EH&S will review the application and associated documents for coverage period, insurance requirements, and completeness. EH&S will work with the requestor to obtain additional information, if necessary. If approved, EH&S will forward the approved FAU Application to
Charter Aircraft for FAU form (Appendix "A") and the FAU Charter Aircraft for Research Scope of Work form (Appendix "B") to Purchasing for approval and processing.

4.3. FAU Procurement

Purchasing will work with the requestor on additional requirements for procurement.

5. PROCEDURES:

5.1. The originator completes all relevant forms based on the use of the aircraft. Appendix A is required for all charter requests. Appendix B is required for all charters to be used for research purposes.

5.2. The department head or chair will review and forward all approved forms to EH&S at ehs@fau.edu.

5.3. EH&S will review all forms submitted and forward all approved forms to Procurement.

5.4. Procurement will work with the requestor on additional requirements for procurement.

6. ENFORCEMENT:

Oversight and enforcement activities for this program are conducted by Environmental Health and Safety.

Approved and issued by order of:

[Signature]

Wendy Ash Graves, Director
ENVIRONMENTAL HEALTH AND SAFETY

DATE: 7/6/23

POLICY MAINTENANCE SECTION

<table>
<thead>
<tr>
<th>Last Revision Date</th>
<th>04/07/2023</th>
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<tr>
<td>Last Revision By</td>
<td>W. Ash Graves</td>
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<tr>
<td>Next Review Due</td>
<td>04/07/2026</td>
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<tr>
<td>Review Frequency</td>
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<td>Version</td>
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<td>Time-sensitive Items</td>
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THIS POLICY RESCINDS ALL OTHER WRITTEN DIRECTIVES REGARDING THIS TOPIC.
7. RECORD OF CHANGES/STATUS CONTROL:

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Summary of Changes</th>
<th>Reviewed By</th>
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<tr>
<td>2.0</td>
<td>04/07/2023</td>
<td>Moved from DOR to EH&amp;S, reformatted, provided more detail on responsible departments' procedures.</td>
<td>W. Ash Graves</td>
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Application to Charter Aircraft for FAU

INSTRUCTIONS:

Use this Application to initiate an aircraft charter. If the charter will be used for FAU Research, submit completed form along with FAU Charter Aircraft for Research Scope of Work form and a Purchase Order Requisition to your Chair for approval.

After receiving approval forward to University Risk Manager. After receiving University Risk Manager approval form will be sent to Purchasing.

INITIATING DEPARTMENT:

Date of Application: ________________________________

Department: _________________________________________

Department Contact: ________________________________

                      Phone: ____________________________
                      E Mail: ____________________________

CHARTER INFORMATION:

Planned Date(s) for Charter(s): ________________________________

Employee Chartering Aircraft: ________________________________

Number of Passengers: ________________________________

  FAU Employees: ________________________________
  FAU Students: ________________________________

Others: ________________________________

Purpose of Charter: ______________________________________

PROPOSED AIRCRAFT INFORMATION

Owner: ________________________________

Operator: ________________________________

FAA Charter License (Attach Copy): ________________________________

List Aircraft Tail #('s): ________________________________
List FAA Airworthiness Certificate #('s) (Attach copy):

List Aircraft Type(s):

List # of Crew for each Aircraft:

Total # of Seats:

List Name(s) of Pilot(s):

List Pilot’s License #('s) (Attach Copy):

*Insurance Company (Attach Certificate of Insurance):

REVIEW AND APPROVAL

Department Chair: ___________________________ Date________________

University Risk Manager: ___________________________ Date________________

Purchasing: ___________________________ Date________________

* Florida Atlantic University must be added as an additional insured on all liability policies. Aviation liability must include passenger liability in minimum limits of $500,000 times the number of seats. Evidence of general liability, workers compensation and auto liability must be evidenced on the Certificate.
EHS P&P #04 – Use of Charter Aircraft for FAU

FAU Charter Aircraft for Research
Scope of Work
(Complete all fields using instructions on Page 9)

<table>
<thead>
<tr>
<th>Proposed Work Description</th>
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<tbody>
<tr>
<td>1. RESEARCH MOTIVATION</td>
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<tr>
<td></td>
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<tr>
<td>2. PROPOSED METHOD</td>
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<td></td>
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<tr>
<td>3. PRECEDENTS AND REFERENCES</td>
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<td></td>
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<tr>
<td>4. FAU PASSENGER JUSTIFICATION</td>
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Version #1.0
(FAU – EH&S - P&P 04/07/2023)
| 5. PERIOD OF PERFORMANCE |

<table>
<thead>
<tr>
<th><strong>Mission Details</strong></th>
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<tbody>
<tr>
<td>6. RESEARCH LOCATION/AREA (attach if needed)</td>
</tr>
<tr>
<td>9. MISSION FREQUENCY</td>
</tr>
<tr>
<td>12. NO. OF AIRCRAFT</td>
</tr>
</tbody>
</table>

| **13. AIRCRAFT TYPE(S) AND DESCRIPTION(S)** |

<table>
<thead>
<tr>
<th><strong>CRUISE</strong></th>
<th><strong>MINIMUM</strong></th>
<th><strong>MAXIMUM</strong></th>
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<tbody>
<tr>
<td>14. AIRSPEED</td>
<td>15. ALTITUDE</td>
<td>16. AIRSPEED</td>
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<tr>
<td>KTS</td>
<td>FT</td>
<td>KTS</td>
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<td>17. ALTITUDE</td>
<td>18. AIRSPEED</td>
<td>19. ALTITUDE</td>
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<td>FT</td>
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<thead>
<tr>
<th>20. NO. PASSENGERS</th>
<th>21. EQUIPMENT CARRIED ONBOARD</th>
<th>22. TOTAL EST. WEIGHT</th>
</tr>
</thead>
<tbody>
<tr>
<td>23. DEPARTURE AIRPORT</td>
<td>24. DESTINATION AIRPORT</td>
<td>25. LIST INTERNATIONAL AIRSPACE</td>
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**Version #1.0**

