DATE: _____

R-2508 COMPLEX
FLIGHT ACTIVITY NOTIFICATION

POINT OF CONTACT (POC): _____ INCIDENT #:_____
(Name of Agency and person)

POC PHONE NUMBER: _____ EMAIL: _____

TYPE ACTIVITY: (mark as appropriate)

_____ TFR (See NOTAM #_____ or attached TFR Request copy for more information)

_____ WIDE SPREAD ACTIVITY (work spread over a wide area of operations)

_____ CONCENTRATED ACTIVITY (work confined to a concentrated area of operations)

OPERATION START: DATE: _____ TIME: _____

OPERATION END: DATE: _____ TIME: _____

DISCRIPTION OF WORK AREA (Degrees, Minutes, Seconds, Nautical Miles)

LATITUDE: _____ LONGITUDE: _____ RADIUS: _____

ALTITUDE: AT AND BELOW _____ MSL_____ AGL

AIRCRAFT INFORMATION: CALL SIGN: _____ TYPE AIRCRAFT: _____

ADDITIONAL INFORMATION/SYNOPSIS OF MISSION: (Includes airbases, routes of flight, etc)

CHECKLIST: (Time/Initials)

SEND EMAIL/CALL CCF: Email form(s) to (2508ccf@us.af.mil), CCF Telephone (661) 277-2508.

******FOR AFTER HOURS (M-F 1800-0600, SAT and SUN) FLIGHT ACTIVITY NOTIFICATION******
CONTACT JCF AT (661) 277-3843. Email form(s) to (9-awp-e10-tmu@faa.gov / other email as directed) or fax to (661) 258-4850.

SENT TO: _____CCF _____JCF TIME: _____ DATE: _____

CONFIRM EMAIL RECEIPT WITH: _____CCF _____JCF TIME: _____ NAME: _____
(Person contacted)

CANCELLATION/AMENDMENTS FORWARDED: _____CCF _____JCF TIME: _____ NAME: _____
(Person contacted)

COMMENTS: