

HELICOPTER LIFT OPERATIONS SAFETY BRIEF CHECKLIST

PRIOR TO BEGINNING ANY HELICOPTER OPERATION A THOROUGH SAFETY BRIEF	
WILL BE CONDUCTED UTILIZING THE FOLLOW CHECKLIST: Holister Ranch	
SAFETY BRIEF SIGN IN 5-22 - 5-23 - 5-27 5-28 5-29 5-30	
GHI CREW INTRODUCTION HEC, Compressor pole set	
IS A TRANSLATOR REQUIRED HERAME (arrest 700068)	
☐ GHI CREW INTRODUCTION HEC, Compressor, pole set HERAME Largest 2000CBS TO 1472464 TO 1572100 TO 1569651	
□ DESIGNATE A 911 CALLER	
□ IDENTIFY CLOSEST EMERGENCY MEDICAL SERVICES	
☐ CREW FATIGUE AND HYDRATION	
☐ HELICOPTER LIFT LIMITATIONS	
☐ HAZMAT WILL OR WILL NOT BE CARRIED ON THE HOOK	
☐ NON GHI EMPLOYEES WILL NOT APPROACH HELICOPTER WITH ROTORS ENGAG	ED
☐ HELICOPTER HAZARD AREA (TAIL/MAIN ROTOR)	
☐ EFFECT OF ROTOR DOWN WASH ON LOAD	
DUST MASK: BURN AREA, DUST, POLLEN EXPOSURE	
☐ HELICOPTER DOOR REMOVAL AND FIRE EXTINGUISHER LOCATION	
☐ PPE REQUIREMENTS (GLOVES, EYE PROTECTION, HARD HAT WITH CHIN STRAP	
□ PILOT/GROUND CREW COMMUNICATIONS/ LOST COMMUNICATIONS	
PROCEDURES	
□ POTENTIAL STATIC CHARGE CAUSED BY HELICOPTER	
☐ SITE PLAN /FLIGHT PATH	
☐ FALL, PINCH, CRUSH DANGER POINTS	
☐ RIGGING OPERATIONS CONNECTING AND DISCONNECTING CRANE HOOK AND	
SPREADER BAR HOOK	
☐ PROPER SECURING OF EQUIPMENT / TOOLS IN SUPER SACK AND ON LONG LINE	
☐ STREET CLOSURE / EVACUATION USE DIAGRAM TO ENSURE ALL HOMES ARE	
CLEAR	
☐ NO CELL PHONES OR CAMERA USED BY GROUND CREW	



Pilot:						
Support Cre	ew:					
Location:						
Mission:						
Aircraft:						
Note: By signing this document you acknowledge you understood all items briefed to you and that you are responsible for insuring all loose items are secured when working under a helicopter.						
DATE PRINT NAME SIGNATURE COMPANY						
			A			
			ű.			



Pilot:

Support Crew: Location:							
							Mission:
Aircraft: Note: By signing this document you acknowledge you understood all items briefed to you and that you are responsible for insuring all loose items are secured when working under a helicopter.							
							DATE
	-						



Pilot:

Support Cr	ew:					
Location:						
Mission:						
Aircraft:						
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DATE PRINT NAME SIGNATURE COMPANY						
	2					



Pilot:

Support Crew: Location: Mission: Aircraft: Note: By signing this document you acknowledge you understood all items briefed to you and that you are responsible for insuring all loose items are secured when working under a helicopter.										
							DATE	COMPANY		
								PRINT NAME	SIGNATURE	
	[-6]									



Pilot:							
Support Cre	ew:						
Location: Mission:							
							Aircraft:
Note: By signin	Note: By signing this document you acknowledge you understood all items briefed to you and that you are responsible for insuring all loose items are secured when working under a helicopter.						
DATE PRINT NAME SIGNATURE COMPANY							
	_						

Tailboard Briefing Guide Updated: January 17, 2019

AIRCRAFT	ENVIRONMENT	EXTERNAL LOAD
 □ Approach and departure □ Main/tail rotor hazards □ Safe cargo loading/ unloading □ Loose articles: - Aircraft & LZ □ Hearing protection □ Door/seatbelt operation □ Headset/helmet/intercom □ Air-sickness □ In-flight emergencies Establish who will call 911 □ Location of: ○ First aid/survival kit ○ Fire extinguisher ○ Fuel and battery shut off procedure ○ Radios, ELT, SAT Phone □ Fueling Operations: - Duties & Safety Issues 	Weather conditions	Ground crew PPE Long Line & Rigging Equipment Inspection Communication: Use of headset for lineman communicating with pilot Head/Hand Signals Pole set procedures: Brief how pole will be secured: 1) Taglines 2) Pikes 3) fill dirt Steps on pole Remote hook operations Ground crew hook up procedures Static discharge Emergency flyaway procedures Long line clearance (6'- 25'- 150% rule) No person under load Ground crew safety zone Pole removal with potential snag issues must be discussed Nylon straps (wood vs. glass) Load ratings (7:1 minimum) Dry Run/Play by play pole set Procedures Induced Voltage from: - Adjacent circuits, Underbuild, Parallel circuits etc. In case of Non-Company ground crew: Rigging procedures must be briefed No cell phone/camera use during external loads Essential crew only



