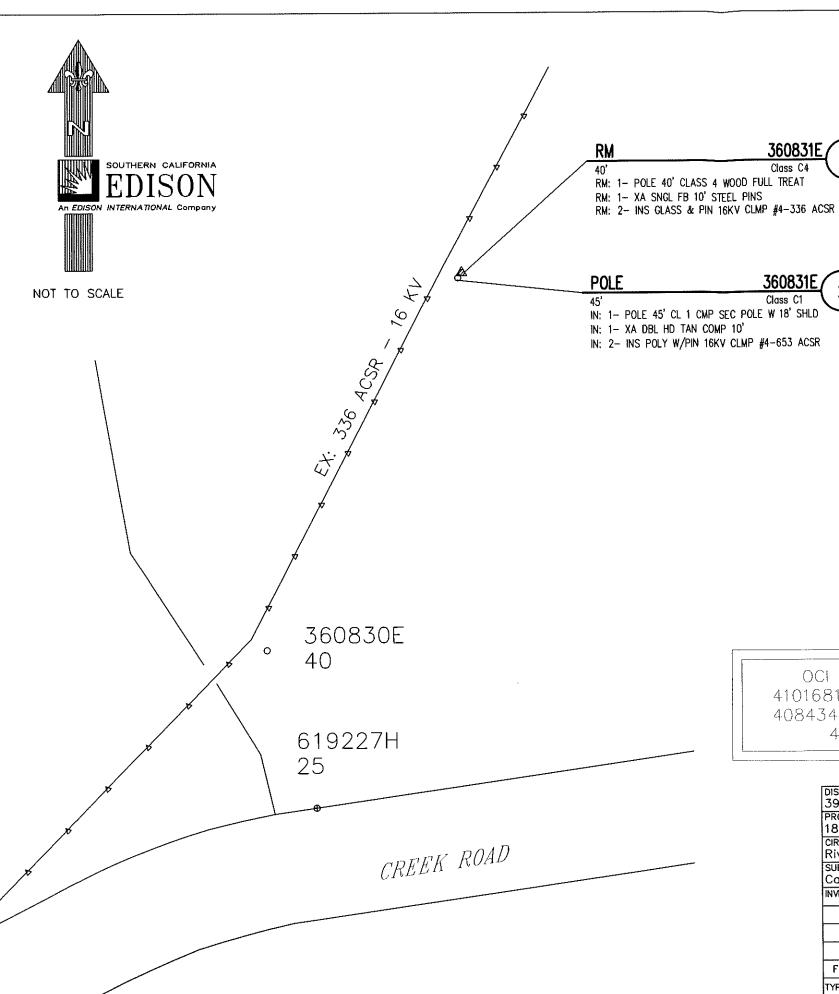


SCE Aircraft Operations Flight Request Form

Instructions: Please complete this form in its entirety and email to: <u>airops@sce.com</u> or fax to 909-974-4678. Once this form is received by Aircraft Operations, you will receive a response within 24 hours. For questions call SCE Aircraft Operations Dispatch at PAX 11676.

Requestor Information

Flight requested by:*					•		
Pax:* Cell Number:* Email Address;* SAP Accounting Number* Flight Description						nt requested by:*	Fligh
Cell Number:* Email Address:* SAP Accounting Number* Flight Description							
Email Address:* SAP Accounting Number* Flight Description							
SAP Accounting Number* Flight Description							
Camera - HD/IR						il Address:*	Emai
Camera - HD/IR						A 4º NT T &	CAD
Please choose a mission type: Camera - HD/IR						Accounting Number*	SAP
Crew support			<u>ion</u>	Flight Descrip	:	se choose a mission type	Pleas
Crew support		Pole-set	П	Line String	П	Camera – HD/IR	П
External Load				_			_
HEC Photo Need more info,] Mission specific details (ex: Passenger name, pole size/weight, external load type, etc): General Operating Location District LZ Coordinates (if known) Pick-up location for passenger flights Drop-off location for passenger flights Date(s) for which service is requested Time of Pick-up Approx. mission duration (if known) Back-up date for mission (if known) Authorizer Authorizer PAX and cell number *required information For office use only Date Received by Aircraft Operations: Date Initial Contact Made:				0			
Mission specific details (ex: Passenger name, pole size/weight, external load type, etc): General Operating Location District LZ Coordinates (if known) Pick-up location for passenger flights Drop-off location for passenger flights Date(s) for which service is requested Time of Pick-up Approx. mission duration (if known) Back-up date for mission (if known) Authorizer Authorizer PAX and cell number *required information For office use only Date Received by Aircraft Operations: Date Initial Contact Made:	, please conta	NY 1 0 1					_
Time of Pick-up Approx. mission duration (if known) Back-up date for mission (if known) Authorizer Authorizer PAX and cell number *required information For office use only Date Received by Aircraft Operations: Date Initial Contact Made:					ger flights	rict Coordinates (if known) -up location for passeng	Distri LZ C Pick-
Approx. mission duration (if known) Back-up date for mission (if known) Authorizer Authorizer PAX and cell number *required information For office use only Date Received by Aircraft Operations: Date Initial Contact Made:					requested		
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For office use only Date Received by Aircraft Operations: Date Initial Contact Made:					mber		
Date Received by Aircraft Operations: Date Initial Contact Made:						uired information	*requ
Follow up status: Week 1 Work 2	<u> </u>		mpany:	Co	Yes, Date:	Received by Aircraft Operated to contractor: Week 1 Week 2	Date F Referr
□ Week 2 □ Week 3							



Notes:

- Crew to Transfer all SCE and Comm
 Conductors
- No truck access
- Tree trimming required
- Existing pole has woodpecker damage
- Access to pole via 10139 Creek Rd
- GPS: 34.393356, -119.294457

PROJECT REQUIREMENTS (<u>Y/N)</u>
EDISON EASEMENT REQUIRED	N
PWRD 88 REQUIRED	N
UG CIVIL ONLY WORK ORDER	N
PERMIT REQUIRED	N
PERMIT TYPE: N/A	
OUTAGE REQUIRED	
OUTAGE DATE: TIME: _	
TRAFFIC CONTROL REQUIRED	N
PED. TRAFFIC CONTROL REQ'D	N
CONVEYANCE LETTER REQ'D	N
ENVIRONMENTAL CLEARANCE REQ'D	Y
CSD 140 (TLM) REQ'D	N

D124: Rev. 02/08/18

OCI Notifications: 410168124, 404964658, 408434666, 410168125, 404964659

FINAL DESIGN APPROVED FOR CONSTRUCTION

DISTRI 39 -	CT - VENTL	JRA	PROJ. M	igr. W	ALSON, LAU	,,	PLANNER REYES, PAUL DURAN DESIGNER PHONE
PROJECT NO. SERVICE REQUEST 1827352 2730766			MSR NO. N?A		PRODUCT- 1581193	ASSOC DESGN -INFRA REPLAC - DET POLE REPLACEMENT	
CIRCUIT / VOLTAGE RIVA 16 KV		-	THOMA	S GUIDE	PRODUCT-		
SUB / PG NO. Casitas Sub				CIRCU	IT CODE	PRODUCT-	3 ASSOC DESGN
	ORY MAP	53-19D	J.P.A. NO	0. N/	'A		PROPOSED CONSTRUCTION (LOCATION) OCI Notification: See Above VARLOC VARIOUS
							VENTURA, CA 90000
F	9/6/19		C. Simone	egu .	P. Reyes	79579	SHEET DESIGN\DRWG NO.
TYPE	DATE	APPROVED BY	CHECKED		DRAWN BY		, ,
	S	outhern Calif	ornia Ed	disor	n Compar	ıy	<u> </u>

