

## APPENDIX Q

### FORMAT FOR SPECIAL ASSIGNMENT AIRLIFT MISSIONS (SAAM) REQUEST

#### A. PURPOSE

In order to request a SAAM, a SAAM Request System (SRS) Account is required. SAAM SRS accounts can be obtained by contacting a Service or theater validator, who will then contact the United States Transportation Command (USTRANSCOM) via Electronic Mail (e-mail) requesting approval. Validators may fax the manual DD Form 1249, SAAM or JCS Exercise - Request for Airlift, when the SRS and its backup are unable to be used. (See [Figure Q-1](#). DD Form 1249, SAAM or JCS Exercise – Airlift Request)

#### B. INSTRUCTIONS FOR COMPLETING AIRLIFT REQUEST THRU SRS

1. Data must be entered in SRS new request blocks as follows:

a. (MANDATORY) SAAM NUMBERS.

**NOTE:** All SAAM numbers are assigned by USTRANSCOM or a Service validator.

b. (MANDATORY) MONTH. Enter month of movement.

c. (MANDATORY) YEAR. Enter year of movement.

d. (MANDATORY) JCS PRIORITY. Enter the airlift priority (e.g., 1B1) (three characters maximum).

e. (MANDATORY) UNIT NAME. Enter unit identifier.

f. (MANDATORY) PROJECT NAME. Enter project name (e.g., Drug Interdiction).

g. (ALWAYS NONE) COMPARTMENTALIZED MISSION HANDLING.

h. (CONDITIONAL) CARGO CLASSIFICATION. Enter highest classification of cargo, not mission.

i. (CONDITIONAL) SUPPORTED CMD/ORG. Enter supported command/organization (e.g., SOUTHCOM).

j. (MANDATORY) REGIONAL OFFLOAD COCOM. Enter Combatant Command (COCOM) validator command (i.e., SOUTHCOM, PACOM) or NOT DESIGNATED.

k. (MANDATORY) REMARKS. Enter data as follows.

Standard remarks, IAW DOD 4515.13-R, ALL UNUSED SPACE REMAINING AFTER USER REQUIREMENTS HAVE BEEN MET WILL BE MADE AVAILABLE TO THE AMC REPRESENTATIVE (OR AIRCRAFT COMMANDER IN THE ABSENCE OF OTHER AMC PRESENCE) FOR MOVEMENT OF ELIGIBLE DOD TRAFFIC IAW ESTABLISHED AIRLIFT GUIDELINES. (These remarks appear in all requests, if not applicable then delete the remarks)

1. [\(MANDATORY\) BILLING](#). Enter at the validator level using the following format; Customer Identification Code, Transportation Account Code, or appropriation chargeable. If none of these are available, include the name, address and phone number of the specific organization reimbursing on the direct billing block.

### C. REQUIREMENT

1. [\(MANDATORY\) ONLOAD & OFFLOAD](#). Enter name of the port of embarkation by International Civil Aviation Organization code (e.g., St. Louis, Mo, KSTL).
2. [\(MANDATORY\) AVAILABLE LOAD DATE \(ALD\)](#). Enter date, month, year, and Greenwich Mean Time (GMT) expressed as “Zulu” time. If the time will be coordinated, click on will coordinate button.
3. [\(MANDATORY\) PICK UP \(PU\)](#). Enter date, month, year, and GMT expressed as “Zulu” time. If the time will be coordinated, click on will coordinate button.
4. [\(MANDATORY\) LATEST ARRIVAL DATE \(LAD\)](#). Enter date, month, year, and GMT expressed as “Zulu” time. If the time will be coordinated, click on will coordinate button.
5. [\(MANDATORY\) NUMBER PAX](#). Enter the number of passengers on/offloaded at each location. In the remarks data set, identify all foreign nationals. If the mission is a cargo SAAM, indicate the number of passengers who may be couriers or technical escorts.
6. [\(MANDATORY\) BAGGAGE WEIGHT STONS](#). Enter the total weight of the baggage expressed in short tons, to the nearest tenth of a ton.
7. [\(MANDATORY\) CARGO WEIGHT STONS](#). Enter the total weight of the cargo expressed in short tons, to the nearest tenth of a ton. Do not include baggage weight.
8. [\(MANDATORY\) CARGO/BAGGAGE CUBIC FEET](#). Enter the total cubic feet of the cargo and baggage.
9. [\(MANDATORY\) NUMBER OF AIRCRAFT](#). Enter the number of aircraft requested.
10. [\(MANDATORY\) AIRCRAFT TYPE](#). Enter the type of aircraft requested.
11. [\(MANDATORY\) AIRCRAFT CONFIGURATION](#). Enter the aircraft configuration requested.
12. [\(MANDATORY\) MISSION SUPPORT](#). Enter mission support requirements (e.g., forklifts, K-loaders, pallets, Silver Bullet).