SECTION 7

Part 135 GH 4A Part 133 GH 4L

NON-congested Area Plan

Operator:

Guardian Helicopters, Inc

67 D STREET

Fillmore CA. 93015

Phone (818) 442-9904

FAX (818) 442-990

PROJECT:

EDISON HEC POLE REPLACEMENT WORK ORDER #: TD 1472464 TD 157210 TD

1569651 TD 1576985

ADDRESS: RANCHO REAL : HOLLISTER CA

LANDING ZONE LATITUDE 34°27'56.78"N LONGITUDE 120°20'47.67"W

STAGING AREA LATITUDE 34°28'22.39"N LONGITUDE 120°16'11.61"W

708491E 708490E LATITUDE 34°28'13.77"N LONGITUDE 120°16'10.75"W HF 1700 LBS FRAMED

STAGING AREA LATITUDE 34°28'4.24"N LONGITUDE 120°21'31.36"W

712122E 712121E LATITUDE 34°28'3.78"N LONGITUDE 120°21'35.42"W HF 1995 LBS FRAMED

STAGING AREA LATITUDE 34°27'42.54"N LONGITUDE 120°22'47.40"W

712164E 4476366E_LATITUDE 34°28'8.38"N LONGITUDE 120°22'43.17"W HF 1500 LBS FRAMED

STAGING AREA LATITUDE 34°27'28.77"N LONGITUDE 120°24'36.81"W

712154E 712155E LATITUDE 34°27'54.85"N LONGITUDE 120°24'17.76"W HF 1500 LBS FRAMED

CONTRACTOR'S NAME: HOT LINE CONSTRUCTION PHONE#: 805-561-2410

CONTACT AT SITE; CHRISTIAN OROZCO

CERT #: 2769166

PHONE #: 805-561-2410

PILOT'S NAME(S): 1. JOHN OLSON

CERT #: 2778051

2. BUCKEY MACKAY 3. MICHAEL KLINK

CERT#: 3018828

4. IAN GOODALE 5. ROSS GOULET

CERT#:3741973

TYPE OF AIRCRAFT:BELL UH-1H

CERT#: 339677 N# N711GH A/C CATEGORY: RESTRICTED

BELL UH-1H N# N214KK A/C CATEGORY: RESTRICTED

N# N407GH A/C CATEGORY: STANDARD

BELL 205A1 N# N216GH A/C CATEGORY: STANDARD

AS350 B2 N# N498PT A/C CATEGORY: STANDARD

AS350 B3 N# N718GH A/C CATEGORY: STANDARD

AS350 B3 N# N215GH A/C CATEGORY: STANDARD

TYPE OF ITEM LIFTING: POLE HEC □ AERODYNAMIC ☑ NON- AERODYNAMIC

IF SAFETY DICTATES AND OR THE CUSTOMER REQUESTS ADDITIONAL LIFTS THE LIFTS WILL BE CONDUCTED REMAINING WITHIN THE APPROVED TIME PARAMETERS.

TYPE OF LIFTS: COMPRESSOR POLES AND EQUIPMENT

MAX SINGLE - LIFT WEIGHT: 2000 LBS CLASS OF LOAD: EXTERNAL CL B

NO. OF LIFTS: TBDLONG LINE: (NO) XXX (YES) LESS THEN 150 FT (LENGTH)

OPERATIONAL ALTITUDE: < 250

DATE AND TIMES OPERATION WILL BEGIN AND TERMINATE:

FLIGHT DATES	TIME BEGIN TIME END		TODAY'S DATE	
5-22-2020 THRU 5-23-2020	SUNRISE	SUNSET	5-15-2020	
5-27-2020 THRU 5-30-2020	SUNRISE	SUNSET	5-15-2020	
AGENCY NAME:	PHONE#:	PERSON NOTIFIED:	DATE:	
SANTA BARBARA SHERIFF	805-686-8150	BUELTON	NOTIFY	
SANTA BARBARA COUNTY FIRE	805-681-5518	STATION 18	NOTIFY	



NON- Congested Area Plan (Continued)

Evacuation	Crowd Control	Street Closure
No Evacuated Structures	Operator	□Yes No
☐Evacuated Structures	Contractor	Contractor
		Operator
LIST OF BUILDINGS THAT SHALL EITH	HER BE PARTIALLY OR EN	NTIRELY UNOCCUPIED
PERSONS:		
BUILDING DESCRIPTION/ADDRESS	S OWNER(S):	PHONE #:
N/A	N/A	N/A
NT/A	NI/A	NI/A

Narrative description of pick-up site, route, delivery site, and plan for ceasing operation if unauthorized persons enter operational area or real hazard occurs.

