



HELICOPTER PILOT QUALIFICATIONS AND APPROVAL RECORD (Reference FSM 5700)

Contract Number: USFS: DOI:

SECTION I - Pilot Information (to be filled out by pilot seeking approval)

1. Name (Last, First, Middle Initial) 2. Date of Birth 3. Primary Telephone Number 4. Home Address (Street, City, State & ZIP Code) 5. E-Mail Address 6. Employed By 7. Address 8. Telephone No. 9. Employed Since (m/yr) 10. Previous Employer 11. Address 12. Telephone No. 13. Period Employed (m/yr) to 14. Previous Employer 15. Address 16. Telephone No. 17. Period Employed (m/yr) to 18. Medical Certificate: (attach copy) Class Date Limitations: 19. Most Recent Interagency Pilot Card: (attach copy) Date Issued: Expiration: Insp. Name: Agency: 20. Airman Certificate: (attach copy) Commercial ATP CFI Other Ratings: 21. Most Recent Interagency Flight Evaluation Information Date Evaluation Conducted: Insp. Name: Agency: 22. Aircraft accidents / FAA violations within the last 5 years: (if Yes, explain in box 45) No Yes 23. Has a Previous Interagency Pilot Card been denied, suspended, or revoked? Yes No (If Yes, please explain in box 45)

Table with columns: Helicopter Pilot-in-Command Flight Time & Type of Flight, PIC Hours Only, (a) Make, Model & Series seeking approval in, (b) Are you Type Rated for column "a" aircraft, (c) PIC Hours for Column "a" A/C. Rows include: 24. Total Helicopter, 25. Weight Class (Less than 12,500 lbs / 12,500 lbs or more), 26. Turbine Engine, 27. Reciprocating Engine, 28. Preceding 12 months, 29. Preceding 90 days, 30. Mountain Flying, 31. NVG Operations, 32. Offshore, 33. Vertical Reference, VTR, 34-44. Various evaluation and endorsement items with checkboxes for Attach Original, Attach Copy, Not Applicable, etc.

45. Applicant Remarks:

I certify that the information listed on this form is true and correct. In addition, I certify that I have read the statements attached to this form covering information pursuant to Public Law 93-579 (Privacy Act of 1974)

46. Pilot Signature 47. Date

SECTION II - Special Use Mission Approval (to be filled out by Pilot Inspectors only)

Table with columns: 1. Approved (Initial), 2. Mission, 3. Flight Evaluation (Administered/Not Administered), 4. Expiration Date (m/yr). Rows include: Low Level Operations, Helitack/Passenger Transport, External Load (belly hook), Water/Retardant Delivery, Longline VTR (150 ft), Snorkel, VTR, Mirror, Mountainous Terrain Flight, Aerial Ignition: PSD/Torch, Rappel Operations, Cargo Letdown, Snow Operations (deep snow), Designated "Pilot Trainer".

***Recurrence Flight Evaluation: 1 3 years 2 1 year

5. Make/Model/Series Aircraft: a. b. c. d. 6. Pilot Inspector (Print) 7. Pilot Inspector Signature 8. Agency 9. Issue Date 10. Card Expiration Date

11. T/M/S flight evaluation was administered / Remarks:



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Purpose and Use - - This information, along with data you may have supplied previously, and information developed by investigation will be for use by such as:

1. To determine your pilot qualifications to comply with contract specifications.
2. Transfer to the U.S. Department of Justice in the event of litigation.
3. Transfer, in the event there is indicated violation or potential violation of a statute, regulation, whether civil, criminal, or regulatory in nature, to the appropriate agency or agencies, whether Federal, State, local, or foreign, charged with the responsibility of investigation or prosecuting such violation or charged with enforcing or implementing the statute, rule, regulation, order, or license violated or potentially violated

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INSTRUCTIONS

Section I PILOT INFORMATION (To be filled out by the applicant)