### D. LOAD

1. [\(MANDATORY\) DESCRIPTION](#). Enter a load description (e.g., 463L pallets).
2. [\(MANDATORY\) PALLETS](#). Enter the quantity of pallets, vehicles, or pieces equivalent to pallets, example truck equivalent to two pallets.
3. [\(MANDATORY\) NUMBER OF ITEMS](#). Enter total number of items on each pallet load.

4. (MANDATORY) WEIGHT IN POUNDS. Enter individual weight of all non-palletized cargo, equipment, and vehicles or total weight of pallets, in pounds.
5. (MANDATORY) CARGO CUBIC FEET. Enter unit cubic feet of all non-palletized cargo or vehicles or the total cubic feet of pallets.
6. (MANDATORY) LENGTH INCHES. Enter length in inches.
7. (MANDATORY) WIDTH INCHES. Enter width in inches.
8. (MANDATORY) HEIGHT INCHES. Enter height in inches.

#### **E. HAZARDOUS CARGO**

1. Enter the correct shipping name description. Hazardous Materials (HAZMAT) will not be airlifted unless all provisions of subject regulation have been complied with. (For special weapons, provide the number and type units, type container, unit weight and total weight-in to on/offload order). Nuclear weapons data are found in Technical Order (TO) 11N-45-61 and TO 11N-45-51A (A).
2. Enter the correct packaging paragraph, example A5.15, in accordance with Air Force Manual (AFMAN) 24-204(I), Technical Manual 38-250, Marine Corps Order (MCO) P4030.19I, Naval Supply (NAVSUP) Pub 505, Defense Logistics Agency Instruction (DLAI) 4145.3 and Defense Contract Management Agency Directive (DCMAD) 1, and CH 3, 4 (HM24) Preparing Hazardous Materials for Military Air Shipments.
  - a. (MANDATORY) UN NUMBER. Enter correct United Nations (UN) Number, example UN0180.
  - b. (MANDATORY) PIECES. Enter total pieces.
  - c. (MANDATORY) NET EXPLOSIVE WEIGHT (KG). Enter total Net Explosive Weight (NEW) by (KG).
  - d. (MANDATORY) WEIGHTS (LBS). Enter hazard total weight.
  - e. (MANDATORY) WEIGHT (KG). Enter total weight (KG).
  - f. (MANDATORY) CLASS. Enter HAZARD CLASS, example 1.1E.
  - g. (MANDATORY) DIVISION. Enter the HAZARD DIV, example 1.1E.

#### **F. CONTACT**

1. (MANDATORY) TYPE. 24 HR POC, OFFLOAD, ONLOAD, OTHER, OVERALL, BILLING AND VALIDATOR.
2. (MANDATORY) TYPES. Enter what type, example VALIDATOR.
3. (MANDATORY) LOCATIONS. Enter the location of the VALIDATOR.
4. (MANDATORY) FULL NAME. Enter full name, example John Doe.

5. (MANDATORY) DUTY PHONE. Enter DSN or commercial phone number.
6. (MANDATORY) HOME PHONE. Enter commercial or cell phone number.
7. (OPTIONAL) E-MAILS. Enter e-mail address.
8. (OPTIONAL) NOTES. Enter notes if necessary.

