



## REGION 8 / SOUTHERN AREA Mission Aviation Safety Plan (MASP)



### Mission Project Name Navy Flight Operations

Forest-Refuge-Unit  
National Forests in Florida

District-Unit  
Ocala National Forest

### Instructions

#### **MASP Format**

Region 8 MASP templates:

- Standardize format by aviation mission (i.e. Ecosystem Management, Aerial Ignition, etc.), Regional narrative, and risk assessments
- Are tiered to accept Forest and / or District supplements
- Optimize technology (i.e. QR codes)
- Streamline the signature process
- Are renewed / re-approved by calendar year (January 1 to December 31)

MASP templates are formatted as Word documents to accept Forest supplements. MASP's will be processed for signature in PDF format.

#### **Policy and Compliance**

- Compliance with the operational procedures outlined in the MASP is mandatory
- MASP Forest / District Supplement direction may be more restrictive, not less, than National / Regional policy and Regional parameters established in the MASP template
- Participant(s) qualifications will be verified and assigned responsibilities discussed during daily briefing(s)

#### **MASP Review and Signature**

MASP review and signature will follow the top to bottom progression as shown on the signature page. E-signature will be the primary endorsement method. All MASP's are routed through the assigned Zone Aviation Officer (ZAO) to the Regional Office. Line Officer approval is required in MASP signature block signature page location. MASP's with incomplete signature pages or expired date are invalid.

#### **Cooperator Review and Signature**

If cooperator operations are being conducted, the appropriate signature must be included on the MASP. When cooperator operations do not apply, the cooperator signature block shall be marked as "Not Applicable" by the ZAO.

#### **Forest / District Supplement Content**

MASP Forest supplement must be completed prior to signature. The number of MASP supplements is commensurate with the number of Forests, Districts, Units, or Refuges. For example:

- If the MASP only applies to a Forest (i.e. Cherokee NF) then, only one Supplement is required.
- If the MASP covers more than one Forest (i.e. National Forests of Florida) then additional sub-Forest supplements are required
- "Additional Local Mission" windows are available for Forest / District information entry
- The MASP template includes a general risk assessment for all helicopter operations mission subsets. A blank worksheet is available to refine the risk assessment for unique Forest / District or mission specific hazards

#### **Supplement pages include:**

- Mission Area Map(s)
- Flight Following and Frequencies
- MTRs and MOAs
- Medical Information for the Designated Area



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#### Subsequent Pages

Prior to mission initiation and as information becomes available, Project Supervisors/Managers will complete subsequent pages:

- Risk Assessment Matrix
- Aircraft Performance Planning
- Personal Protective Equipment
- Aircraft Information
- Pilot information
- Crash Rescue/Medivac Plan
- Doors-Off or Doors-Open Operations (if needed)
- Additional page(s) if needed

#### Additional Pages (Examples):

- Go/No-Go Checklist
- Risk Assessments (DORA, GAR, FRAT)
- Hazardous Material Manifest Form (DOT SP 9198)
- PSD Organization Chart
- Any additional frequency changes, medical information, or checklists

#### MASP Acknowledgment

MASP Acknowledgment is a checklist and signature form in the MASP template. Collectively, all MASP participants will review and discuss the MASP then sign the form.

#### Plan File and Retention

A Box file system will be established to organize, sign, and archive MASPs. MASPs finalized with full signature will be maintained in the dispatch office and referenced during flight. MASP and related field records (i.e. MASP Acknowledgment, daily briefing sheets) will be retained as directed by policy.