1-17	Self explanatory.
18	Attach a copy of the medical certificate.
19	Attach a complete copy of the most recent Interagency Pilot Card.
20	Provide a legible copy of the front and back of each airman certificate.
21	Self explanatory.
22	Provide a detailed explanation of the event and any applicable paperwork. Attach additional page(s), as required.
23	Self explanatory.
24-33	Enter helicopter Pilot-in-Command time, only.
Column "a"	List only aircraft for which the contract is approved and will be operated by the applicant. If more than four aircraft, list in applicant remarks with pertinent item (a), (b), (c) information.
Column "b"	Select yes, no, or N/A (not applicable)
Column "c"	PIC hours only for each aircraft listed column "a" aircraft
38	Attach the original signature page from the Interagency Operations and Safety Procedures Guide for Helicopter Pilots "Pilot Certification"
39	Attach a copy of current FAR 135 Airman Competency / Proficiency Check (FAA form 8410-3) for each standard category make and model helicopter the pilot seeks approval. Required if operating aircraft listed on the operators 135 certificate.
40	Attach a copy of current (within the last 12 calendar months) Equipment Check Endorsement (or comparable document (E.G. CFR 14, part 61.58 Pilot Proficiency Check) for each Limited Use or Restricted Category make and model helicopter pilot seeks approval. (Required if operating aircraft not listed on the operators 135 certificate)
41	Attach a current reproduction of the CFR 14, part 61.56 Flight Review.
42	Attach a copy of FAR 133 endorsement. (If pilot is to be approved for Part 133 operations)
43	Attach a copy of FAR 137 endorsement. (If pilot is to be approved for Part 137 operations)
44	Attach a copy of the Vertical Reference Flight Training endorsement for VTR Snorkel and/or Long-line, as applicable, contained in the Interagency Operations and Safety Procedures Guide for Helicopter Pilots. (Required for long-line operations and snorkel operations conducted in helicopters not equipped with mirrors for external load operations)
45	Explain aircraft accidents / FAA violations within the last 5 years. Explain denial, suspension, and/or revocation of any previous Interagency Pilot Card.
46-47	Self explanatory.

SECTION II - Special Use Mission Approval (to be filled out by Pilot Inspectors only)

1	Pilot Inspector shall initial each approved special use mission. Line through missions not approved.
2	Self explanatory
3	If a flight evaluation was administered, enter the month and year. If it was not administered, check the "Not Administered" box.
4	Record expiration dates of missions that require recurrent flight evaluations.
5	List aircraft approved. If more than four aircraft, list additional aircraft in the remarks section.
6-10	Self explanatory.
11	Enter the T/M/S aircraft the flight evaluation (if any) was administered and any additional remarks. Not any additional aircraft approved for.

SECTION III - Helicopter Pilot Evaluation / Qualification Check

1-4 Self Explanatory

SECTION IV - Statement of Retention of Aircraft Pilot-in-Command Authority

1 To be signed prior to the flight evaluation.

SECTION V - Pilot Evaluation Summary

1-8 Enter "D" for Demonstrated Ability, "K" for Knowledgeable or "U" for Unsatisfactory. Cross out blocks not evaluated.

SECTION VI - Remarks, Limitations & Approvals

1 Record approvals by aircraft make and model, applicable limitations, or remarks detailing reason(s) for disapproval.

2 Initial block indicating final status of this evaluation

3-4 Self Explanatory

SECTION III - Helicopter Pilot Evaluation / Qualification Check

1. Name: (Last, First, Middle Initial)	2. Employed By:	3. Type of Evaluation: <input type="checkbox"/> Initial <input type="checkbox"/> Recurrent <input type="checkbox"/> Compliance <input type="checkbox"/> Post-Accident		
4. Aircraft: (make, model, series)	5. Aircraft N Number:	6. Flight Time:	7. Location of Flight Evaluation:	

SECTION IV - Statement of Retention of Aircraft Pilot-in-Command Authority

1. Authority Statement: I will remain responsible as the sole Pilot-in-Command of the aircraft during this evaluation flight and that I will refuse to attempt any maneuver which, in my opinion, may be hazardous, unsafe, or result in any contractual, company or FAA violation.

