

## SCE Aircraft Operations Flight Request Form

**Instructions:** Please complete this form in its entirety and email to: [airops@sce.com](mailto:airops@sce.com) 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

|                              |  |
|------------------------------|--|
| <b>Flight requested by:*</b> |  |
| <b>Department:*</b>          |  |
| <b>Pax:*</b>                 |  |
| <b>Cell Number:*</b>         |  |
| <b>Email Address:*</b>       |  |

|                               |  |
|-------------------------------|--|
| <b>SAP Accounting Number*</b> |  |
|-------------------------------|--|

### Flight Description

Please choose a mission type:

- |                                         |                                      |                                                         |
|-----------------------------------------|--------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Camera – HD/IR | <input type="checkbox"/> Line String | <input type="checkbox"/> Pole-set                       |
| <input type="checkbox"/> Crew support   | <input type="checkbox"/> Passenger   | <input type="checkbox"/> Recon                          |
| <input type="checkbox"/> External Load  | <input type="checkbox"/> Patrol      | <input type="checkbox"/> Training                       |
| <input type="checkbox"/> HEC            | <input type="checkbox"/> Photo       | <input type="checkbox"/> Need more info, please contact |

**Mission specific details (ex: Passenger name, pole size/weight, external load type, etc):**

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|                                                |  |
|------------------------------------------------|--|
| <b>General Operating Location</b>              |  |
| <b>District</b>                                |  |
| <b>LZ Coordinates (if known)</b>               |  |
| <b>Pick-up location for passenger flights</b>  |  |
| <b>Drop-off location for passenger flights</b> |  |

|                                               |  |
|-----------------------------------------------|--|
| <b>Date(s) for which service is requested</b> |  |
| <b>Time of Pick-up</b>                        |  |
| <b>Approx. mission duration (if known)</b>    |  |
| <b>Back-up date for mission (if known)</b>    |  |

|                                       |  |
|---------------------------------------|--|
| <b>Authorizer</b>                     |  |
| <b>Authorizer PAX and cell number</b> |  |

*\*required information*

**For office use only**

Date Received by Aircraft Operations: \_\_\_\_\_ Date Initial Contact Made: \_\_\_\_\_

Referred to contractor: ☐ No ☐ Yes, Date: \_\_\_\_\_ Company: \_\_\_\_\_

Follow up status: ☐ Week 1 \_\_\_\_\_

☐ Week 2 \_\_\_\_\_

☐ Week 3 \_\_\_\_\_



Untitled Placemark

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Google Earth

N San Marcos Rd

|                      |                                                    |                                     |                   |                   |             |
|----------------------|----------------------------------------------------|-------------------------------------|-------------------|-------------------|-------------|
| 10-15-2019           | Notification Overview                              |                                     | RUETERDL          | Copy              | Page 1 of 4 |
| Notification         | 410041597                                          | CROSSARM                            |                   | Notification Type | E1          |
| Subject Matter       | EZ-ELEV 0010                                       | Distribution Primary                |                   |                   |             |
| Description          | REPLC DAMAGE PRI XARM POLE                         |                                     |                   |                   |             |
| Reporter             | TORRESJM                                           | 9:23:02 AM                          | Notification Date | 05-03-2019        |             |
| Start Date           | 05-03-2019                                         |                                     | End Date          | 11-03-2019        |             |
| Start time           | 10:47:00 PM                                        |                                     | End time          | 11:59:00 PM       |             |
| Priority             | EA 2                                               | Priority 2                          |                   |                   |             |
| Funct Location       | OH-1053377E                                        | POLE-DISTRIBUTION 1053377E LOCATION |                   |                   |             |
| Location Description | OLD SAN MARCOS PASS RD P/P 1200'W 2MI N/O CATHEDRA |                                     |                   |                   |             |
| City                 | SB/COUNTY                                          |                                     |                   |                   |             |
| Thom. Guide          |                                                    | CASTAB-984-H3                       |                   |                   |             |
| Equipment            | 201817158                                          | POLE-DISTRIBUTION 1053377E          |                   |                   |             |
| Circuit Name         | ED-02595                                           | CACHUMA                             |                   |                   |             |