(FAU – EH&S - P&P 04/07/2023)
## EHS P&P #04 – Use of Charter Aircraft for FAU

<table>
<thead>
<tr>
<th>26. REFUEL NEEDED?</th>
<th>27. SPECIAL LANDING/TAKE-OFF REQUIREMENTS</th>
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### 28. SPECIAL AIRCRAFT CAPABILITIES NEEDED

### Other Special Safety

<table>
<thead>
<tr>
<th>29. FLIGHT FOLLOWING AND/OR COORDINATION PLAN</th>
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| 30. AERIAL HAZARDS                           |
|                                              |

| 31. SPECIALIZED TRAINING                     |
|                                              |

| 32. PERSONAL SAFETY DEVICES                  |
|                                              |

| 33. SPECIAL AIRCRAFT SAFETY                  |
|                                              |

| 34. SPECIAL SURVIVAL CONSIDERATIONS          |
|                                              |
35. RESCUE PLAN

36. MISSION ORDER/CANCELLATION PROTOCOL

Statement of Work

As evidenced by my signature set forth below, I certify that we can perform all work proposed under the Scope of Work set forth above. I understand that this is NOT a contract to actually do work but is only an acknowledgment that we can conform to the requirements as set forth above.

Signed this ______ day of ________________, 20____ at ___ : ___ AM/PM

Printed Name

Signature: ________________________________________________

Title: __________________________________________________
Each field in the FAU Charter Aircraft for Research Scope of Work Form is numbered with a descriptive title. See corresponding instructions for each field below. Units are indicated in the fields (where appropriate), but additional information is included in the field instructions.

1. Provide background information about the research context for the aircraft charter request, specifically what the research is, and how the aerial surveys will contribute. This field is intended to be a narrative, including academic references, if relevant. Although intended to be a summary, it may be necessary to include additional narrative as an attachment.

2. Include a summary of the proposed method, area, and frequency for aerial research in sufficient detail to understand the scope of the proposed work. Although intended to be a summary, it may be necessary to include additional narrative as an attachment.

3. Cite references for previously demonstrated similar efforts or precedents. Although intended to be a summary, it may be necessary to include additional narrative as an attachment.

4. Provide a narrative explanation why FAU faculty, staff, or students will be onboard during flights, and how many. Although intended to be a summary, it may be necessary to include additional narrative as an attachment.

5. Indicate the total period of performance for the proposed work.

6. Describe the location and/or area where aerial missions will be completed. Attach graphics or maps if necessary.

7. The individual total mission range in nautical miles.

8. The total duration of each proposed mission in hours.

9. Indicate the frequency of missions, and the total number of missions.

10. Calculate the total flight hours based upon the period of performance, mission frequency, mission number, and mission hours.

11. Indicate restrictions of time of day and/or year for the successful completion of the proposed work.

12. Indicate the proposed number of aircraft simultaneously required for each mission.

13. Provide an explanation of the type(s) of aircraft recommended and/or required to accomplish the proposed work with sufficient clarity that an aircraft charter vendor can determine if frames are appropriate and available to satisfy. The PI should work with the vendor to select an appropriate aircraft frame and propulsion based upon these defined mission and safety requirements. Precedents from previous similar efforts are desired. Include additional narrative as an attachment.

14. Indicate the average cruise airspeed during an individual mission in knots.

15. Indicate the average cruise altitude during an individual mission in feet altitude.

16. Indicate the minimum airspeed during an individual mission in knots.

17. Indicate the minimum altitude during an individual mission in feet altitude.

18. Indicate the maximum airspeed during an individual mission in knots.

19. Indicate the maximum altitude during an individual mission in feet altitude.

20. Indicate the number of FAU passengers required for each mission.

21. List any equipment to be carried onboard during flights required for mission and research accomplishment.

22. Indicate the total estimated weight of equipment carried onboard, exclusive of passenger weight. Passenger weight is estimated with a standard constant based upon total passengers and should not be included.

23. List the departure airport using its International Air Transport Association (IATA) code, if available.

24. List the destination airport using its International Air Transport Association (IATA) code, if available. If the destination airport is the same as the departure airport, list the entry in 23.

25. List any international airspace(s), if any, which will be entered during individual missions. If none, indicate with N/A.

26. Indicate if refueling will be necessary during an individual mission.

27. Describe any special landing or take-off requirements which would restrict available alternative sites.

28. Describe any special aircraft capabilities needed beyond frame selection to accomplish the proposed research. Attach any additional information required.

29. Provide an explanation of any independent flight-following and/or coordination planning. This would include any recommended additional oversight during missions exclusive of the required FAU and FAA flight following (typically restricted to departure and arrival check-in).

30. List any anticipated potential aerial hazards based upon flight altitudes and locations.

31. Indicate any recommended or required training to qualify as a passenger during missions. This training can be specialized safety or research related.

32. List any personal safety devices recommended or required for each FAU passenger to carry (e.g. personal locator beacon, life jacket, etc.) based upon mission conditions.

33. List any specialized safety features required, recommended, or available for the aircraft based upon mission conditions.

34. Describe any unique survival considerations for rescuers (e.g. extreme temperatures, long distances, high currents, high altitudes, dense vegetation, etc.)

35. Describe rescue plans beyond contacting emergency services (e.g. ditch protocol, other aircraft orientation information, etc.)

36. Describe the mission ordering and mission cancellation protocol. Responsibilities, authority, and rights should be clear to all parties.