Pilot Signature (sign prior to flight) _____ 9. Date _____

SECTION V - Pilot Evaluation Summary

<i>D-Demonstrated Ability</i>	<i>K-Knowledgeable</i>	<i>U-Unsatisfactory</i>
1. Prerequisites		7. Special Use Operations
a. ¹ MH1 Basic Fire Behavior and Tactics (attach copy) Expires:	a. Low Level Operations	
b. ¹ MH2 Organization, Communication, and Airspace (attach copy) Expires:	b. Helitack/Passenger Transport	
c. ¹ MH3 Fire Helicopter Operations (attach copy) Expires:	i. Crew/Passenger Brief	
d. ¹ A-110 Aviation Transport of Hazardous Materials (attach copy) Expires:	ii. Manifest	
e. ² Grand Canyon SFAR (attach copy) Expires:	c. External Load (belly hook)	
***Note Recurrence: ¹ 3 year ² 1 year	d. Water/Retardant Delivery	
2. General Knowledge	e. Longline VTR (150 ft)	
a. Interagency Operations and Safety Procedure Guide	f. Snorkel	
b. Pilot Authority and Responsibility	i. VTR	
c. Power Assurance Check	ii. Mirror	
d. Flight Time and Duty Day Limitations	g. Mountainous Terrain Flight	
e. Personal Protective Equipment	i. Aircraft Performance	
f. Contractual Knowledge	ii. Terrain/Orographic Recognition	
g. Emergency / Survival Equipment	iii. Wind Evaluation	
h. Airspace/Communication Procedures	h. Aerial Ignition: PSD	
i. Fire Traffic Area/Temporary Flight Restrictions	i. Aerial Ignition: Torch	
ii. Controlled/Uncontrolled Airspace	j. Rappel Operations	
k. Aircraft Documents:	i. Emergency procedures	
i. Rotorcraft Combination Load Manual	ii. Obstacle Clearance Requirements	
ii. Hazardous Materials Handbook and Exemption Letter	iii. Standard Configuration	
3. Emergency Procedures	iv. Weight and Balance	
a. Settling with Power	v. Standard Communication / Crew Resource Management	
b. Dynamic Rollover	vi. Power Requirements	
c. Emergency Jettison	k. Cargo Letdown	
d. Autorotation / Forced Landings	i. Emergency procedures	
e. Loss of Tail Rotor Effectiveness	ii. Obstacle Clearance Requirements	
4. Flight Preparation and Planning	iii. Weight and Balance	
a. Aircraft Pilot Operating Manual (applicable FMS's/STC's)	iv. Standard Communication / Crew Resource Management	
b. Weight and Balance	v. Power Requirements	
c. Load Calculation	l. Snow Operations (deep snow)	
d. Aircraft Limitations	i. Aircraft Equipment Requirements	
e. Flight Plan/Flight Following	m. Designated "Pilot Trainer"	
f. Weather/NOTAMS	n. "Trainee Only" Pilot	
g. Fuel Requirements	o. Short Haul	
5. Equipment Check	i. Phase I, II, III, IV	
a. GPS navigation	ii. Standard Communication / Crew Resource Management	
b. FM Radio Operation	iii. Weight and Balance	
6. Flight Evaluation	iv. Emergency procedures	
a. Checklist Use	p. Float Operations (fixed)	
b. Preflight Procedure	q. Platform Landings: Offshore	
c. Starting/Take-off Procedures	r. Vessel Landings	
d. Flight Following	s. Night Vision Goggle Operations	
e. Power Assurance Check	t. ACETA Net Gun (all ACETA)	
f. Off-Site (Helispot) Operations	u. ACETA Eradication (only)	
i. Wind Evaluation	v. ACETA Gathering/Capture (Herding)	
ii. HOGE Power Check	w. ACETA Darting (only)	
iii. Hi Recon (obstacles, approach/departure, LZ elevation)	x. Other	
iv. Low recon (suitability, slope, obstacles)	8. Instrument Procedures (if required by contract)	
g. Confined Area Operations	a. Equipment Check	
h. Pinnacle Operations	b. ATC Procedures	
i. Ridgeline Operations	c. Navigation / Orientation	
j. Saddle Operations	d. Holding	
k. Shutdown/Post Flight Procedures	e. Approach-NDB,VOR, DME, LOC, ILS	
l. Crew Resource Management	f. Missed Approach / Circling Approach	
m. Judgment/Decision Making	g. Speed, Heading Altitudes	

SECTION VI - Remarks, Limitations & Approvals

1. Remarks, Limitations & Aircraft Approvals (as appropriate)

2. Evaluation Status (<i>Pilot Inspector Initial</i>) Approved Disapproved (<i>See Remarks</i>)	3. Pilot Inspector (<i>Print</i>)	4. Pilot Inspector (<i>Signature</i>)
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5700-20a change summary dated 5 Oct 2011

Executive Summary: The current 5700-20a is outdated, administratively burdensome, and does not contain current requirements for issuance of a Pilot Qualification Card. The form is non-concurrent with applicable references and contractual requirements. The document is not a stand-alone document capturing all documentation required to card an applicant resulting in inefficiency, confusion and redundancy. The Pilot evaluation section was not reflective of evaluation requirements for helicopters for which the applicant is responsible.

