**Application for Extension of the Validity Period of the Certificate of Accounting of an Unmanned Aircraft System and to the Register of Unmanned Aircraft Systems of**

**Civil Aviation of the Republic of Kazakhstan**

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| 1 | **Information about the unmanned aircraft system** | |
| Certificate number, date of issue |  |
| The aircraft number |  |
| Manufacturer |  |
| Model |  |
| Serial number |  |
| Permanent location |  |
| The accounting number of the declaration or certificate of compliance or the identification of compliance of the copy assigned by the authorized organization |  |
| 2 | Validity period (filled in by the applicant when extending the validity period of the Certificate of accounting of an unmanned aircraft system) | |
| For a period of 5 years ☐  For the duration of the lease agreement ☐ | |
| The term of the lease agreement (if available) | date/month/year |
| 3 | **Information about the applicant** | |
| Indicate whether the applicant is:  the Owner ☐  the Operator ☐ | |
| Full name of the legal person /  Surname, First name, middle name (if available) of an individual person |  |
| The applicant's legal address (region, district, locality, street, house number, apartment) |  |
| Phone number, e-mail address of the applicant |  |
| Business Identification Number /  Individual identification number of the applicant |  |
| 4 | Data of the owner or operator, if different from the applicant |  |
| Full name of the legal person /  Surname, First name, middle name (if available) of an individual person |  |
| The legal address (region, district, locality, street, house number, apartment) |  |
| Phone number, e-mail address of the applicant |  |
| Business Identification Number /  Individual identification number of the applicant |  |

Confirmation information:

there is no encumbrance on the declared unmanned aircraft system.

I agree to the use of information that constitutes a legally protected secret contained in information systems.

I declare that the information provided in this application and/or the documents attached to it are correct in all respects.

Applicant **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/**

(signature of the authorized (decryption of the signature: surname, first name,

person of the applicant) middle name (if available), position)

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