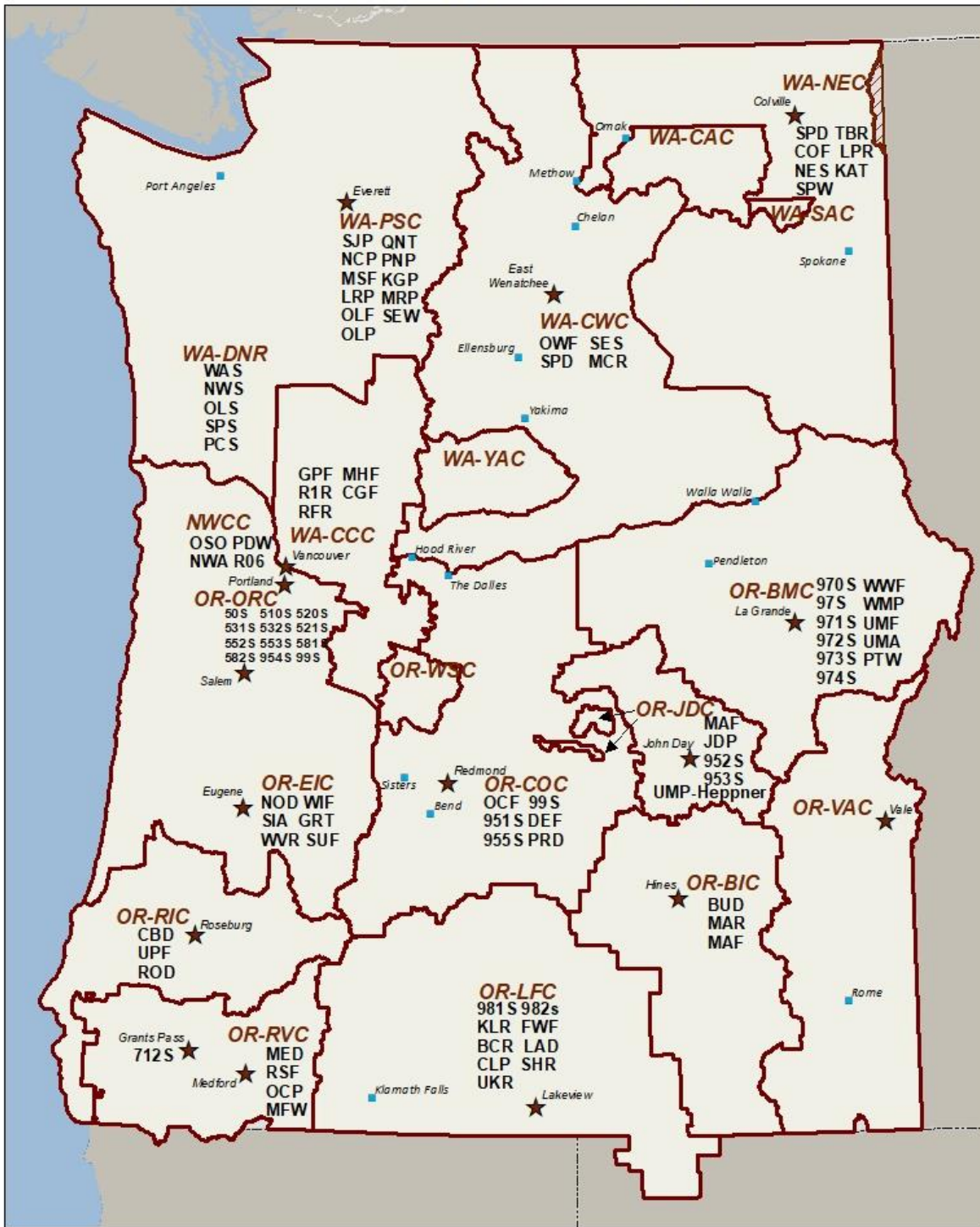