The new application is concurrent with Forest Service directives and contractual requirements as well as the Interagency Memorandum of Understanding between the DOI and FS to issue a FS and/or Interagency Pilot Qualification card.

Line Number	Current	Proposed	FROM	TO	ADDED	DELETED	JUSTIFICATION
	Title Area	Title Area	Picture AH-1 (Reference FSH 5709.12)	Picture UH-1 (Reference FSM 5700)			AH-1 not representative of carding process Reference update
Section I							
9	9		Employed Since	Employed Since (m/yr)			Clarification
13	13		Period Employed	Period Employed (m/yr)			Clarification
17	17		Period Employed	Period Employed (m/yr)			Clarification
19	19		Most Recent Interagency Pilot Card	Most Recent Interagency Pilot Card: (attach copy)			Clarification/requirement for certificate issue
18	18		Medical Certificate:	Medical Certificate: (attach copy)			Clarification/requirement for certificate issue
20	20		Airman Certificate:	Airman Certificate (attach copy)			Clarification/requirement for certificate issue
25	25		Weight Class	Weight Class			
			Under 7,000	Small 12,500 lbs or less			
			7,000 to 12,500	Medium more than 12,500			Align with FAA definition
			over 12,500				
		33			Vertical Reference, VTR		
24-31	24-32					Deleted "PIC Helicopter"	Contract requirement Redundant
22	23		(if Yes, explain in box 40)	(if Yes, explain in box 43)			Update numbers
23	23		...explain in box 40	...explain in box 45	"box" no applicable		Update numbers / Clarification
(a)	(a)		5 lines for applicant aircraft	3 lines for applicant aircraft			Update (rarely exceed 3 a/c)
(b)	(b)				"box" for type rated		Clarification
(c)	(c)				Vertical Reference		Contract requirement
(c)	(c)		Mountainous Terrain	Mountain Flying			Admin-fit to size
38	39				Signature Page - Operations & Safety Procedures Guide:		Contract requirement
39	40		Bi-Annual Flight Review:(attach copy)	Equipment Check Endorsement	"box" Attach Copy or "box" Not Applicable		clarify and contract requirement
	41				Current Flight Review		Update language
	42				FAR 133 Endorsement; "box" Attach Copy or "box" Not Applicable		Contract Requirement
	43				FAR 137 Endorsement; "box" Attach Copy or "box" Not Applicable		Contract requirement
	44				VTR Training Endorsement: (attach copy) "box for snorkel, long-line and not applicable		Contract Requirement
40	45		Accident / Incident Explanation, Comments;	Applicant Remarks:			Clarification
Section II							
Section Title			Approvals	Special Use Mission Approval			Update from Interagency Card Title
1 thru 2	1,2,3,4		Special Use Mission Items and admin procedures updated to reflect DOI and FS Interagency Card				Clarification / Mission Update
3 and 8	5		Combined redundancy of line items 3 and 8 into 5 a,b,c,d				Combined redundancy
	6				Pilot Inspector printed name		Administrative clarification
3 thru 13	5 thru 11						Updated line numbers
Section III							
Title Area	Title Area		Change				Administrative
1 thru 8	1 thru 7		Relocation of information				Administrative
2						Type of Evaluation	Not applicable
	New Title		Made SECTION IV as stand-alone pilot signature requirement				Emphasize
Sect IV thru VI	Sect V		Stand-alone Pilot Evaluation Summary				Administrative
Sect IV thru VI	Sect V		Updated specific to helicopter evaluations being completed as the current paperwork was not representative of helicopter evaluations				Clarification
Sect VII	Sect VI					(to be filled out by inspector)	Administrative
Sect VII, 3						Deleted expiration date	Captured elsewhere on form
	3				Pilot Inspector (Print)		Clarification