**REQUEST FOR AIRCRAFT SERVICES**

(Requests should be made to dispatch at least 48 hours prior to flight)

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| REQUESTING UNIT: | | | | | | | | | | | | |  | | | | | | | | | | | | CONTACT PERSON: | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| AIRCRAFT NEEDED: | | | | | | | | | | | | | | | | | | | |  | | | | | | HELICOPTER | | | | | | | | | | | | | |  | | | | | | | FIXED WING | | | | | | | |
| JOB CODE(s): | | | | | | | | |  | | | | | | | | | | | | | | | | | PROJECT MGR./ | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | PROJECT LEADER: | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| PROJECT PLAN REQUIRED? | | | | | | | | | | | | | | | | |  | | | | | | | | | | | USER CODE: | | | | | | | |  | | | | | USAGE CODE: | | | | | | | | |  | |
| FLIGHT DATE: | | | | |  | | | | | | | | | | | TIME TO BE ON SITE: | | | | | | | | | | | | | | | |  | | | | | LEGAL LOCATION | | | | | | | | |  | | | | | | | | | | |
| LATITUDE/  LONGITUDE: | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | DESCRIPTIVE LOCATION: | | | | | | | | | | |  | | | | | | | | | | | |
| DESCRIPTION OF MISSION (RECON, PAX TRANSPORT, CARGO, AERIAL IGNITION, ETC.): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| FLIGHT FOLLOWING/COMMUNICATIONS INFORMATION: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Rx: |  | | | | | Tx | | | | |  | | | | | | | | | TTone | | | | | | | |  | | | | | | Notes: | | | |  | | | | | | | | | | | |
| #PAX: | | |  | | | | | | | **1** | | | | **NAME:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | |  | | | |
|  | | | |  | | | | | | |  | | | **(Chief of Party)** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | |
| (Star\* any Non-FS | | | | | | | | | | | 2 NAME: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | | |  | | |
| passengers and | | | | | | | | | | | 3 | | | | NAME: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | | |  | | |
| complete Day Trip | | | | | | | | | | | 4 | | | | NAME: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | | |  | | |
| authorization) | | | | | | | | | | | 5 | | | | NAME: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | | |  | | |
|  | | | | | | | | | | | 6 | | | | NAME: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | WEIGHT: | | | | |  | | |
| CARGO TYPE (CAMP GEAR, CUBIES, CHAINSAWS, HAZ. MAT.: FUEL, COMPRESSED GAS, BATTERIES--DRY OR WET CELL, PAINT, FIREARMS, PEPPER SPRAY, ETC): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TOTAL CARGO WEIGHT: | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| LONG LINE REQUIRED? YES | | | | | | | | | | | | | | | | | | |  | | | | | NO | | | | | |  | | | | LINE LENGTH REQUIRED: | | | | | | | | | | | | | |  | | | |
| OTHER EQUIPMENT NEEDED (NETS, LEAD LINES, FLIGHT SUITS, SNOW PADS, ETC.): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| GROUND CONTACT: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | FREQUENCY: | | | | | | | | | | |  | | | | | | | |
| ESTIMATED TOTAL TIME REQUIRED FOR MISSION: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| ADDITIONAL INFO OR REMARKS, HAZARDS: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
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**\*\*NOTE\*\*** **ALL PERSONS TRANSPORTED IN HELICOPTER ARE REQUIRED TO WEAR LEATHER BOOTS, GLOVES (LEATHER OR NOMEX), NOMEX** **CLOTHING (w/2” OVERLAP), AND FLIGHT HELMET. NO SYNTHETIC MATERIALS MAY BE WORN NEXT TO THE SKIN.**