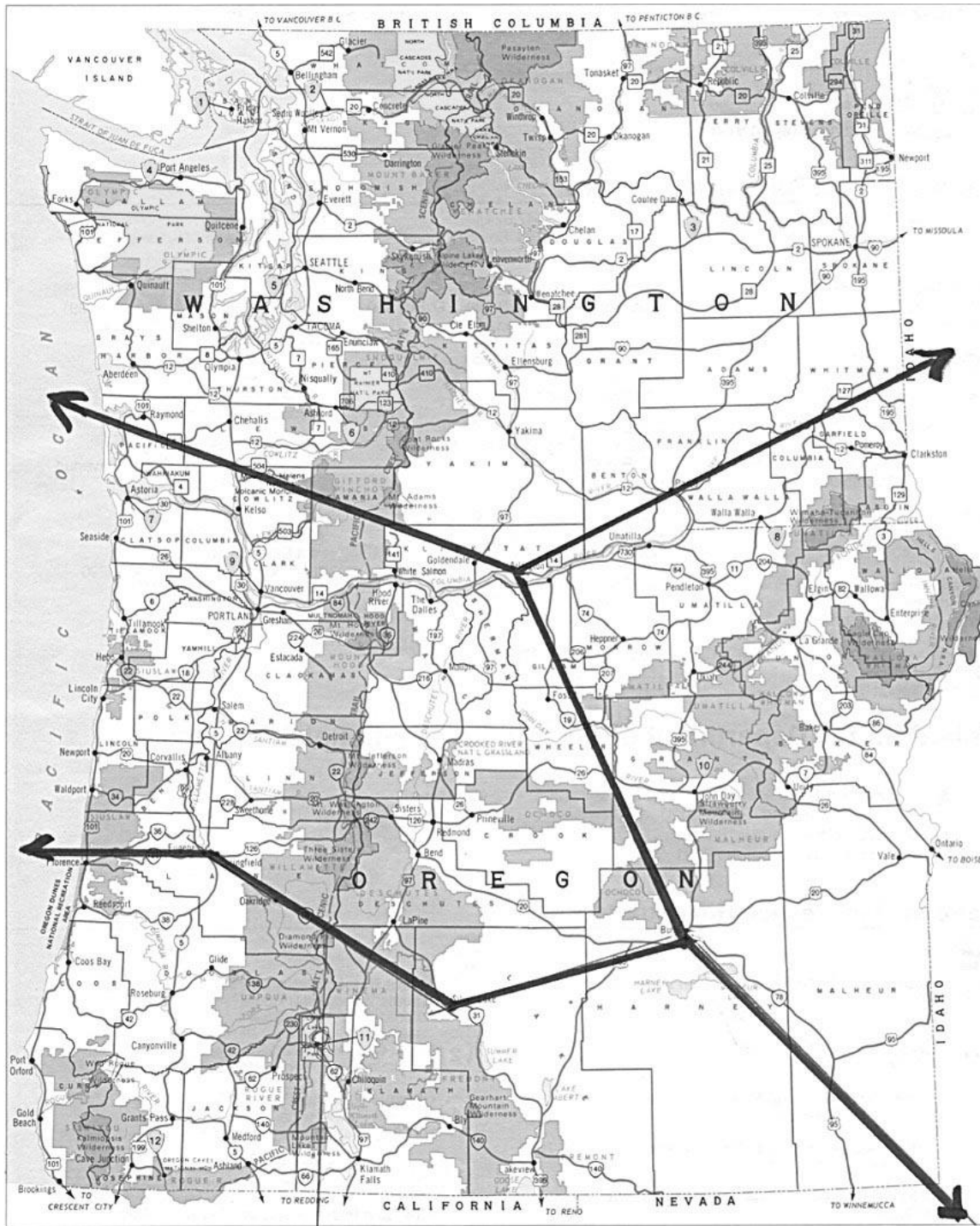


