

USDA - Forest Service HELICOPTER DATA RECORD (Reference FSH 5709.16)	1. Contract/Rental Agreement No.	
	2. Item No.	
	3. Designated Base	
	4. Region/Area	

SECTION I - Operator & Aircraft Information (Fill in Blanks)

1. Operator		2. Address (Street, City, State & ZIP Code)				
3. Phone No.	4. Make and Model	5. FAA Registration No.	6. Manufacturer's Serial No.	7. Hobbs Reading		
8. Max Gross Weight <i>(Internal)</i>	9. Max Gross Weight <i>(External)</i>	10. No. of Passengers	11. Type Fuel	12. Fuel Flow (Cruise)		

FOR EMPTY WEIGHT SEE CURRENT WEIGHT AND BALANCE DATA

13. Authorized Uses (Initial appropriate boxes) <i>(Line Through Unapproved Uses)</i>			Expires (Fill in the Blank) _____		
a. <input type="checkbox"/> Passenger & Cargo	h. <input type="checkbox"/> Fire Suppression - Interagency	o. <input type="checkbox"/> Approved Left Seat Ops			
b. <input type="checkbox"/> Low Level Reconnaissance	i. <input type="checkbox"/> Fire Suppression - Local	p. <input type="checkbox"/> Approved MEL (MMEL Rev No. _____)(D95)			
c. <input type="checkbox"/> Cargo Only (Restricted Category)	j. <input type="checkbox"/> Water/Retardant Bucket	q. <input type="checkbox"/> Other _____			
d. <input type="checkbox"/> External Load (Sling)	k. <input type="checkbox"/> Fixed Tank Tanker No.(_____)	r. <input type="checkbox"/> Other _____			
e. <input type="checkbox"/> Rappelling	l. <input type="checkbox"/> Longline/Remote Hook	s. <input type="checkbox"/> Other _____			
f. <input type="checkbox"/> Aerial Ignition	m. <input type="checkbox"/> Rapid Refuel <input type="checkbox"/> CCR <input type="checkbox"/> Splash	t. <input type="checkbox"/> Other _____			
g. <input type="checkbox"/> Manager May Ride (Type 1 Only)	n. <input type="checkbox"/> Air Attack Type(_____)	u. <input type="checkbox"/> Other _____			

14. Approved By (Signature)	15. Title <p style="text-align: center;">Aircraft Inspector</p>	16. Region	17. Date
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SECTION II - Airframe Information (Fill in the Blanks) 1. Total Airframe Time _____ 2. Date of Last Annual/ Complete Phase Inspection _____ 3. Last Inspection Type _____ Time: _____ 4. On "Approved" Maintenance Program** <i>(AAIP approved in Ops Spec D73)</i> _____ 5. Airworthiness & Registration _____ 6. Date of Last Actual Weighing (24 Months **) _____ Equipped Weight _____ Bid Weight _____ 7. Flight Manual Rev No. _____ Date: _____ 8. Time Change, S/B & AD Listing ** _____ 9. Maintenance Records _____ 10. Flight Instruments (Condition) _____ 11. Engine Instruments (Condition) _____	SECTION III - Engine Information (Fill in the Blank) 1. Make & Model _____ 2. Total Time #1 _____ #2 _____ 3. Hours Since New or O/H #1 _____ #2 _____ TBO _____ HSI _____ <i>(Ops Spec D102)</i> 4. Hours Since HSI #1 _____ #2 _____ 5. Maintenance Records #1 _____ #2 _____ SECTION IV - Operating Certificates (Fill in the Blanks) 1. 14 CFR 133 Certificate No. _____ Expiration Date _____ 2. 14 CFR 135 Certificate No.** _____ 3. 14 CFR 137 Certificate No. _____
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SECTION V - Equipment (X appropriate boxes)

