SOUTHERN CALIFORNIA
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SCE Aircraft Operations
Flight Request Form

Instructions: Please complete this form in its entirety and email to: 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

Flight requested by:*	
Department:*	
Pax:*	
Cell Number:*	
Email Address:*	

SAP Accounting Number*	

Flight Description

Please choose 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):

_____
_____
_____

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: _____
Referred to contractor: □ No   □ Yes, Date:_____ Company: _____
Follow up status: □ Week 1_____
　　　　　　　　　□ Week 2_____
　　　　　　　　　□ Week 3_____