CHAPTER 80- MAPS AND FORMS

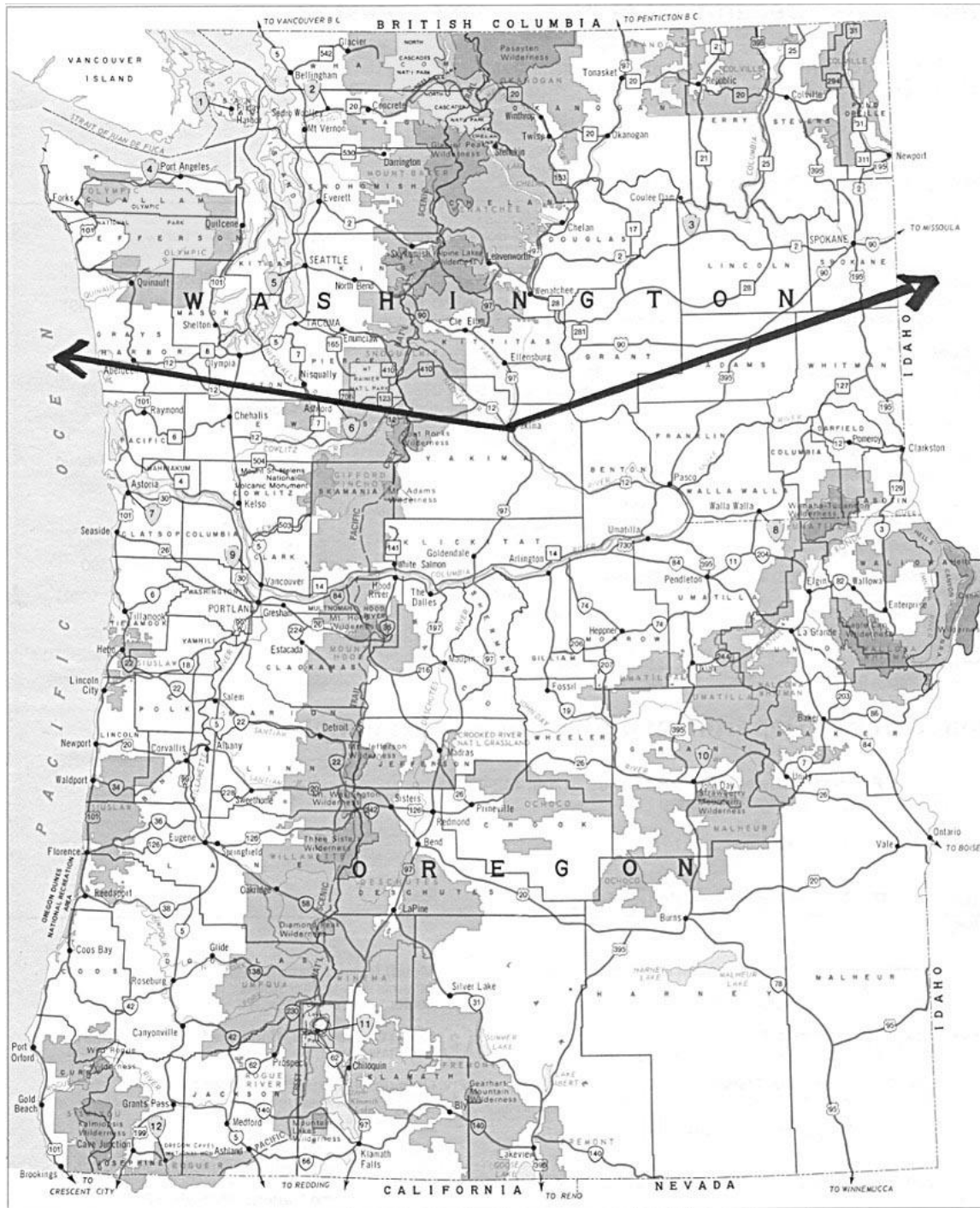
NWCC Dispatch Areas 2021



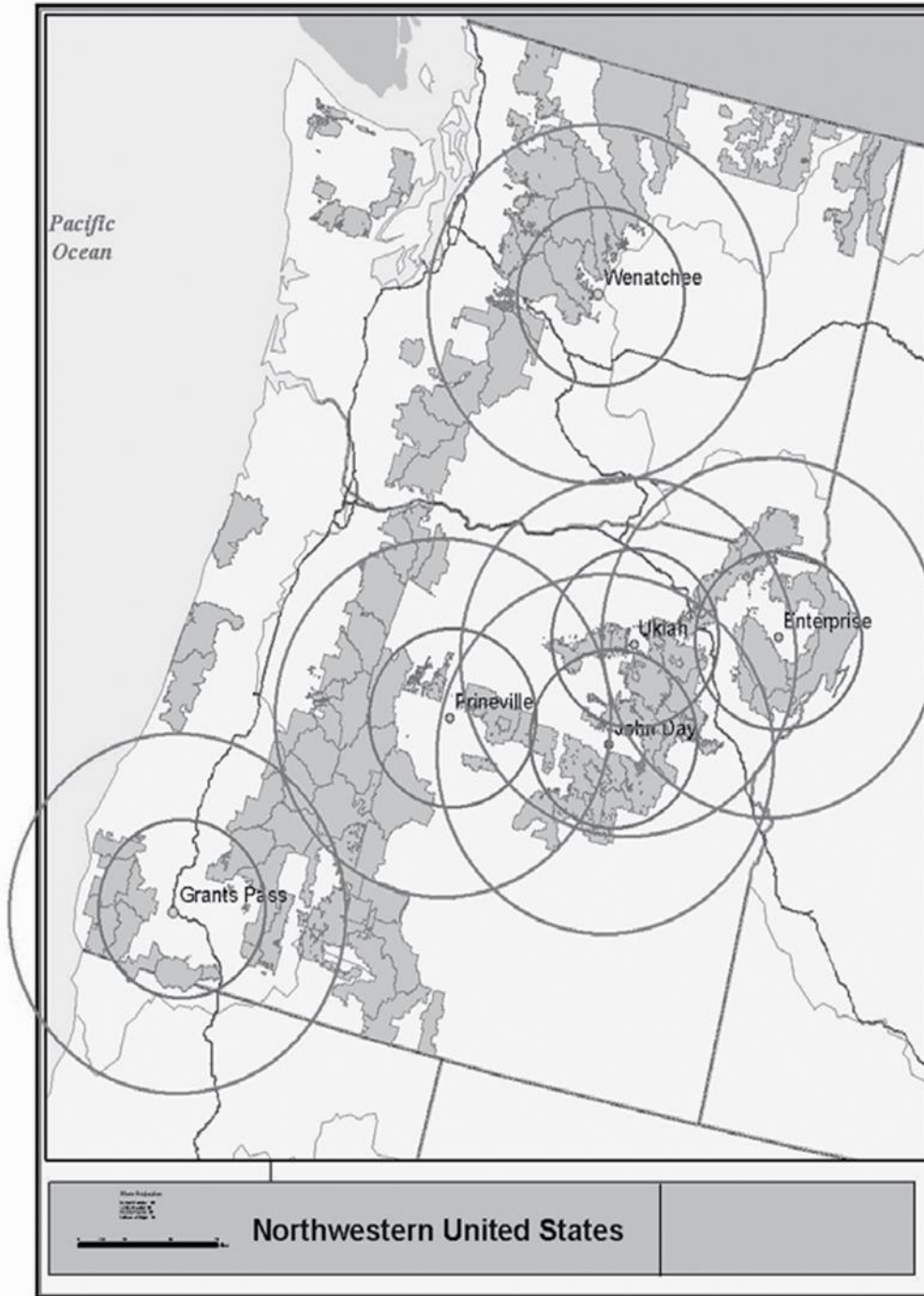
AIRTANKER DISPATCH GUIDE MAP



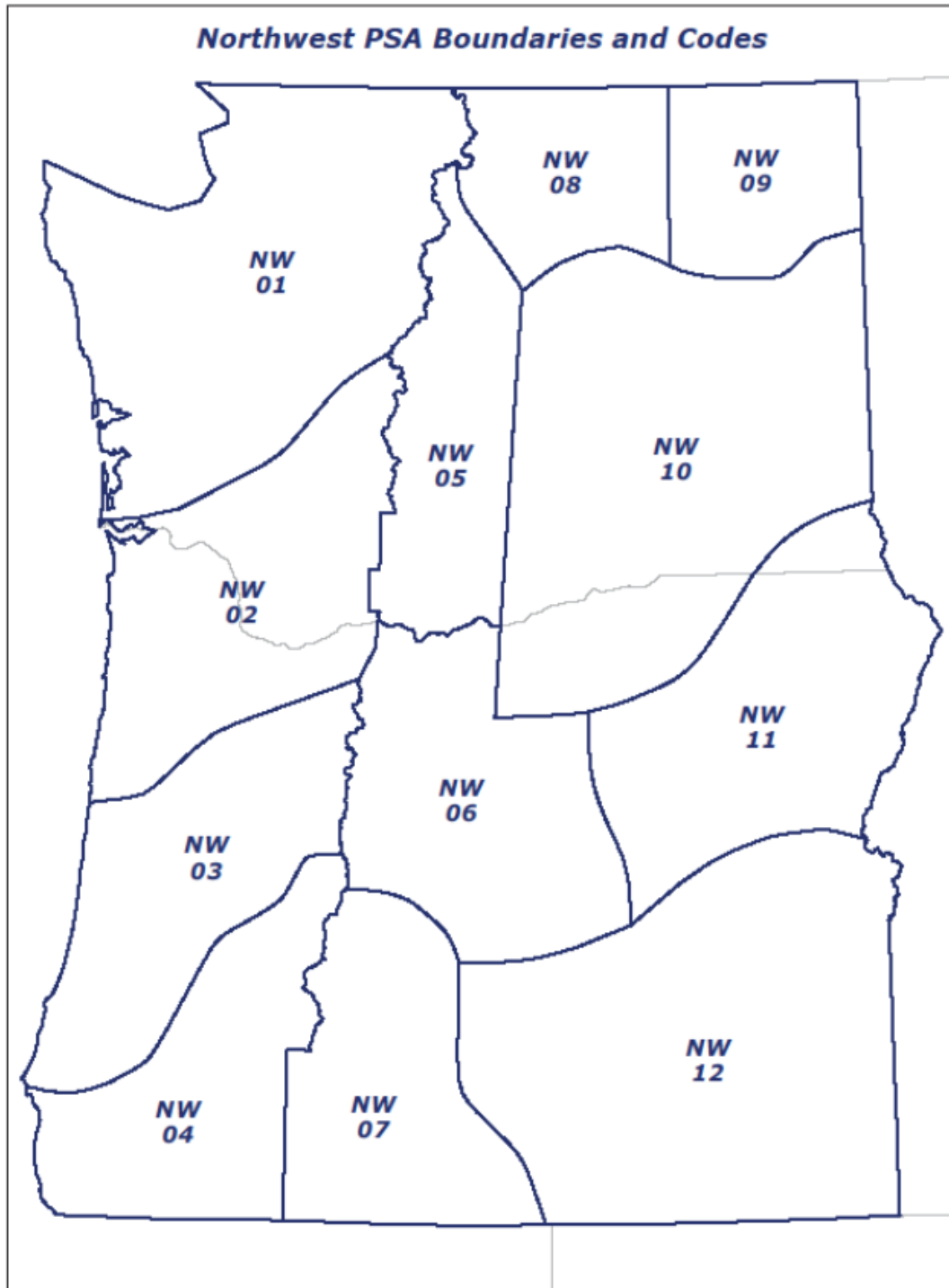
NORTHWEST AREA SMOKEJUMPER DISPATCH GUIDE MAP



NORTHWEST AREA RAPPELLER DISPATCH MAP



NORTHWEST PREDICTIVE SERVICES AREAS (PSA) MAP



TACTICAL AVIATION RESOURCE ORDER FORM

For full fillable TARO form: <https://www.nwccg.gov/sites/default/files/publications/pms250.pdf>

Incident Name/Number:		
Date:	Time:	Sunset +30:
Order #:		Charge Code:
Descriptive Location:		
Latitude:	Longitude:	Elevation:
Distance:	Bearing:	From:
Initial Point (IP) Descriptive:	(IP) Latitude:	(IP) Longitude:
Frequencies:		
Air to Air Primary:		Air to Air Secondary:
Air to Ground:		Ground Tactical
Command:		Flight Following:
Incident Aircraft:		