SITE INSPECTION NOTES

ONLY PERSONNEL ESSENTIAL TO COMPLETING THE JOB SAFELY WILL BE PERMITTED TO PARTICIPATE IN THE EVOLUTION. ONLY PERSONNEL PARTICIPATING IN THE SAFETY BRIEF WILL BE PERMITTED TO BE IN THE AREA OF OPERATIONS. ONLY AUTHORIZED ESSENTIAL PERSONAL WILL BE PERMITTED IN THE IMMEDIATE AREA OF OPERATIONS. IN THE EVENT AN UNAUTHORIZED PERSON ENTERS THE OPERATIONS AREA OR A POTENTIAL HAZARD IS IDENTIFIED THE PILOT WILL HOLD THE AIRCRAFT IN RELATIVE POSITION. THIS WILL BE ACHIEVED WITHOUT OVER FLYING THE GROUND CREW. ALL OPERATIONS WILL BE CEASED UNTIL THE PROBLEM IS RECTIFIED. IN THE EVENT OF AN AIRCRAFT EMERGENCY, THE PILOT WILL RADIO GROUND PERSONNEL AND WILL ATTEMPT TO LAND IN THE EMERGENCY LANDING AREA.

DURING THE LIFT EVOLUTION THE AIRCRAFT AND GROUND CREW WILL ALL BE IN RADIO COMMUNICATIONS. IN THE EVENT OF LOSS COMMUNICATIONS THE CREW WILL USE STANDARD HAND SIGNALS TO COMMUNICATE WITH THE PILOT. WHEN THE PILOT IS CLEAR HE WILL MOVE THE AIRCRAFT TO A SAFE LOCATION TO ALLOW THE COMMUNICATION PROBLEM TO BE RECTIFIED.

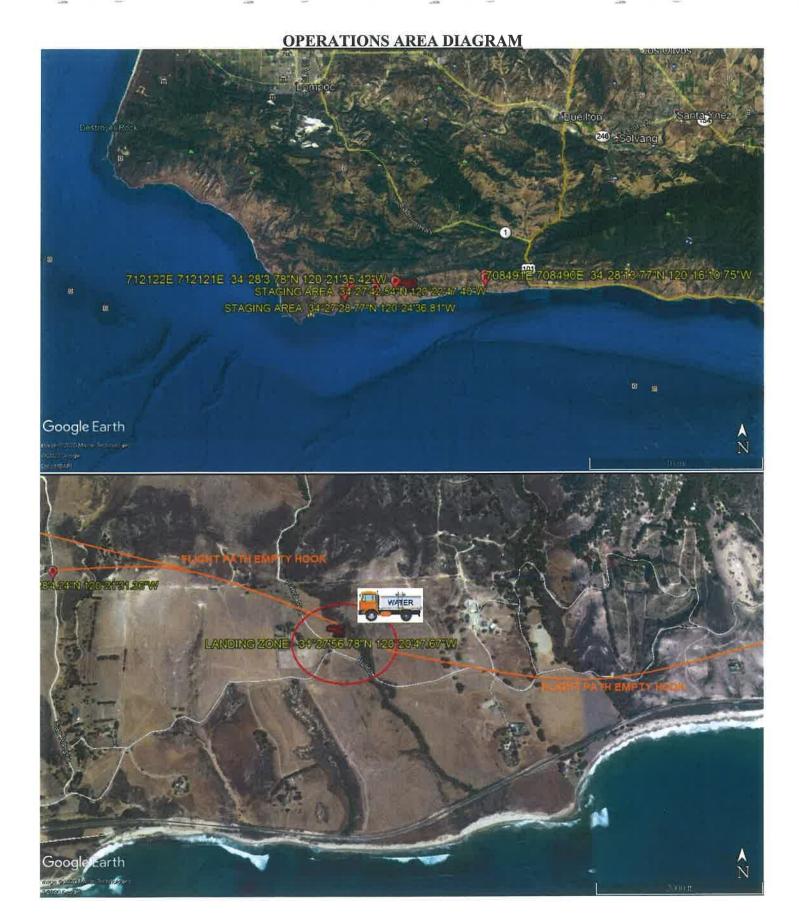
THE OPERATIONS AREA IS WITHIN THE SECURED AREA. ALL ESSENTIAL CREW WITHIN THE OPERATIONS AREA WILL NOT BE INVOLVED IN TAKING PICTURES OR ANY OTHER USE OF CELL PHONES.