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**Agency Requesting Mission**

U.S. Forest Service

**Anticipated Date's:** No

**Calendar Year:** Yes

**Date Variance Acceptable:** Choose an item.

**Calendar Year**

2026

**Aircraft Type**

Rotor-Wing:

Fixed-Wing:

**MASP Objectives**

Resource:

Incident:

LE&I Missions:

EMR. Operations:

EMR. Readiness:

**MASP Start Date**

January 1, 2026

**MASP End Date**

December 31, 2026

**Prepared By:** /S/ Joshua Quinn

**Title:** Helicopter Manager

October 17, 2025

**Date**

**Reviewed By:**

Forest Level /S/ David Quisenberry

**Title:** Asst. Forest FMO

October 22, 2025

**Date**

**Reviewed By:**

ZAO /s/ Keith R. Haskins

**Title:** South Zone Aviation Officer

November 14, 2025

**Date**

**Reviewed By:**

RASO

**Title:** Regional Aviation Safety Officer

See Signature for Date

**Date**

**Reviewed By:**

RAO

**Title:** Deputy Regional Aviation Officer

See Signature for Date

**Date**

**Mission & Risk Assessment**

**Approved By:**

Line Officer's

**Title:** Forest Supervisor

See Signature for Date

**Date**

**Mission & Risk Assessment**

**Approved By:**

Cooperator Line Officer

**Title:** Other (State in Name Block)

See Signature for Date

**Date**



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#### Mission Supervisor

District Fire Management Officer

#### Alternate Mission Supervisor

Helicopter Manager Assigned to Aircraft  
or training coordinator/instructor

#### Mission Project Navy Flight Operations

#### Mission Description:

Ecosystem Management (EM) aviation use is aerial detection and observation missions such as wildlife management, timber management, animal tracking, storm damage assessment, and biological/hydrologic surveys. Helicopters are used for EM flight profiles under 500' above ground level (AGL). If operating 500' AGL or higher, fixed-wing aircraft use may be authorized.

#### Additional Local Mission Description:

Note: Compliance with the operational procedures outlined in the Mission Aviation Safety Plan is required. A day trip authorization form may be required for non-Forest Service personnel.

Navy Operations (NO): NO missions consist of reconnaissance and missions that require flight profiles under 500' above ground level (AGL). These missions are generally accomplished using a helicopter. The use of fixed-wing aircraft to accomplish these missions are authorized if operating 500' AGL or above. The flight profiles associated with NO are used to accomplish (resource) missions such as, but not limited to: Facility Surveys, Resource Effects, Public locations prior to an event.

Missions described above will be accomplished with Exclusive Use, Call-When-Needed (CWN), or agency owned aircraft (WCF). Incoming units will receive a local aviation in-briefing (airspace, frequencies, DOD areas, etc.).

#### Aviation Mission Objectives:

- Provide safe, timely, and cost-effective alternative to ground-based operations
- Enhance user ability to gather accurate real-time data
- Accomplish agency goals/expectations with limited resources and personnel

#### Additional Local Mission Objectives:

(This space intentionally left blank Blank)

#### Aircraft Justification for Mission:

Rotor and/or fixed-wing aircraft use is the most efficient means to meet mission objectives. Aerial EM mission(s) allows for the following:

- **Personnel Safety:** Limits personnel exposure by reducing the need for ground operations, particularly in remote, adverse terrain and thick, impenetrable vegetation
- **Cost Effectiveness:** Expedites timeframes; May reduce personnel numbers and costs required for mission accomplishment
- **Timeliness:** Resource mission objectives can be determined quickly from the air assisting real-time and critical decision making
- **Land Stewardship:** Enables mission objectives/goals to be met while being light on the land

#### Additional Local Aircraft Justification for Mission:

(This space intentionally left blank Blank)



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**\*Mission risk assessment completed prior to mission approval\***

