

HAZARD ANALYSIS AND DISPATCH/AVIATION MANAGER CHECKLIST

I. MISSION FLIGHT HAZARD ANALYSIS (Fire flights exempt provided a pre-approved plan is in place). The following potential hazards in the area of operations have been checked, have been identified on flight itinerary map, and will be reviewed with Pilot and Chief-of-Party prior to flight.

<p><input checked="" type="checkbox"/> Military Training Routes (MTRs) or Special-Use Airspace (MOAs, Restricted Areas, etc) N/A</p> <p>Areas of high-density air traffic (airports); Commercial or other aircraft N/A</p> <p><input checked="" type="checkbox"/> Wires/transmission lines; wires along rivers or streams or across canyons N/A</p> <p><input checked="" type="checkbox"/> Weather factors; wind, thunderstorms, etc.</p>	<p><input checked="" type="checkbox"/> Towers and bridges</p> <p><input checked="" type="checkbox"/> Other aerial obstructions</p> <p><input checked="" type="checkbox"/> Pilot flight time/duty day limitations and daylight/darkness factors</p> <p style="padding-left: 40px;">SUNRISE _____</p> <p style="padding-left: 40px;">SUNSET _____</p> <p><input checked="" type="checkbox"/> Limited flight following communications</p>	<p>High elevations, temperatures, and weights:</p> <p style="padding-left: 40px;">MAX LANDING ELEV (MSL) _____</p> <p style="padding-left: 40px;">MIN FLIGHT ALTITUDE AGL. _____</p> <p>Transport of hazardous materials N/A</p> <p>Other _____ GPS equipment _____</p> <p>_____</p>
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II. DISPATCHER/AVIATION MANAGEMENT CHECKLIST

<p><input checked="" type="checkbox"/> Pilot and aircraft carding checked with source list and vendor, carding meets requirements</p> <p>Or, Necessary approvals have been obtained for use of uncarded cooperator, military, or other government agency aircraft and pilots</p> <p><input checked="" type="checkbox"/> Check with vendor that an aircraft with sufficient capability to perform mission safely has been scheduled</p> <p><input checked="" type="checkbox"/> Qualified Aircraft Chief-of-Party has been assigned to the flight (noted on reverse)</p> <p><input checked="" type="checkbox"/> All DOI passengers have received required aircraft safety training</p> <p><input checked="" type="checkbox"/> OR, Aviation manager will present detailed safety briefing prior to departure</p> <p><input checked="" type="checkbox"/> Bureau Aircraft Chief-of-Party will be furnished with Chief-of-Party/Pilot checklist and is aware of its use</p>	<p><input checked="" type="checkbox"/> Means of flight following and resource tracking requirements have been identified</p> <p>Flight following has been arranged with another unit if flight crosses jurisdictional boundaries and communications cannot be maintained</p> <p><input checked="" type="checkbox"/> Flight hazard maps have been supplied to Chief-of-Party for non-fire low-level missions</p> <p><input checked="" type="checkbox"/> Procedures for deconfliction of Military Training Routes and Special-Use Airspace have been taken</p> <p><input checked="" type="checkbox"/> Chief-of-Party is aware of PPE requirements</p> <p><input checked="" type="checkbox"/> Cost analysis has been completed and is attached</p> <p>Other/Remarks:</p>	<p>NOTE: Reference Handbook 9420 for approval(s) required.</p> <p>A. _____ (Chief-of-Party Signature)</p> <p>B. _____ (Dispatcher or Aviation Manager Signature Required)</p> <p>C. _____ (Chief-of-Party Signature) _____ (Date)</p> <p>D. _____ (Authorized Signature) _____ (Date)</p> <p>** For recurring Special-Use Mission, signature is required on Special-Use Air Safety Plan, and not required here.</p>
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