Order 902730661  
Room 6049  
Plant Section 249  
Sort field 1053377E

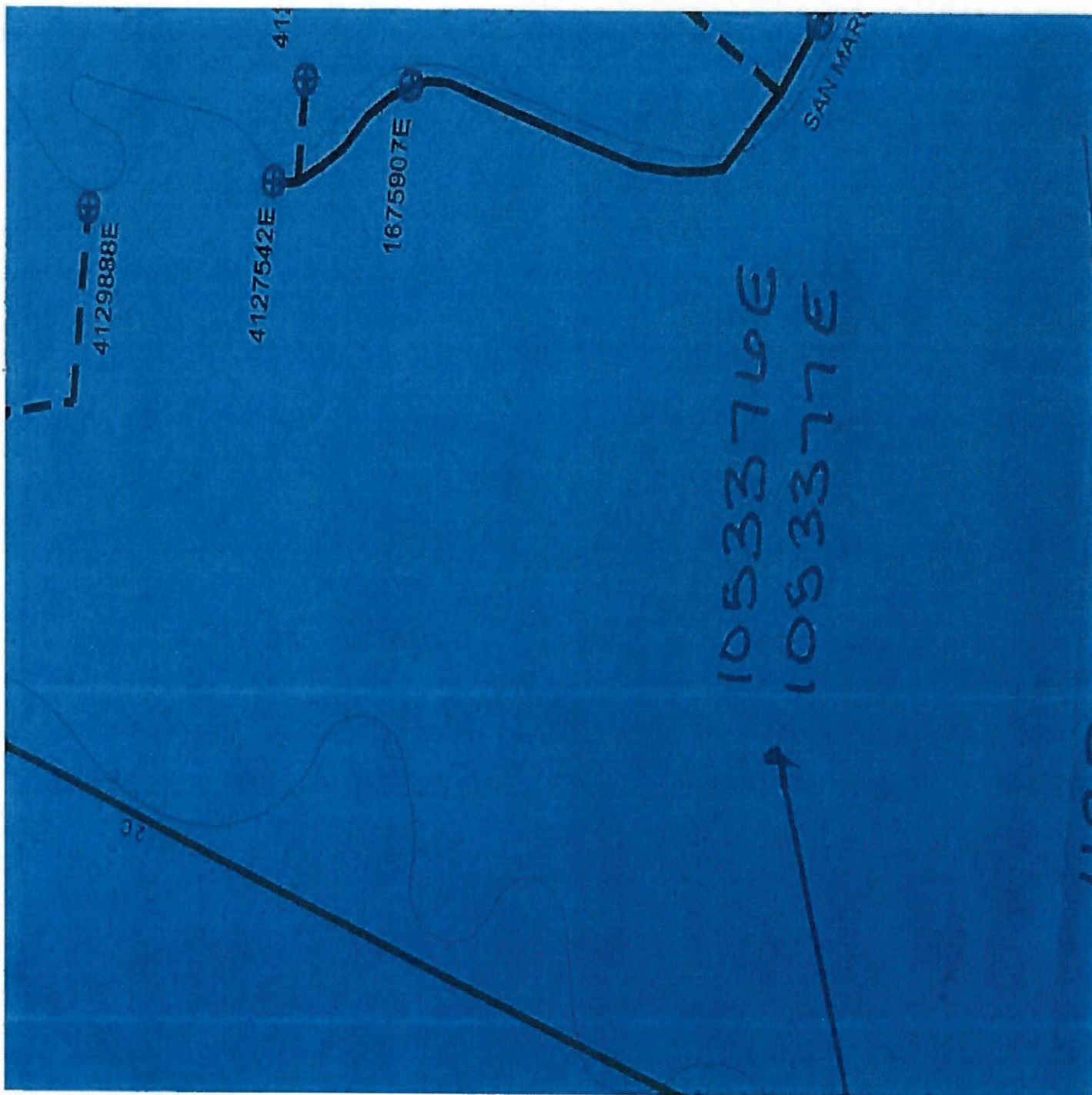
**OFF-CYCLE**  
**DUE 11-3-19**

|                      |                      |                   |                      |                                 |
|----------------------|----------------------|-------------------|----------------------|---------------------------------|
| PM Planner Group     | 249                  | Santa Barbara S/C | Phone                |                                 |
| Detail Position      | 0001                 |                   | Text                 |                                 |
| Object Part          | 0020                 | Crossarm          | Error Class          |                                 |
| Damage               | 0022                 | Damaged/Broken    | Assembly             |                                 |
| Task                 | Replace              |                   | Work center          | 21N49 Santa Barbara Default W C |
| Cause of Damage      |                      |                   |                      |                                 |
| Cause Text           |                      |                   |                      |                                 |
| Cause of Damage Code | <input type="text"/> | Action Taken Code | <input type="text"/> |                                 |

05/05/2019 12:54:46 PST CMSPiWSUSER (CMSPiWSUSER) Jonathan Torres \* 05/05/2019 12:52 \* EOI, OFF CYCLE INSPECTION, EXTREME, Phase 2, One arm on H frame deteriorated. Helicopter patrol. Awful terrain. Not ideal work location. Long span. No access to pole. Side of hill.

Comments **POLES WERE NOT WRITTEN UP TO BE CHANGED.**

**11-8-19 This one needs to long lined.**  
**Dropped in from helicopter. per frazier**



Comments

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Comments

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Comments

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22-55C

SANTA BARBARA CO. 21-52A

21-51B

SECTION 34

T 5 N R 28 W

442  
542

21-52B

03-98

2-05 BRIDGE 4-17 DPH03

21-51C



SANTA BARBARA