**\*\*Risk assessment hazards shall be re-assessed prior to mission engagement\*\***

**\*\*\*See appropriate management level for approval and dynamic flowchart decision-making tool\*\*\***

<b>RISK ASSESSMENT MATRIX</b>		<b>PROBABILITY</b>				
		<b>Likelihood of Mishap if Hazard is Present</b>				
		Almost Certain (Continuously experienced)	Likely (Will occur frequently)	Possible Will occur several times)	Unlikely (Improbable; but has occurred in the past)	Rare (Remotely possible; but highly improbable)
<b>SEVERITY</b>	<b>Consequence if Mishap Occurs</b>	<b>Extremely High</b>	<b>Extremely High</b>	<b>Extremely High</b>	<b>High</b>	<b>Medium</b>
	<b>Catastrophic</b> (Death, Loss of Asset or Mission Capability or Unit Readiness)	<b>Extremely High</b>	<b>Extremely High</b>	<b>High</b>	<b>Medium</b>	<b>Medium</b>
	<b>Critical</b> (Permanent Disabling Injury or Damage, Significantly Degraded Mission Capability or Unit Readiness)	<b>Extremely High</b>	<b>Extremely High</b>	<b>High</b>	<b>Medium</b>	<b>Medium</b>
	<b>Moderate</b> (Non-Permanent Disabling Injury or Damage, Degraded Mission Capability or Unit Readiness)	<b>High</b>	<b>High</b>	<b>Medium</b>	<b>Low</b>	<b>Low</b>
<b>Negligible</b> (Minimal Injury or Damage, Little or No Impact to Mission Capability or Unit Readiness)	<b>Medium</b>	<b>Medium</b>	<b>Low</b>	<b>Low</b>	<b>Low</b>	
<b>Risk Assessment Codes (RAC)</b>		<b>Extremely High=1 High=2 Medium=3 Low=4</b>				

### Risk Assessment Codes

RAC Value	Risk Category	Action Required
1	Extremely High	Stop, Mitigation Required
2	High	Mitigation Needed, Consider Stopping
3	Medium	Mitigation Recommended
4	Low	Possible Acceptance, Mitigation Optional

\*Reference specific agency policy regarding action required based on risk category

### Appropriate Management Level for Operational Risk Decisions

<u>Risk Category/Value</u>	<u>Fire Mission</u>	<u>Non-fire Mission</u>
Extremely High (1)	Incident Commander or Operations Sections Chief	Line Officer / Manager
High (2)	Incident Commander or Operations Sections Chief	Line Officer / Manager
Medium (3)	Air Operations Branch Director	Mission Aviation Manager
Low (4)	Base Manager	Helicopter or Flight Manager



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### Risk Assessment Worksheet

**System Being Evaluated:** Aviation Ecosystem Management

**Risk Assessment Worksheet Page:** 01 of 05

Sub System(s)	Hazard(s)	Pre-Mitigation			Mitigation(s)	Post Mitigation		
		Probability	Severity	Risk Level		Probability	Severity	Risk Level
<b>Mission – Policy</b>	Operational/Mission goals may be unstated, unclear or conflict with policy.	Possible	Critical	High (2)	Conduct thorough briefings, ensure organization is in place, and adhere to interagency policy, procedures & Guides (NSHO, NSAI, SFRO).	Unlikely	Critical	Medium (3)
<b>Mission - Policy</b>	MASP absent or not complete (Policy Deviation).	Possible	Critical	High (2)	Ensure MASP and risk assessment are completed and approved at appropriate level. Ensure Zone Aviation Officer is involved in mission planning. MASP should be used as a briefing tool. If at any point during this briefing any or all participants are uncomfortable to continue, or the ORA (Operational Risk Assessment) risk level exceeds the approved rating level, the mission will be cancelled or delayed until the issue(s) can be rectified. Ensure that all parties are available for mission briefings.	Unlikely	Critical	Medium (3)
<b>Mission</b>	Personnel transport / recon; Unimproved landing zone / helispot.	Possible	Critical	High (2)	Ensure load calculations/manifests are completed, reviewed & signed. Landing zones approved by qualified personnel. Landing zone staffed by qualified helitack as available. Ensure required PPE is being utilized.	Unlikely	Critical	Medium (3)
<b>Mission - Communications</b>	Frequency management, cockpit overload, inadequate briefing, and/or loss of communication.	Possible	Critical	High (2)	Identify alternate landing areas in pre-burn recon. Perform an aerial recon of the site before landing. Notify flight following personnel of landing location.	Unlikely	Critical	Medium (3)



