

Aircraft Operations Flight Request Form



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

- Requestor Information -

Flight Request ID: FR08488

FR_by ☐ SCE: ☒ Contractor:

OR

Air Ops Use Only:

Requester Name: Fabian Patricio

SAP/TD Accounting No:

441681

**Use commas to separate multiple numbers*

Requester Email: faian.patricio@sce.com

Cell Number: 619-679-0476

i.e. (xxx) xxx-xxxx

Office Number:

i.e. (xxx) xxx-xxxx

Company Name

Company_ContactName

Company_Email

Company_PhoneNumber

SCE Dept Name Veg Mangmnt

* Department

Other SCE Dept

-Approver Information-

Name: Tenille Thomas

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

Email: tenille.thomas@sce.com

Mobile Number:

2nd CONTACT

Name: Patrick Birkimer

Company Name: SCE

Email: patrick.1.birkimer@sce.com

Mobile Number:

- General Flight Information -

District:
MONROVIA

General Area (closest City or Town):
Monrovia

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:

Forestry Lands

Passenger Pick-up Location (If applicable):

34.2434 -117.959

Passenger Drop-off Location (If applicable):

34.2434 -117.959

LZ Coordinates (if known):

34.2434 -117.959

Requested Start Date:

9/28/2026

Requested End Date:

11/2/2026

Time of Pick-up

7am

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):

4 weeks, 4 crews, 4/10s schedule monday to thursday

☐

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: Off

Crew Support: Off

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 ->>>



ANF HASB Batch #1 9-11-2026 9.15



RE_ HASB Flight Request ANF - Director Approval Needed 9.15.eml

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

4 weeks, 4 crews, 4/10s schedule monday to thursday. clean towers for compliance.

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 -

Circuit Information

- | | |
|------------------|----------|
| 1. Circuit Name: | Voltage: |
| 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

n/a