	Satisfactory			Satisfactory		
	Yes	No		Yes	No	
1. Hobbs Installation **	<input type="checkbox"/>	<input type="checkbox"/>	13. Cargo Hook **(Last Inspected	_____)	<input type="checkbox"/>	<input type="checkbox"/>
2. Free Air Temperature Gauge **	<input type="checkbox"/>	<input type="checkbox"/>	Keeperless Hook		<input type="checkbox"/>	<input type="checkbox"/>
3. Seat Belt (All) **	<input type="checkbox"/>	<input type="checkbox"/>	14. Personnel Access Step **		<input type="checkbox"/>	<input type="checkbox"/>
4. Shoulder Harness (All after 01/01/06) **	<input type="checkbox"/>	<input type="checkbox"/>	15. Water/Retardant Bucket **	(** Either 16 or 17)	<input type="checkbox"/>	<input type="checkbox"/>
5. First Aid Kit **	<input type="checkbox"/>	<input type="checkbox"/>	Type _____ Gallons _____		<input type="checkbox"/>	<input type="checkbox"/>
6. Survival Kit **	<input type="checkbox"/>	<input type="checkbox"/>	16. Fixed Retardant Tank **		<input type="checkbox"/>	<input type="checkbox"/>
7. Dual Control (For Pilot Check) **	<input type="checkbox"/>	<input type="checkbox"/>	Type _____ Gallons _____		<input type="checkbox"/>	<input type="checkbox"/>
8. Lighting - Night Operation **	<input type="checkbox"/>	<input type="checkbox"/>	17. Bucket/Door SW on Collective **		<input type="checkbox"/>	<input type="checkbox"/>
9. High Visibility Marking Main Rotor **	<input type="checkbox"/>	<input type="checkbox"/>	18. Long-Line - Remote Hook		<input type="checkbox"/>	<input type="checkbox"/>
10. Extended Height Gear **	<input type="checkbox"/>	<input type="checkbox"/>	(Last Inspected _____)		<input type="checkbox"/>	<input type="checkbox"/>
11. Convex Mirror **	<input type="checkbox"/>	<input type="checkbox"/>	19. Closed Circuit Refueling		<input type="checkbox"/>	<input type="checkbox"/>
12. Locking Fuel Cap	<input type="checkbox"/>	<input type="checkbox"/>	20. Defuel Capability		<input type="checkbox"/>	<input type="checkbox"/>
** Required for Interagency Fire			21. Rappel Anchor (Last Inspected	_____)	<input type="checkbox"/>	<input type="checkbox"/>

N Number _____

Make & Model _____

Inspection Date: _____

SECTION V (Continued) - Equipment (X appropriate boxes)

	Satisfactory			Satisfactory	
	Yes	No		Yes	No
22. Fire Extinguisher **			36. HAZMAT Book (w/CurrentExemption Letter)		
25. Baggage Compartment or Cargo Racks **			37. Procurement Document in aircraft		
26. Baggage Compartment Mod.			38. Security Devices		
28. Particle Separator/Air Filtration System			1. _____		
33. Wire Cutter Kit			2. _____		
34. White Strobe **			3. Incorporated into preflight checklist		
34. Conspicuity/Pulse Lights			39. Public Address/Siren System		
35. Ops Specs/Operations Manual in aircraft			40. Other _____		
** Required for Interagency Fire			41. Other _____		

SECTION VI - Service Truck (X appropriate boxes)

	U.S. Gallons	Satisfactory			Satisfactory	
		Yes	No		Yes	No
1. Capacity**	_____			13. Fuel Hoses (Approved Type)**		
2. Type Truck	_____			14. Mechanized Reel		
3. License No.	_____			15. Ground & Bonding Cables **		
4. Condition	_____			16. Fuel Filtering System **		
5. Fire Extinguishers (2 each 20-B,C) **				17. Date Filter Changed **		
6. Placarded - 49 CFR 172 **				18. Spare Filters **	_____	
7. Marked w/Type Fuel - 3 Inch Letters **				19. Gas Engine Protection		
8. No Smoking Signs - 3 Inch Letters **				20. FM Radio		
9. Sump & Drain **				21. Spill Kit ** (_____)Gallons Minimum		
10. Fuel Meters **				22. Filter Manufacturer's Manual		
11. Differential Pressure Gauge(s)				23. Record for recording sump draining **		
12. Nozzle Screen/Dust Cap **				24. Cell phone for FSV Driver		
13. Deadman Control (Required for CCR)				24. Other _____		

SECTION VII - Avionics (X appropriate boxes or Annotate N/A for items Not Required)

