

## AIRCRAFT ORDER REQUEST FORM

DISPATCHER:		ZONE / DISTRICT:		ORDERED BY & POSITION ON FIRE:	
INC. NAME		INC #		DATE & TIME NEEDED	
LAT: _____ ° _____ ' N		LONG: _____ ° _____ ' W		ELEV: _____	
GROUND CONTACT:			A/G:		

### FIXED WING REQUEST

<input type="checkbox"/> SEAT _____ <input type="checkbox"/> FIRE BOSS _____ <input type="checkbox"/> SCOOPER _____ <input type="checkbox"/> LAT _____ <input type="checkbox"/> VLAT _____ <input type="checkbox"/> AIR ATTACK _____ <input type="checkbox"/> RECON _____ <input type="checkbox"/> OTHER _____	# OF EACH _____ <input type="checkbox"/> SMOKEJUMPERS _____ <input type="checkbox"/> RAPPPELLERS _____ Hazards? _____ Pos. on Slope: _____ Aspect: _____ Qualls Needed? _____	# OF EACH _____ <input type="checkbox"/> PARACARGO _____ <input type="checkbox"/> FOOD BOX _____ # of people _____ # of days _____ DELIVERY LAT: _____ ° _____ ' N DELIVERY LONG: _____ ° _____ ' W	NOTES: _____ _____ _____
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### ROTOR WING REQUEST

# OF EACH <input type="checkbox"/> T3 _____ <input type="checkbox"/> T2 _____ <input type="checkbox"/> T1 _____	<input type="checkbox"/> HELITACK _____ <input type="checkbox"/> BUCKET _____ <input type="checkbox"/> RECON _____ <input type="checkbox"/> SHUTTLE _____ # OF PEOPLE _____ <input type="checkbox"/> EXU _____ <input type="checkbox"/> CWN _____	<input type="checkbox"/> SLING _____ <input type="checkbox"/> MISSION _____ <input type="checkbox"/> BACKHAUL _____ LONG LINE: <input type="checkbox"/> 50' <input type="checkbox"/> 100' <input type="checkbox"/> 150'	HELI NEED NET? <input type="checkbox"/> SWIVEL? <input type="checkbox"/>	<b>HELISPOT INFORMATION</b>	NAME: _____ ELEV: _____ LAT: _____ ° _____ ' N LONG: _____ ° _____ ' W	NOTES: _____ _____ _____
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### VALUES AT RISK - Check all that apply, then put the number of each given in the space after text. \*

<input type="checkbox"/> <b>Human Life:</b>	<input type="checkbox"/> Public _____	<input type="checkbox"/> Responders _____	<input type="checkbox"/> Medical _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> <b>Structures:</b>	<input type="checkbox"/> Primary _____	<input type="checkbox"/> Secondary _____	<input type="checkbox"/> Commercial _____	<input type="checkbox"/> Outbuildings _____ <input type="checkbox"/> Other _____
<input type="checkbox"/> <b>Property:</b>	<input type="checkbox"/> Livestock _____	<input type="checkbox"/> Timber Sale _____	<input type="checkbox"/> T&E Species _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> <b>Community:</b>	<input type="checkbox"/> Town _____	<input type="checkbox"/> Rec Site _____	<input type="checkbox"/> Infrastructure _____	<input type="checkbox"/> Cultural / Historical _____ <input type="checkbox"/> Other _____

**TIMEFRAME FOR VARs: \***

NOTES:

\* Values at Risk and Timeframes are REQUIRED for all VLATs, LATs, T1H, national resources, and any other resources coming outside of local area \*