

Note to Scientists: A *Research and Collecting Permit* authorizes access to study sites by public roads and by day-hiking on open trails only. Access permits, which are specific to the destination, means of transportation and date of the trip, are also required for each backcountry camping, river, aviation, and caving trip within the Park. Please attach a photocopy of your current *Research and Collecting Permit* (or current research permit application) to the completed access permit application form, and submit both items in triplicate at least 45 days before planned field work. All permit materials related to scientific studies in Grand Canyon National Parks should be submitted through the Research Assistant, Grand Canyon National Park Science Center, 823 N. San Francisco Street, Suite B, Flagstaff, AZ 86001. Phone: (928) 226-0163.

GRAND CANYON NATIONAL PARK
INTERNAL AVIATION MANAGEMENT PLAN

FLIGHT REQUEST FORM

South Rim Helibase

FR# _____

**** Every item on this form must be completed (except for the FR#)**

1. TRIP ORGANIZER INFORMATION:

Name: _____ **Today's Date:** _____

Division/Office: _____ **Work Phone:** _____

2. FLIGHT DATA:

Day, Date, and Time flight is requested: _____

(e.g. Thursday, May 22, at 8:30 am)

**** REMINDER:** Routine flights will only be scheduled weekdays, and must be completed between the hours of 8 a.m. and 5 p.m.

Passenger's Names & Weights

(Be sure to include yourself if you are going.)

1) _____ / _____
2) _____ / _____
3) _____ / _____
4) _____ / _____

****TRIP ORGANIZER:** Remind your passengers that they **MUST** show up at the helibase at least 15 minutes prior to their flight.

Cargo (Type and Weight, as "plumbing tools weighing 75 pounds"):

Are sling loads required? YES NO (circle one)

If YES, how many? _____

What are their approximate weights? _____ / _____ / _____ / _____

Route of Flight (as "SR to NR, pickup 2 PAX + cargo, then to RS, then to SR"): _____

Is more than one flight needed? YES NO (circle one)

If YES, indicate # and dates if known: _____

3. FISCAL INFORMATION: Account number(s) to be charged, or name, address, and phone # for billing:

4. FLIGHT JUSTIFICATION (circle one): ROUTINE / NON-ROUTINE

If ROUTINE, explain why other methods of transportation are not adequate. NOTE: Staff time/cost is not necessarily a justification.

IF NON-ROUTINE, indicate reason (Medevac, Fire, L.E., etc.) NOTE: The nature of certain Non-Routine requests requires the flight to occur immediately, but this form must be completed by the close of the incident.

Trip Requestor's Signature: _____

5. TO BE FILLED OUT BY DIVISION CHIEF OR DESIGNATED SUPERVISOR:

The above requested flight is the most appropriate tool for the job.

Signature: _____ Date: _____

6. TO BE FILLED OUT BY THE SUPERINTENDENT'S OFFICE:

Requested flight is (circle one): MODIFIED / APPROVED / DISAPPROVED

Comments: _____

Signature: _____ Date: _____

NOTE TO TRIP ORGANIZER: If flight is approved, the completed and signed form must be at the helibase by flight time. Flight will not depart unless the Helibase Manager has this form in his possession. If your flight is postponed or cancelled because of weather, aircraft maintenance, etc., this authorization is good for 5 working days from the day, date, and time listed in Section 2: Flight Data. You do not need to resubmit a new Flight Request Form.

NOTE TO HELIBASE PERSONNEL: Retain Flight Request Forms as a part of the helibase files. Remember to assign a Flight Request Number.