Other Aircraft:		Aircraft Hazards:
MTR/SUA	TFR:	Reload Base (s)

REQUEST FOR A TEMPORARY FLIGHT RESTRICTION

DATE: _____ TIME: _____	FAA ARTCC requires phone notification. ARTCC _____ FAA PHONE: _____ FAX: _____
Resource Order Number: _____ Request Number: A - _____	DISPATCH OFFICE _____ PERSON REQUESTING TFR: _____ 24 HR. PHONE (No Toll Free #s) _____

Circular Degrees Minutes Seconds Only – use zero’s for seconds if unavailable

LAT/LONG of Center Point (US NOTAM OFFICE FORMAT ddmssN/ddmmssW)	RADIUS (NM) (5 NM is standard)
N/ W	

Polygon (List perimeter points in clockwise order). For NES Input: Use the same NAVAID if possible for each point. List nearest NAVAID (distance < 50 NM) - do not use NDB or T-VOR. (For lat/long - Degrees Minutes Seconds only)

Point #	Lat/Long format ddmssN/ddmmssW	Point #	Lat/Long format ddmssN/ddmmssW
1	N W	5	N W
2	N W	6	N W
3	N W	7	N W
4	N W	8	N W

NOTAM # of TFR being replaced _____

Altitude (MSL: Only) _____
 24 hours a day? _____ or Daytime Operational Hours: (UTC) _____ to _____
 Incident TFR Duration: _____ to _____ (Estimate – 2 months out is ok)
 Format: YYMMDDhhmm to YYMMDDhhmm

Geographic Location of Incident (NM from nearest well known location recognizable to general aviation or local town, state)

Agency in Charge _____ Incident Name _____

24 hour phone number (No toll Free #s) _____ VHF-AM Air to Air Frequency _____

This will affect the following Special-Use Airspace: (MOA, RA, WA, PA, AA): _____

This will affect the following Military Training Routes:					
Route	SEGMENT(S)	SCHEDULING ACTIVITY	Route	SEGMENT(S)	SCHEDULING ACTIVITY

NOTAM # _____ Time Issued _____ Date ____ / ____ / ____

Date/Time TFR Canceled: _____ By: _____ Replaced by _____