Form No: **CAA/AS/018**
Civil Aviation Authority of Sri Lanka

Mandatory Occurrence Reporting (MOR)

(Unmanned Aerial Vehicle / Remotely Piloted Aircraft/ **Drone** / Quadcopter etc.)

(Report on the incident shall be submitted to the Director General of Civil Aviation via Registered post - Postal address ; Civil Aviation Authority of Sri Lanka, No 04, Hunupitiya Road, Colombo 02 , Fax +94 11 2304641 or email scaiais@caa.lk , aiso1@caa.lk , dans@caa.lk by the owner/operator within a day of its occurrence.)

<<<<<<<<Operator or the owner shall immediately report any occurrence of an accident or incident involving destruction of private or public property and any injury caused to the third party by any operation of pilotless aircraft to the nearest police station of the location of occurrence.>>>>>>

For Office use only

A. Registered Information

Have you registered your Drone with Civil Aviation Authority of Sri Lanka? Yes No

If yes, CAASL Reference No C A A S L / D R / - -

a) Registered Name

Name with Initials

Title (Mr. /Ms. etc.)

Date of Birth (DD/MM/YYYY)

National Identity Card No (Example: 820991171V/1982 945 0 1212)

Passport No (If not a Sri Lankan Citizen)

Company Name

Required only when you have registered a pilotless aircraft/drone for business purposes.
Use N/A when registered for personal use.

Accountable Manager/Person (Name in Full)

b) Email address

c) Phone number

Land line

Mobile no

B. Operator's Information

a) Name

Name with Initials

Name in Full

Title *(Mr. /Ms. etc.)*

Date of Birth *(DD/MM/YYYY)*

National Identity Card No *(Example: 820991171V/1982 945 0 1212)*

Passport No (If not a Sri Lankan Citizen)

b) Permanent address

City

Zip/Postal Code

Country

C. Pilotless Aircraft/Drone Information

a) Pilotless Aircraft/Drone Manufacturer

Example. DJI, Parrot, etc.

b) Pilotless Aircraft/Drone Model

Example. Phantom 4 Pro, Phantom 3, Mavic Pro etc.

c) Pilotless Aircraft/Drone Craft Serial Number

Example. P5AUDJ430101CF, 07DJD7A0C10889 *Serial Number (S/N) can usually be found on or inside battery compartment or drone box.*

D. Occurrence Information

a) Date of Occurrence

b) Time of Occurrence

: LOCAL

C) Place of Occurrence

d) If person (s) injured and extent of injury, if any or known;

Name	Extent of Injury	Remarks

e) Description of Occurrence

f)

Notification to the adjacent police station of the location of occurrence	Yes	No
Name (area) of the Police Station		

Signature

Date

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