## **G. COCOM CERTIFICATION**

1. USTRANSCOM began using a Regional Certification Official (RCO) function block in the SAAM SRS. Combatant Commanders (CCDRs) have the opportunity to certify all SAAMs terminating in their theater. This provides the CCDR visibility over total theater lift allocations and SAAM movement in their theater for onward movement planning and prioritization.
2. The RCO function allows CCDRs the ability to certify contingency and lower priority SAAMs destined for their Area of Responsibility. SAAM requesters will enter requests in SRS and forward to their Service validators. Service validators will validate the request and select the geographic COCOM where the mission terminates through the use of a drop down menu. The SAAM request is then forwarded to the geographic COCOM for review and certification. The CCDR RCO can either approve or reject the SAAM request. Approved SAAM requests will be forwarded to USTRANSCOM for validation. Rejected SAAM requests will be sent back to Service validators identifying required changes for CCDR RCO approval. Example: If a SAAM request is destined to South America, upon receipt of the request from the SAAM requester, the Service validator will validate the request and select SOUTHCOM in the drop down RCO function block. The SAAM request will be forwarded to SOUTHCOM for certification. SOUTHCOM RCO will either approve the requirement and forward to USTRANSCOM for validation or return to the Service validator for modification.
3. All SAAM priority 1B1 and below must be sent through the COCOM RCO for certification. For SAAM priorities higher than 1B1, and in cases where the COCOM chooses not to participate in this initiative, the Service validator will select “not designated” in the RCO block. Selection of “not designated” will forward the SAAM request directly to USTRANSCOM for validation.
4. CCDRs that do not want to participate in this initiative will contact USTRANSCOM. Worldwide validators will be advised of CCDRs nonparticipation.
5. Questions or concerns can be addressed to USTRANSCOM, TCJ3-SS, DSN 770-5751, or Commercial: (618) 220-5751.

## **H. APPROVAL REQUESTS WITHIN 96 HOURS**

1. (Conditional) SAAM requirements submitted within 96 hours of the LAD are considered rapid reaction or emergency. A statement as to the rapid reaction or emergency requirement and the justification for airlift within 96 hours must be included in the remarks data set. Individual declaring rapid reaction or emergency requirement and the justification for airlift within 96 hours must be included in the remarks data set. Include an impact statement if not supported. Individual declaring rapid reaction or emergency requirement will be at least a general officer, civilian equivalent, or designated representative. Also, the approving official’s name, rank, and duty phone must be included in the remarks data set of the request.

2. (Optional) SAAM requirements for channel extension or flag stop will include the following additional information.
  - a. Transportation Control Number(s).
  - b. 18<sup>th</sup> Air Force Channel Mission Identifier to be used (e.g., AJM804000140).
  - c. Contacts for initial channel on-load station and point of channel extension for flag stop.

**NOTE:** A required delivery date cannot be assigned to a flag stop or channel extension.

## I. CHAPTER 3 WAIVERS

1. (Mandatory) Enter “Request Chapter 3 Approval” when operational requirements under the provisions of AFMAN 24-204 (I), DLAI4145.3, MCO P4030.19I, NAVSUP Publication 505, TM 38-250, DCMAD 1, CH3,4 (HM24) Chapter 3 is necessary. This entry will only be used when one or more of the following apply:
  - a. Expanded vehicle/equipment fuel-in-tank is justified.
  - b. Incompatible items must be transported together.
  - c. Hand carrying of individual basic issue explosives, ammunition and other HAZMAT.
2. Operational Risk Management (ORM) guidelines require careful consideration of the increased risk to aircraft, aircrew and customers inherent in HAZMAT movement. Preparing HAZMAT for military air shipments is covered in AFMAN 24-204 (I), DLAI4145.3, MCO P4030.19I, NAVSUP Publication 505, TM 38-250, DCMAD 1, CH3,4 (HM24). AFMAN 24-204 (I), DLAI4145.3, MCO P4030.19I, NAVSUP Publication 505, TM 38-250, DCMAD 1, CH3,4 (HM24) provides procedures to coordinate approval and allow combat loading of HAZMAT. This is commonly referred to as Chapter 3 procedures. The requirements and approval authority are clearly spelled out in the above manual.
3. Real world situations may dictate use of Chapter 3, but mission validators must evaluate the strategic and compelling reason to increase the risk associated with each movement. Chapter 3 movement normally will be tailored to the specific requirement and not applied as a blanket exemption. Request all COCOMs establish positive controls for Chapter 3 approval requests and comply with the requirements as outlined below and in AFMAN 24-204 (I), DLAI4145.3, MCO P4030.19I, NAVSUP Publication 505, TM 38-250, DCMAD 1, CH3,4 (HM24).
4. USTRANSCOM J3 is the approval authority for all Chapter 3 movements using USTRANSCOM/AMC assets. This authority is not delegated.