A TAIL BOARD SAFETY MEETING WILL BE HELD AT BOTH THE STAGING AREAS PRIOR TO HELICOPTER OPERATIONS

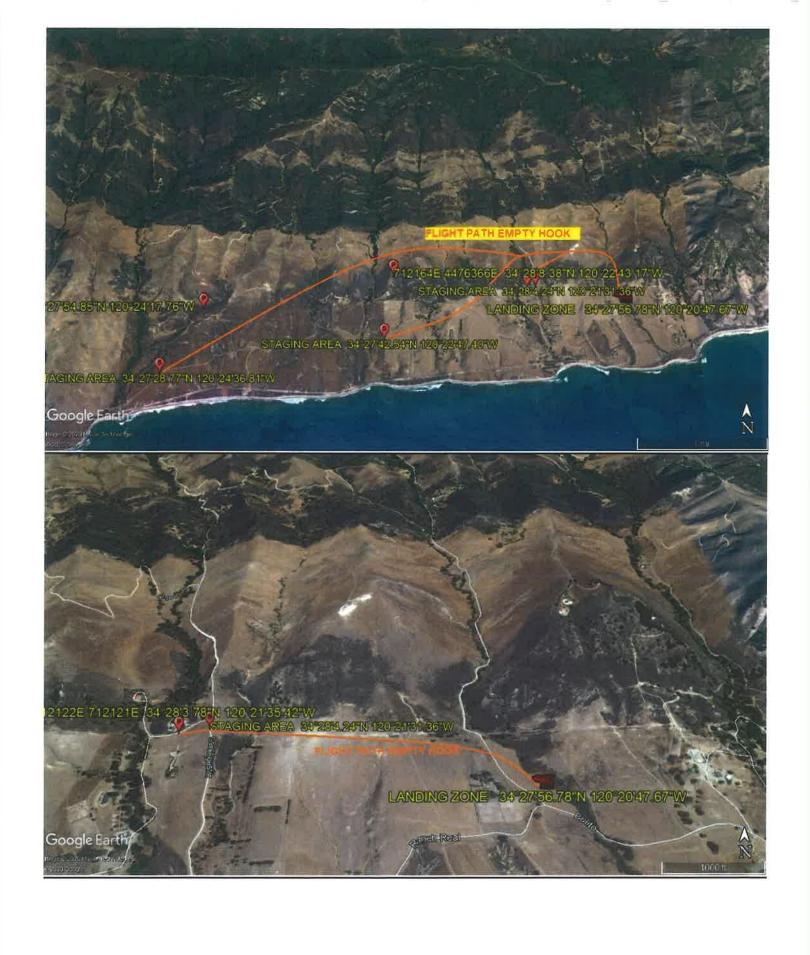
- 1. HELICOPTER WILL LAND AT THE AT THE LZ STAGING AREA TO CONNECT LONG LINE AND CONDUCT HEC TRAINING AND A SAFETY TAILBOARD. THE POLE WILL FRAMED NEAR THE LZ STAGING AREAS
- 2. FUELING WILL ONLY BE CONDUCTED AT STAGING AREA
- 3. EMERGENCY LANDING ZONE IS AT THE STAGING AREA AND ALONG THE FLIGHT PATH
- 4. REMOTE AREA OPERATING AREA. NO EVACUATIONS
- 5. PROVIDE WATER TRUCK FOR LZ STAGING AREA
- 6. NO STREET CLOSURES
- 7. LONG LINE WILL BE FLOWN FROM THE LZ TO THE POLE STAGING AREA. CUSTOMER WILL PROVIDE A PERSON AT STAGING AREA TO CONNECT LONGLINE TO EQUIPMENT.

