Attachment 14 Activity Plan of Government Agencies (Institutions), Schools or Legal Persons

| Designation of Operation | | <u> </u> | <u>``</u> | | |
|---|---|-----------------|-----------------|-----------------|--|
| Purpose | | | | | |
| Applicant | | | | | |
| Responsible Person of Applicant | Name | | Tel. | | |
| Responsible Person on Site | Name | | Mobile No. | | |
| Operator | Name | Name Mobi | | 0. | |
| | Name | | Mobile No. | | |
| Coordinator | Name | | Mobile No. | | |
| Drone | Registration No. | | | | |
| Date and Time of Operation (24-hour System) | From | MM/DD/Year : | | MM/DD/Year : | |
| | From MM/DD/Year To | | MM/DD/Year : | | |
| Each Point Comprising Airspace (WGS-84/Additional point(s) to be added where necessary) | 1. Latitude | °′"N | Longitude | °′"E | |
| | 2. Latitude | °'"N | Longitude | °′"E | |
| | 3. Latitude | °'"N | Longitude | °"E | |
| | 4. Latitude | | Longitude | _°_′_"E | |
| Operation Height Coordinate of the Center of | FromFt. toFt. (AMSL, Above Mean Sea Level) Actual Height (ground/mountain)Ft. (AGL, Above Ground Level) | | | | |
| Operation Area (WGS-84) | Latitude | _°'"N | Longitud | e | |
| Radius of Operation Area (Nm) | | | | | |
| Description of Operation | | | | | |
| Exclusion of Operating Limitations | □ The actual height of the flight activity of the Drone shall not exceed 400 feet above ground level or sea level. □ Dropping or spraying any object from Drone is prohibited. □ Carrying hazardous item as listed in Article 43, Paragraph 3 of the Act is prohibited. □ Operation limitations as set out in Article 99-17 of the Act shall apply: □ No activity is allowed above the crowd or outdoor assembly and parade. □ No flight activity is allowed between sunset and sunrise. □ Operation shall be within the visual range; no tool shall be used to extend the distance of flight | | | | |

| | | operation except corrective lens. | | |
|---|-------|---|--|--|
| | | The operator shall not control two or more Drones | | |
| | | at the same time. | | |
| | 1. | Please adjust the items in this form depending on | | |
| | | the substantive needs at your own initiative when | | |
| | | filling this form. | | |
| | 2. | Please file the application with CAA, or municipal | | |
| | | or local county (city) government 15 days before | | |
| | | the operation; provided, however, that where the | | |
| | | prohibited area, restricted area or the airport | | |
| | | involves the area which is administered by the | | |
| | | military authority (institution), the application shall | | |
| Note | | be filed 30 days before the operation. | | |
| 1,000 | 3. | If exclusion of operating limitations is applied for, | | |
| | | the proof of insurance in compliance with Article | | |
| | | 99-15, Paragraph 3 of the Act shall also be | | |
| | ١, | submitted. | | |
| | 4. | After CAA approves the application for the | | |
| | | activity set out in Article 99-14, Paragraph 1, | | |
| | | subparagraph 1, the dispatch of contact persons | | |
| | | shall be confirmed to the flight control unit in | | |
| | | compliance with the relevant approval conditions | | |
| It is to contify that the information | prot | or pursuant to the approval before each activity. | | |
| It is to certify that the information provided herein is true and accurate, and to warrant that | | | | |
| (i) each of "Land Surveying and Mapping Act", "Vital Area Regulations", "The Classified | | | | |
| National Security Information Protection Act", "Regulations Governing Aerial | | | | |
| Photogrammetry and Remote Sensing" shall be followed, (ii) the channel as approved by | | | | |
| National Communications Commission shall be used, (iii) the operating team members are | | | | |
| familiar with the flight operation manual and the Regulations, have completed coordination | | | | |
| for relevant airspace, and the safety of other aircraft, ground persons and properties shall | | | | |
| not be compromised during the operation. We agree to abide by the directions of CAA, | | | | |
| flight control unit, relevant military authority and municipal or county (city) government in | | | | |
| the course of the operation. We also undertake to assume all liability in case of violation | | | | |
| of any of the above. | | | | |
| Applicant: | (Offi | icial Stamp) | | |
| Date: / / M | Montl | n/Day/Year | | |
| | | | | |
| Consent or Approval of | | | | |
| Relevant Authority and | | | | |
| Operation Conditions | | | | |
| (Civil Aeronautics | | | | |
| Administration / Municipal, | | | | |
| County (City) Government) | | | | |
| | 1 | | | |

Area 1. Please use TGOS MAP. 2. Please mark the take off and landing locations as well as points Note in airspace by number in chronological order.

Drone Operation Area (including coordinate)