	Satisfactory			Satisfactory	
	Pass	Fail		Pass	Fail
1. ELT - Battery Due Date (_____)			19. Audio Controls ** (No. _____)		
2. ELT 91.207 Complied With			20. Transmitter Selectors		
3. ELT TSO** <input type="checkbox"/> 91a <input type="checkbox"/> 126			21. Receiver Selectors		
4. #1 VHF-AM Comm. Transceiver ** <input type="checkbox"/> 720 <input type="checkbox"/> 760			22. Microphone/Drop Cords (U-92A/U**)		
5. #2 VHF-AM Comm. Transceiver <input type="checkbox"/> 720 <input type="checkbox"/> 760			23. Transceiver PTT		
6. #1 VHF-FM Comm. Transceiver ** (Type _____)			24. Rappel Audio Control & Drop Cord		
7. #2 VHF-FM Comm. Transceiver (Type _____)			25. ICS Hot Mic/VOX (Pilot/Copilot **)		
8. Aux FM Provisions **			26. ICS PTT **		
9. GPS (Panel Mounted ** / Handheld) (Mark IFR / VFR as applicable)			27. Rear Seat PTT (2 Aft Cabin Exits **)		
10. GPS Database (Expiration Date _____)			28. Avionics Placarding		
11. Transponder ** (Per 91.413) (Due _____)			29. General Condition		
12. Altimeter/Static** (Per 91.411) (Due Date _____)			30. Avionics Records, Diagrams & Schematics		
13. Magnetic Compass Placard			31. Accessory Power (3 Pin) **		
14. TCAS/TCAD			32. Cargo Hook Connector (9 pin) **		
15. Automated Flight Following System			33. Other _____		
16. Verify AFF Operational			34. Other _____		
17. Additional GPS Antenna			35. Other _____		
18. GPS Dataport			36. Other _____		
17. Other _____			37. Avionics Inspection Completed By:		
18. Other _____			_____		
** Required for Interagency Fire					

Notes/Discrepancies: _____

SECTION VIII - (Forest Service Inspector Use Only)



USDA - Forest Service INTERAGENCY FIRE HELICOPTER DATA RECORD (Reference FSH 5709.16)	1. Contract/Rental Agreement No.	0
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	3. Designated Base	0
	4. Region/Area	0

SECTION I - Operator & Aircraft Information (Fill in Blanks)

1. Operator		2. Address (Street, City, State & ZIP Code)			
0		0			
3. Phone No.	4. Make and Model	5. FAA Registration No.	6. Manufacturer's Serial No.	7. Hobbs Reading	
0	0	0	0	0	
8. Max Gross Weight (Internal)	9. Max Gross Weight (External)	10. No. of Passengers		11. Type Fuel	12. Fuel Flow (Cruise)
0	0	0			0

FOR EMPTY WEIGHT SEE CURRENT WEIGHT AND BALANCE DATA

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a. <input type="checkbox"/> Passenger & Cargo	h. <input type="checkbox"/> Fire Suppression - Interagency	o. <input type="checkbox"/> Approved Left Seat Ops			
b. <input type="checkbox"/> Low Level Reconnaissance	i. <input type="checkbox"/> Fire Suppression - Local	p. <input type="checkbox"/> Approved MEL (MMEL Rev No. <u>0</u>) (D95)			
c. <input type="checkbox"/> Cargo Only (Restricted Category)	j. <input type="checkbox"/> Water/Retardant Bucket	q. <input type="checkbox"/> Other _____			
d. <input type="checkbox"/> External Load (Sling)	k. <input type="checkbox"/> Fixed Tank Tanker No.(_____)	r. <input type="checkbox"/> Other _____			
e. <input type="checkbox"/> Rappelling	l. <input type="checkbox"/> Longline/Remote Hook	s. <input type="checkbox"/> Other _____			
f. <input type="checkbox"/> Aerial Ignition	m. <input type="checkbox"/> Rapid Refuel <input type="checkbox"/> CCR <input type="checkbox"/> Splash	t. <input type="checkbox"/> Other _____			
g. <input type="checkbox"/> Manager May Ride (Type 1 Only)	n. <input type="checkbox"/> Air Attack Type(_____)	u. <input type="checkbox"/> Other _____			

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USDA - Forest Service HELICOPTER DATA RECORD (Reference FSH 5709.16)	1. Contract/Rental Agreement No. 0
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SECTION I - Operator & Aircraft Information (Fill in Blanks)

1. Operator 0		2. Address (Street, City, State & ZIP Code) 0			
3. Phone No. 0	4. Make and Model 0	5. FAA Registration No. 0	6. Manufacturer's Serial No. 0	7. Hobbs Reading 0	
8. Max Gross Weight (Internal) 0	9. Max Gross Weight (External) 0	10. No. of Passengers 0		11. Type Fuel	12. Fuel Flow (Cruise) 0