5-15-2020 DATE OF SUBMISSION

COMPANY OFFICIAL / TITLE













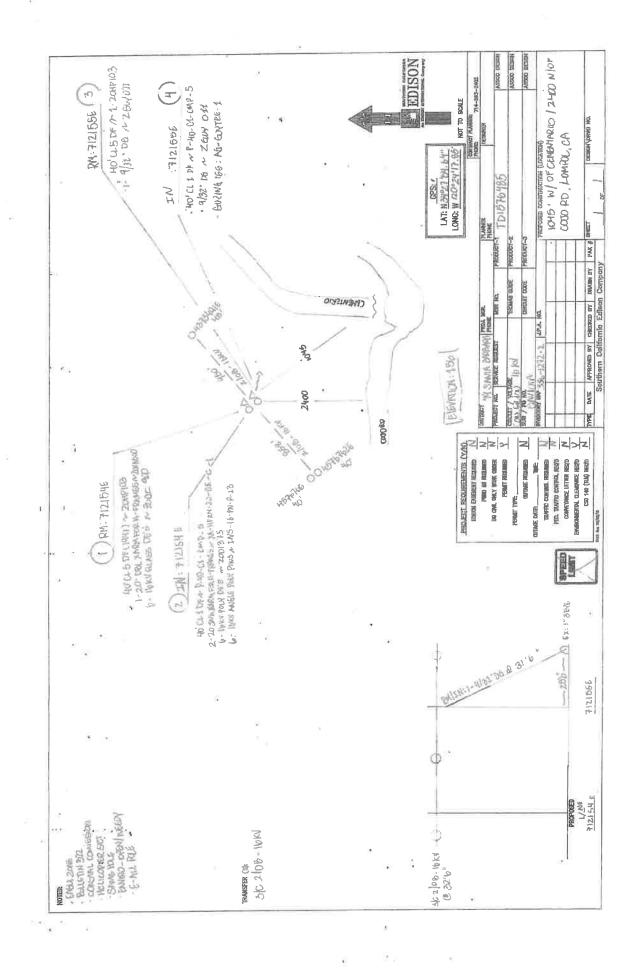
LEGEND

SITE PLAN SYMBOLS: EVACUATION FLIGHT PATH					
LANDING AREA = (LZ) STREET BLOCKED = XXXX TOP TWO FLOORS = UBT2					
ATTACH AREA = (A)	RELEASE AREA = (R)				
FLIGHT PATH = >>> EMERGENCY LAND = (ELZ)					
UNOCCUPIED BUILDING = (UBA)	UNOCCUPIED BUILDING TOP FLOOR = (UBT1)				



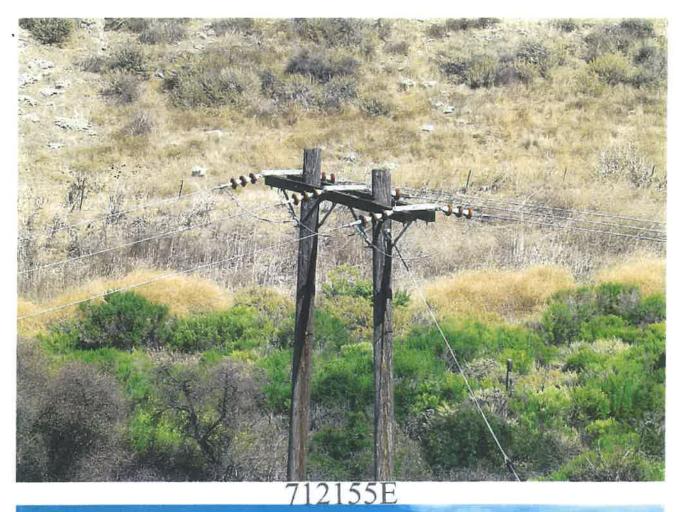
Instructions: Please complete this form in its entirety and email to: <u>airops@sce.com</u> or fax to 909-974-4678. Once this form is received by Aircraft Operations, you will receive a response within 24 hours. For questions call SCE Aircraft Operations Dispatch at PAX 11676.

