

## CONTRACTOR AVIATION SERVICES DATA

**The information on this form is required to be updated prior to each flight or series of flights as requested by the ASPOC.**

### CONTRACTOR INFORMATION

Date of Information: \_\_\_\_\_ Contract Number: \_\_\_\_\_  
Commercial/Lease Operator: \_\_\_\_\_  
Type of Aircraft to be Utilized (*Manufacturer and Model Number*): \_\_\_\_\_  
Aircraft Registration Number: \_\_\_\_\_  
Airplane       Yes       No      Single Engine       Yes       No      Multi-Engine       Yes       No  
Helicopter     Yes       No      Single Engine       Yes       No      Multi-Engine       Yes       No

### CONTRACTOR INFORMATION

*(As of the date specified above, the below named pilot has completed)*

Pilot Name: \_\_\_\_\_  
Aircraft Certificates and Ratings: \_\_\_\_\_  
Total Hours in Category: \_\_\_\_\_ Total Hours in Class: \_\_\_\_\_  
S.E. Hours in Class: \_\_\_\_\_ M.E. Hours in Class: \_\_\_\_\_  
Total Hours as Pilot in Command in Category During the Last 12 Months: \_\_\_\_\_  
Total Hours as Pilot in Command in Make and Model (*above aircraft*): \_\_\_\_\_  
Total Hours as Pilot in Command in Make and Model (*above aircraft*) Last 6 Months: \_\_\_\_\_  
Total Hours as Pilot in Command in Make and Model (*above aircraft*) Last 30 Days: \_\_\_\_\_  
Total Hours of Project Specific Type Flying in Last 90 Days: \_\_\_\_\_

#### MEDICAL

Above named pilot  has /  does not have a current, valid second class FAA Medical Certificate. (*If yes, attach a copy of the certificate*).

#### PILOT'S CERTIFICATE

Above named pilot  has /  does not have a valid FAA ATP or Commercial Pilot Certificate. (*If yes, attach a copy of the certificate*).

#### MINIMUM REQUIRED FLIGHT EXPERIENCE

- 1200 hours in airmen classification category (*i.e., airplane, rotor craft*).
- 100 hours in airmen classification class (*i.e., single/multi-engine, land, water, helicopter, etc.*).
- 100 hours Pilot in Command during the previous 12 months in category (*airplane/rotor craft*) of aircraft to be utilized.
- 25 hours Pilot in Command in make and model of aircraft to be utilized, 10 of which must have been within the last 6 months.

**NOTE:** A person authorized to make legally binding commitments on behalf of the named commercial operator must sign below indicating that a reasonable and prudent inquiry has been made to ascertain the true and accurate basis of all statements.

\_\_\_\_\_ *Print First and Last Name*

\_\_\_\_\_ *Title*

\_\_\_\_\_ *Signature*

\_\_\_\_\_ *Date*

## CONTRACTOR AVIATION SERVICES DATA (Continued)

### AIRCRAFT MAINTENANCE DATA SHEET (For aircraft noted on previous page under Contractor Information)

Air Frame Total Time: \_\_\_\_\_

#### INSPECTIONS

	Months	Hours	Done	Due	Remain	Notes
Annual Inspection						
Oil Change						
Engine Overhaul						
Propeller Overhaul Date						
Fire Ext. Yearly						
Altimeter						
Static						
Encoder						
Transponder						
ELT Battery						
AD's						

**NOTE:** A person authorized to make legally binding commitments on behalf of the named commercial operator must sign below indicating that a reasonable and prudent inquiry has been made to ascertain the true and accurate basis of all statements.

\_\_\_\_\_ *Print First and Last Name*

\_\_\_\_\_ *Title*

\_\_\_\_\_ *Signature*

\_\_\_\_\_ *Date*

**Submit completed form to  
[Rene\\_R\\_Larcoque@rl.gov](mailto:Rene_R_Larcoque@rl.gov) (APOC)**