

Aircraft Operations Flight Request Form



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

- Requestor Information -

Flight Request ID: FR08559

FR_by ☐ SCE: ☐ Contractor:

OR

Air Ops Use Only:

Requester Name: TONY LEMUS

SAP/TD Accounting No:

TD2124968

** Use commas to separate multiple numbers*

Requester Email: jlemus@outsourceucc.com

Cell Number: (559) 719-0695

i.e. (xxx) xxx-xxxx

Office Number:

i.e. (xxx) xxx-xxxx

Company Name OUTSOURCE

Company_ContactName TONY LEMUS

Company_Email jlemus@outsourceucc.com

Company_PhoneNumber (559) 719-0695

* Department

Distribution

- Approver Information -

Name:

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

Email:

Mobile Number:

2nd CONTACT

Name:

Company Name:

Email:

Mobile Number:

- General Flight Information -

District:

SHAVER LAKE

General Area (closest City or Town):

SHAVER LAKE

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):

LZ 37.065028 -119.164758

Requested Start Date:

10/12/2026

Requested End Date:

10/12/2026

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):

1 DAY

☐

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:

Off

Imaging:

Line Stringing:

Off

Line Vue:

Off

LiDAR: Off

Approval Attachment Required ->>>



TD2124968 MAPS.pdf



TD2124968.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

FLY COMPRESSORS TO FIVE LOCATIONS

External Load - Approval must be obtained from:

OU Requesting Manager or OSC

- Circuit Information -

1. Circuit Name:

PERMITER

Voltage:

12KV

2. Circuit Name: Voltage:

3. Circuit Name: Voltage:

4. Circuit Name: Voltage:

5. Circuit Name: Voltage:

[Click here to add more](#)

- External Load Information -

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
COMPRESSOR	1500	37.097108 -119.291324	5666

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
COMPRESSOR	1500	37.097135 -119.290345	5651

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
COMPRESSOR	1500	37.097118 -119.289410	5642

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
COMPRESSOR	1500	37.097101 -119.287449	5620

Equipment/Material	Weight(lbs)	GPS Coordinates (Lat/Long):	Elevation:
COMPRESSOR	1500	37.097379 -119.295015	5721