Fligh	t requested by:*	CHRISTIAN C	ROZCO		277
Depa	rtment:*	HOTLINE CON	NSTRUCTION INC		
Pax:	k	N/A			
Cell I	Number:*	805-561-2410			
Emai	il Address:*	COROZCO@F	otlineconstructioninc.cor	n	
SAP	Accounting Number*	TD1576985			
			Flight Descripti	<u>ion</u>	
Pleas	e choose a mission type	5.			
_	Common IID/ID	_	Time Stainer	-	Pole-set
	Camera – HD/IR		Line String Passenger		Recon
	Crew support External Load		Patrol		Training
	HEC		Photo		Need more info, please conta
	nec	Ш	riioto	ш	Need more into, please conta
Missi	ion specific details (ex:	Passenger r	name, nole size/we	ioht, extern	ial load tyne, etc):
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	55E & 712154E RM:				
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Gene	ral Operating Location	1	SANTA BARBARA		
Distr			49		
	Coordinates (if known)				
	up location for passeng	er flights			
	-off location for passen				
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	of Pick-up		0800		
	ox. mission duration (i	f known)	8HRS		
	-up date for mission (if				
			ADDOOM	-0	
Auth	orizer		APPROVE	ט	
	orizer PAX and cell nu	mber	By Omar Sha	arif at 2:45	5 pm, Apr 07, 2020
*required information Click to e-mail form					
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		ations:	Date Ini	itial Contact	Made:
2 51101					
	□ Week 3				
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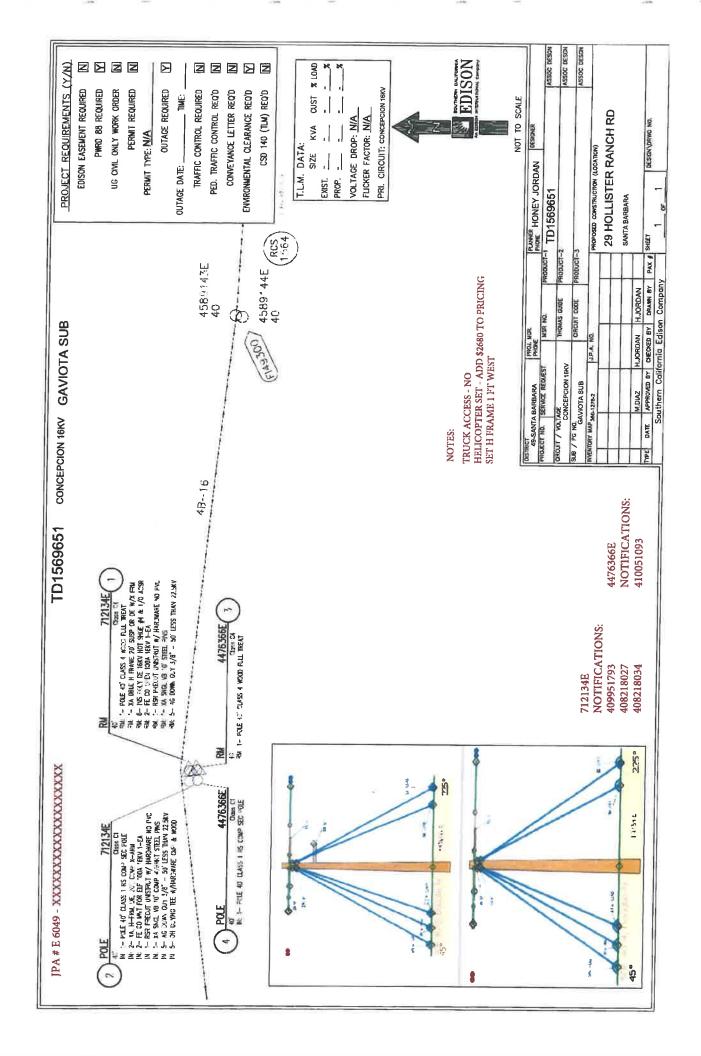






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Flight	t requested by:*	CHRIS BROW	VN		
	rtment:*	HOTLINE CONSTRUCTION INC			
Pax:*		N/A			
Cell N	Number:*	951-282-1467			
Email	l Address:*	CBROWN@ho	otlineconstructioninc.com		
SAP	Accounting Number*	TD1569651			
			Flight Description	<u>on</u>	
Please	e choose a mission type	:			
	Camera – HD/IR		Line String	×	Pole-set
	Crew support		Passenger		Recon
	External Load		Patrol		Training
X	HEC		Photo		Need more info, please contact
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	on specific details (ex:	_		•	
	POLE 712134E				
R&R	POLE 4476366E				
8	APPRO	HEAVIES	ST POLE WEIGHT	. 1300 LE	
Gener	ral Operating Location		29 HOLLISTER RANCH	RD GAVIOTA	- CONCEPCION 16KV LINE
Distri		`	49 SANTA BARBARA	110, 0,11101,	CONTROL SIGN TON LINE
	oordinates (if known)		10 0, 1117 (2) 11 (2) 11 0 1		
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	up date for mission (if		(
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	□ Week 2				
	□ Week 3				



