

Aircraft Operations Flight Request Form



If you have any questions, please call Aircraft Operations at : 909-974-4676

- Requestor Information -

Flight Request ID: FR07956

FR_by

SCE: Contractor:

OR

Air Ops Use Only:

Requester Name: Dylan Klotz

SAP/TD Accounting No:

90550877

**Use commas to separate multiple numbers*

Requester Email: dylan.klotz@sce.com

Cell Number: 8057031930

i.e. (xxx) xxx-xxxx

Office Number:

i.e. (xxx) xxx-xxxx

Company Name

Company_ContactName

Company_Email

Company_PhoneNumber

* Department

Distribution

-Approver Information-

Name: ROBERT JARAMILLO

Approver Title/Position (Director, Sr Manager, Etc): PGS

Email: ROBERT.JARAMILLO@SCE.COM

Mobile Number: 8052175320

2nd CONTACT

Name: CHRIS STOCKMAN

Company Name: ROK POWER

Email: CHRIS.STOCKMAN@ROKPOWERUTILITIE

Mobile Number: 840-205-9074

- General Flight Information -

District:

SANTA BARBARA

General Area (closest City or Town):

montecito

Flight Priority

N/A

* Valley Fever Mitigation Areas



N/A



Fresno



Kern



Kings



Madera



Merced



Monterey



San Joaquin



San Luis Obispo



Santa Barbara



Tulare



Ventura

Red List Customer Proximity

Off

Sensitive Area:

N/A

LZ Type of Property:

N/A

Passenger Pick-up Location (If applicable):

Passenger Drop-off Location (If applicable):

LZ Coordinates (if known):

34.429538, -119.594136

Requested Start Date:

5/28/2026

Requested End Date:

5/28/2026

Time of Pick-up

0800

Note: Flight Request(s) are not scheduled until Air Ops has sent confirmation notification

Approx. mission duration or number of days helicopter is required (if known):

Hrs
 Days
 Weeks
 M-F
 Mon-Sat
 7 days/week
 Sat/Sun's Only
 Other (explain in text)

Flight Description

Please choose a mission type:

SELECTION REQUIRED

SCE Passenger(s): Off

External Load: On

Crew Support: Off

*** KMZ required for flight request to be processed ***

Non-SCE Passenger(s): Off

Recon: Off

Pole Set: Off

Patrol: Off

Training: Off

HEC: On

*** KMZ required for flight request to be processed ***



Imaging:

Line Stringing: Off

Line Vue: Off

LiDAR: Off

Approval Attachment Required ->>>

 905050877 1872135E 1872136E 1872139E 1872141E Helicopter request .msg
 905050877.kmz

Note: Please remove the following characters from the file title before attaching and Zip large files and folders with multiple files: # ~ / \ : * ? " < > | %

Please attach all Work Order Maps and Photos for Pole Sets

Mission Specific Details

Hec, tools, arms
 Fly baskets Max load 2000lbs
 LZ: 34.429538, -119.594136
 1872135E-34.428890, -119.593155
 1872136E- 34.428590, -119.592721
 1872139E-34.427525, -119.590792
 1872141E- 34.426626, -119.590802

150-250elv

External Load - Approval must be obtained from:

OU Requesting Manager or OSC

Human External Cargo (HEC) - Approval must be obtained from:

Note:

OU Director or IC (unless Letter of Delegation is obtained)

Includes both SCE & Supplemental employees

- Circuit Information -

1. Circuit Name: sheffield 16kv Voltage: 16kv
2. Circuit Name: Voltage:
3. Circuit Name: Voltage:
4. Circuit Name: Voltage:
5. Circuit Name: Voltage:

[Click here to add more](#)

- Flight Request HEC Justification -

Environmental restrictions/impact
● Additional notes/documentation needed

Tower Infrastructure operations
● Additional notes needed

Mid-span operations
● Automatic approval

Hazardous topography
● Additional notes needed

No access within reasonable walking distance
● Additional notes needed

operational efficiency
● Additional notes needed

Notes

no truck access

- External Load Information -

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
fly baskets/tools/arms	2000	multiple see kmz	150-250

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
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Equipment/Material

Weight(lbs)

GPS Coordinates (Lat/Long):

Elevation:

Equipment/Material

Weight(lbs)

GPS Coordinates (Lat/Long):

Elevation:

Equipment/Material

Weight(lbs)

GPS Coordinates (Lat/Long):

Elevation: