

SOUTHWEST AREA AIRCRAFT FLIGHT FOLLOWING REQUEST

INITIAL REQUEST INFORMATION			ORIGINATING OFFICE #				COST MANAGEMENT CODE				TYPE A/C - FW or RW				
DATE/TIME		TO/FROM										FAA "N" Number			
				INCIDENT #		INCIDENT NAME		RESOURCE #							
MISSION DESCRIPTION - CHECK or CIRCLE ONE											CALL SIGN				
MOBILIZATION			DEMOBILIZATION			ADMINISTRATION			SES						
NAME/TYPE OF CARGO		LBS	RESOURCE ORDER # OR ADMIN TRAVEL AUTH#			NAME/TYPE OF CARGO		LBS	RESOURCE ORDER # OR ADMIN TRAVEL AUTH#			MAKE MODEL			
												COLOR			
												PAX SEATS			
												VENDOR VENDOR #			
												PILOT PILOT #			
DOCUMENTATION											FLIGHT MANAGER				
											PHONE #				
FLIGHT ITINERARY – USE MILITARY TIME ONLY															
DEPART WITH			DEPART FROM			TIME ZONE EX:MDT/MST	ENROUTE	ARRIVE TO			TIME ZONE EX: MDT/MST	DROP OFF		INFO RELAY	
DATE	NO. PAX	LBS	AIRPORT	ETD	ATD		ETE	AIRPORT	ETA	ATA		NO. PAX	LBS	TO/FROM	
FLIGHT FOLLOWING - CHECK or CIRCLE ONE											NATIONAL FF 168.650 & AIR GUARD (168.625)				
AGENCY { AFF } OR {15 MINUTE CHECK-IN VIA RADIO}															
FAA { IFR } OR {VFR}															
TRAVELING WITHIN GEO AREA CALL SWCC AT EVERY FUEL STOP 1-888-440-4333											DATE:				
TRAVELING OUTSIDE GEO AREA CALL NICC FF AT EVERY FUEL STOP 1-800-994-6312											TIME:				
											BY WHOM:				
											CLOSE OUT				

Reminder: Attach Cost Comparision /Justicfication Forms if needed