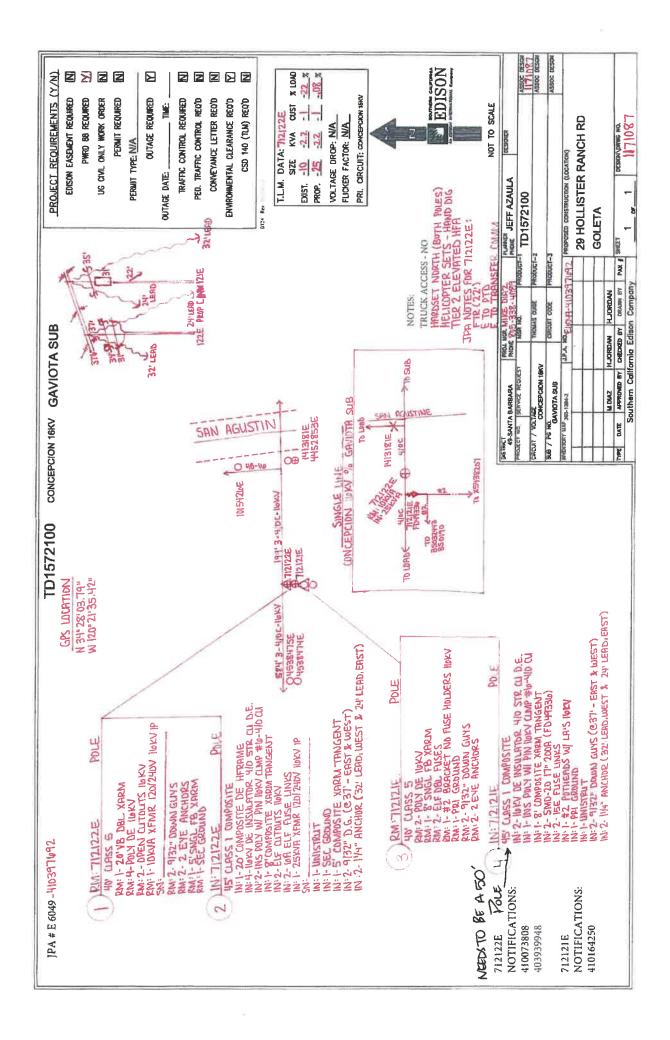
Anne





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Flight	t requested by:*	CHRIS BROV	VN					
Department:*		HOTLINE CONSTRUCTION INC						
Pax:*		N/A						
		951-282-1467	951-282-1467					
		CBROWN@hotlineconstructioninc.com						
SAP A	Accounting Number*	TD1572100						
			Flight Description	n				
Please	e choose a mission type	e:	I III II DODGI I DELL	<u> </u>				
i least thouse a mission type.								
	Camera – HD/IR		Line String	×	Pole-set			
	Crew support		Passenger		Recon			
	External Load		Patrol		Training			
	HEC		Photo		Need more info, please contact			
Mission specific details (ex: Passenger name, pole size/weight, external load type, etc):								
R&R POLE 712122E RM 40' CL5 WOOD N 45' CL1 COMP								
R&R POLE 712121E RM 40' CL5 WOOD I N 50' CL1 COMP								
	3 3.79N 120 21 35.42		ROX HEAVIEST F		GHT : 2300 LBS			
<u> </u>	0.7011 12021 00.12		NONTIE / NIEGO					
Gener	ral Operating Location	1	29 HOLLISTER RANCH RD, GOLETA - CONCEPCION 16KV LINE					
District			49 SANTA BARBARA					
LZ Coordinates (if known)								
Pick-up location for passenger flights								
Drop-off location for passenger flights								
Date(s) for which service is requested			TBD - ASAP					
	of Pick-up		y					
Approx. mission duration (if known)			1 DAY					
Back-up date for mission (if known)								
Autho								
Authorizer PAX and cell number								
*requ	ired information				Click to e-mail form			
For of	fice use only							
Date Received by Aircraft Operations:			Date Initial Contact Made:					
Follow up status: Week 1 Week 2								
	□ Week 2							
	□ week 3							