FOR EMPTY WEIGHT SEE CURRENT WEIGHT AND BALANCE DATA

13. Authorized Uses (Initial appropriate boxes) (Line Through Unapproved Uses)		Expires (Fill in the Blank) _____	
a. <input type="checkbox"/> Passenger & Cargo b. <input type="checkbox"/> Low Level Reconnaissance c. <input type="checkbox"/> Cargo Only (Restricted Category) d. <input type="checkbox"/> External Load (Sling) e. <input type="checkbox"/> Rappelling f. <input type="checkbox"/> Aerial Ignition g. <input type="checkbox"/> Manager May Ride (Type 1 Only)	h. <input type="checkbox"/> Fire Suppression - Interagency i. <input type="checkbox"/> Fire Suppression - Local j. <input type="checkbox"/> Water/Retardant Bucket k. <input type="checkbox"/> Fixed Tank Tanker No.(_____) l. <input type="checkbox"/> Longline/Remote Hook m. <input type="checkbox"/> Rapid Refuel <input type="checkbox"/> CCR <input type="checkbox"/> Splash n. <input type="checkbox"/> Air Attack Type(_____)	o. <input type="checkbox"/> Approved Left Seat Ops p. <input type="checkbox"/> Approved MEL (MMEL Rev No. <u>0</u>)(D95) q. <input type="checkbox"/> Other _____ r. <input type="checkbox"/> Other _____ s. <input type="checkbox"/> Other _____ t. <input type="checkbox"/> Other _____ u. <input type="checkbox"/> Other _____	

14. Approved By (Signature)	15. Title	16. Region	17. Date
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INTERAGENCY HELICOPTER LOAD CALCULATOR Version (03/2008)		Electronic	MODEL	0	
			N#	0	
PILOT(S)			DATE		
MISSION			TIME		
1	DEPARTURE		PA	OAT	
2	DESTINATION		PA	OAT	
3	HELICOPTER EQUIPPED WEIGHT		0		
4	FLIGHT CREW WEIGHT				
5	FUEL WEIGHT	0 gals X	7 lbs/gal	0	
6	OPERATING WEIGHT (3 + 4 + 5)		0		
			Non-Jettisonable		Jettisonable
			HIGE	HOGE	HOGE- J
7a	PERFORMANCE REFERENCE (List chart/supplement from Flight Manual)				
7b	COMPUTED GROSS WEIGHT (From Flight Manual Performance Section)				
8	WEIGHT REDUCTION (Required for all Non-Jettisonable loads)				
9	ADJUSTED WEIGHT (7b minus 8)				
			#VALUE!	#VALUE!	#VALUE!
10	GROSS WEIGHT LIMITATION (From Flight Manual Limitations Section)				
11	SELECTED WEIGHT (Lowest of 9 or 10)				
			#VALUE!	#VALUE!	#VALUE!
12	OPERATING WEIGHT (From Line 6)				
			0	0	0
13	ALLOWABLE PAYLOAD (11 minus 12)				
			#VALUE!	#VALUE!	#VALUE!

14	PASSENGERS/CARGO	
15	ACTUAL PAYLOAD (Total of all weights listed in Item 14) Line 15	0
must not exceed Line 13 for the intended mission (HIGE, HOGE or HOGE-J)		
	PILOT SIGNATURE	HazMat Onboard
	MANAGER SIGNATURE	Yes No

Instructions - FS 5700-21a (Helicopter Data Record), FS-5700-21b (Helicopter Fire Card), and FS-5700-21c (Helicopter Data Card)

1. A. This form may be filled in on the computer, or blank forms may be printed and filled in by hand. Computer: When the information is entered on the 5700-21a - Part 1, the information will be automatically transferred to the FS-5700-21a - Part 2, Fire Card.
B. Printing: Click on the tab along the lower edge of the worksheet to gain access to the individual sheets. The forms should print one page for each form. If this does not happen do the following: (1) Click on "File", "Page Setup", "Margins", Check that all margins are set to: ".25".

2. SPECIAL USES – If a Special Use is Authorized, clicking on the item on FS-5700-21a - Part 1, a check mark will appear in the provided space. You will have to Initial the Authorized Uses on the card, and line through the items not authorized. Any Additional Uses will also automatically be filled in on the FS-5700-21a - Part 2, Fire Card.

A RED TRIANGLE indicates a drop down box which provides information on what information is required, or what should be looked for, as in the example in the upper right corner of this block.

3. To Insert your information in blocks 13. Title, and 14. Region, Click on "Tools", "Protection", "Unprotect Sheet". Remember to Re-Protect the sheet and Card(s) afterward.

SUGGESTION: Before or After completing a form, save it to a separate file i.e. N12345.xls. I recommend you make a folder for "Helicopters" and then sub-folders for the individual operators, and save the different "N" numbers in the operators file.

Please forward all comments, questions, noted discrepancies, and suggestions to:

Gil Elmy
Work: 801-622-9170
Cell: 801-540-8473
e-mail: gelmy@fs.fed.us

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