5. The USTRANSCOM POC is the Deployment Distribution Operations Center. The COCOM requesting Chapter 3 approvals must justify the applicability of this Chapter by indicating the nature of the movement and specific risk associated in the airlift request. In the case of contingencies and exercises, validated requests from COCOM Theater Commanders for Chapter 3 approvals must be submitted through Newsgroup to USTRANSCOM for concurrence and through Service Validators for SAAM. Newsgroup validations and SAAM airlift requests must include Flag/General Officer endorsement. If approved and validated, Chapter 3 movement authorization specifics will be included in the Global Decision Support System remarks.
  - a. An Electronic Staff Summary Sheet (E-SSS) must be completed.
  - b. E-mail the completed E-SSS and Hazardous Cargo list to [AMC.A3V@scott.af.mil](mailto:AMC.A3V@scott.af.mil). They will coordinate the request and provide recommendation to the USTRANSCOM J3 for approval/disapproval.
  - c. The E-SSS will contain POC information, all justifications to use Chapter 3 procedures and the GO/FO requesting approval.
    - (1) (DDOC) Chief, DSN 779-1747; e-mail [ustc.ddocchief@ustranscom.mil](mailto:ustc.ddocchief@ustranscom.mil) or [ustc.ddocchief@ustranscom.smil.mil](mailto:ustc.ddocchief@ustranscom.smil.mil).

<b>SAAM OR JCS EXERCISE – AIRLIFT REQUEST</b>									
<i>AUTHORITY: 10 U.S.C.. 8012</i>									
<i>PRINCIPAL PURPOSE(S): Your home phone number is required in order that contact can be made during off-duty hours.</i>									
<i>ROUTINE USES: Your home phone number will be used to obtain information regarding the mission or to advise you of unexpected changes to previous arrangements.</i>									
<i>DISCLOSURE IS VOLUNTARY: The requirement for your home phone number is voluntary. IMPACT IF NOT FURNISHED: The airlift mission could be delayed and additional cost incurred.</i>									
<b>OVERALL SECURITY CLASSIFICATION</b>			<b>DATE (YYYYMMDD)</b>		<b>NAME OF VALIDATOR (Last, First, M.I.)</b>			<b>OFFICE SYMBOL</b>	
<b>SAAM NUMBER</b>		<b>PRIORITY</b>		<b>UNIT PROJECT NAME OR NICKNAME</b>					
<b>EXERCISE NAME</b>			<b>PRIORITY</b>		<b>UNIT</b>				
ONLOAD TO OFFLOAD									
R	LINE	NUMBER	POE	POD	PAX	BAG	CGO-ST	CUBE	
TIMING									
R	LINE	NUMBER	AVAILABILTIY	PICKUP	EAD	LAD			
AIRCRAFT MISSION REQUIREMENTS									
R	LINE	NUMBER	NO. TYPE ACFT	CONFIGURATION	MISSION SUPPORT REQUIREMENTS				
COMMODITY DESCRIPTION - ONE									
R	LINE	NUMBER	DESCRIPTION	QTY	WEIGHT	CUBE	DIMENSIONS	NEW	RS
COMMODITY HAZARDOUS - TWO									
R	LINE	NUMBER	HAZARDOUS PARA	HAZARDOUS SHIPPING NAME					
R	TYPE	LOCATION	NAME	DUTY PHONE	HOME PHONE				
<b>BILLING INSTRUCTIONS</b>									
<b>REMARKS</b>									

**Figure Q-1. DD Form 1249, SAAM or JCS Exercise – Airlift Request**

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