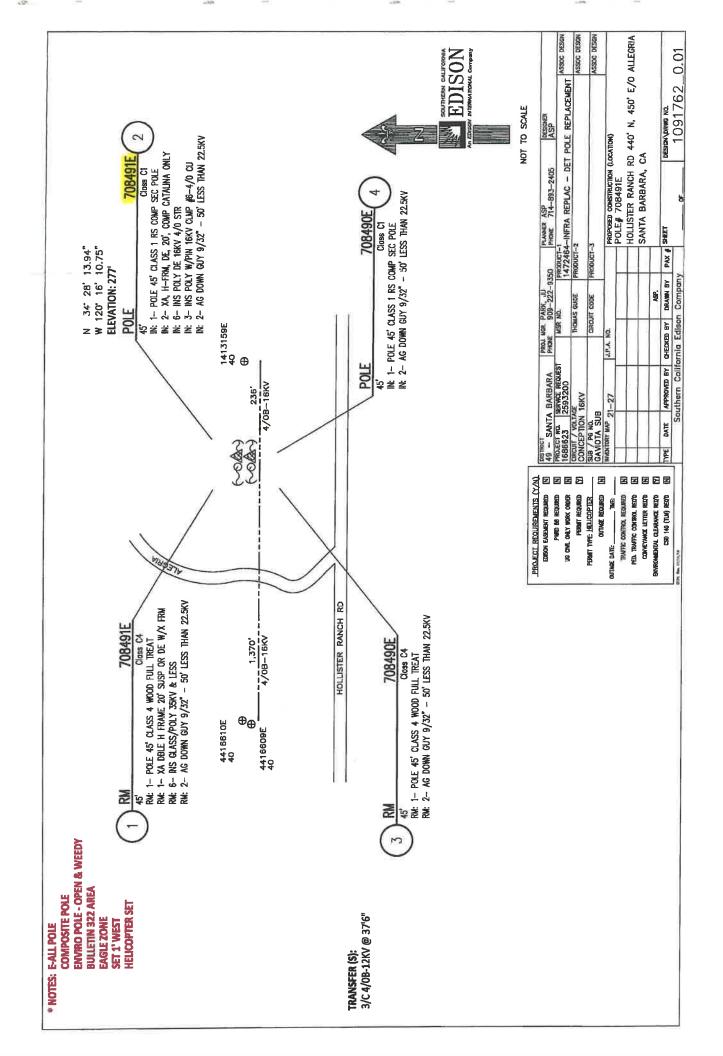




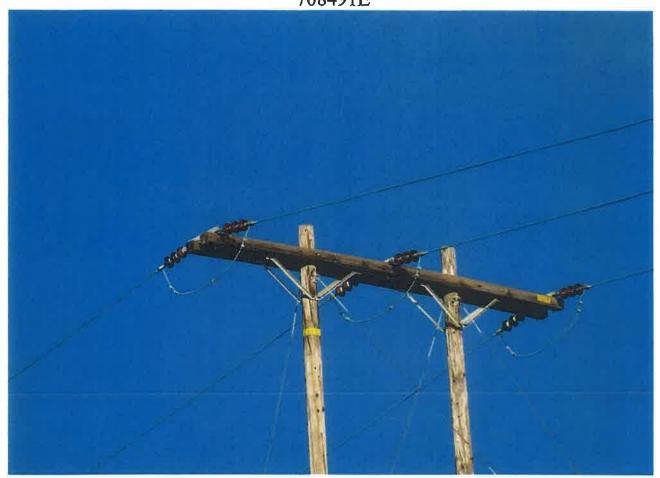


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Flight requested by:*		CHRIS BROWN							
Department:*		HOTLINE CONSTRUCTION INC							
Pax:*		N/A							
		951-282-1467	951-282-1467						
		CBROWN@ho	BROWN@hotlineconstructioninc.com						
SAP A	Accounting Number*	TD1472464							
Flight Description									
Please choose a mission type:									
_	Camera – HD/IR		Line String	×	Pole-set				
	Crew support		Passenger Passenger		Recon				
	External Load		Patrol		Training				
	HEC		Photo		Need more info, please contact				
	nec		I HOLO	_	, , , , , , , , , , , , , , , , , , ,				
Mission specific details (ex: Passenger name, pole size/weight, external load type, etc):									
R&R 708490E RM 45' CL4 WD IN 45' CL1 RS COMP SEC									
R&R 708491E RM 45' CL4 WD IN 45' CL1 RS COMP SEC									
34°28'13.94"N, 120°16'10.75"W APPROX HEAVIEST POLE WEIGHT : 900 LBS									
General Operating Location			LA PASADA						
District			49 SANTA BARBARA						
LZ Coordinates (if known)									
Pick-up location for passenger flights									
Drop-	off location for passen	iger flights							
Date(s) for which service is requested			TBD - ASAP						
Time of Pick-up									
Approx. mission duration (if known)									
Back-up date for mission (if known)									
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	orizer PAX and cell nu	ımber							
*required information Click to e-mail form									
For of	ffice use only		D / I		. f. 1				
Date Received by Aircraft Operations:			Date In	itial Contact I	viade:				
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	□ Week 3								
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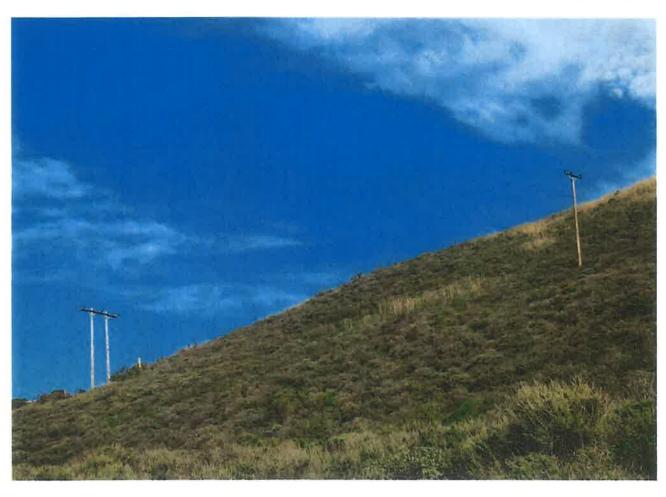
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