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### Risk Assessment Worksheet

**System Being Evaluated:** Aviation Ecosystem Management

**Risk Assessment Worksheet Page:** 02 of 05

Sub System	Hazard(s)	Pre-Mitigation			Mitigation(s)	Post Mitigation		
		Probability	Severity	Risk Level		Probability	Severity	Risk Level
<b>Personnel</b>	Unqualified employees working in or around aircraft. Personnel not trained properly or proficient with equipment/mission. Personnel too close to drop site. Personnel unfamiliar with local flight following protocol and/or crash rescue procedures.	Possible	Critical	High (2)	All personnel will be fully qualified to perform the duties associated with a position and will take part in the pre-mission brief, assignments (duties) will be assigned. Personnel unfamiliar with their assigned duty/role should ask for clarification. Emphasis on mentoring and training in conjunction with operations and emphasize hazard identification and communication methods. Advise Pilot to communicate / provide feedback with ground contact.	Unlikely	Critical	Medium (3)
<b>Personnel Human Factors</b>	Acceptance of high-risk missions as normal. Lack of CRM (Crew Resource Management), Task saturation or fixation, hazardous attitude. Poor mission analysis. Fatigue. Management pressure/mission driven sense of urgency. Unknown change in project objective. Experience level of air crew and vendor.	Possible	Catastrophic	Extremely High (1)	Conduct thorough risk assessments & brief/debrief. Pilot and flight crew trained in CRM and work together in mission planning. Conduct daily briefing and complete worksheet including real time ORA. Ensure management does not place undue pressure or sense of urgency on flight crews. Ensure project objective has not changed and re-evaluate mission if changes occur.	Unlikely	Catastrophic	High (2)
<b>Aircraft</b>	Aircraft Performance not suitable for mission. Operating in Hot, High, and Heavy (HHH) environment.	Unlikely	Catastrophic	High (2)	Ensure appropriate aircraft is ordered, utilized and operated in accordance with appropriate flight manuals. Utilize agency load calculation process for all flights (NWCG Standards for Helicopter Operations). Ensure pilot/aircraft are carded for mission. Conduct thorough pre-mission briefing and planning.	Rare	Catastrophic	Medium (3)
<b>Aircraft</b>	Mission may require operating in the avoidance area of the height velocity curve; Low Level Flight below 500 feet AGL.	Likely	Critical	Extremely High (1)	Reduce time spent at speeds and altitudes from which a successful autorotational descent and landing cannot be completed. Identify and brief emergency landing areas in close proximity to the project area.	Possible	Critical	High (2)



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### Risk Assessment Worksheet

**System Being Evaluated:** Aviation Ecosystem Management

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Sub System	Hazard(s)	Pre-Mitigation			Mitigation(s)	Post Mitigation		
		Probability	Severity	Risk Level		Probability	Severity	Risk Level
<b>Aircraft</b>	Aircraft experiences an engine, transmission, hydraulic, or tail rotor failure while in low and slow flight profile.	Unlikely	Catastrophic	High (2)	Aircraft maintenance records reviewed during aircraft carding. Ensure contract maintenance standards are being adhered to. Reduce the amount of time operating within the avoid zone of the height velocity chart during low level operations. Regional Quality Assurance audits conducted within the region.	Rare	Catastrophic	Medium (3)
<b>Environment</b>	Adverse wind speed / direction, thunderstorms, etc. Weather becoming less than VFR conditions	Unlikely	Catastrophic	High (2)	Ensure flight crew obtains current forecast and updated weather briefings and continually monitor the wind speed and direction. If visibility or winds become unfavorable, postpone until conditions improve or delay to another day.	Rare	Catastrophic	Medium (3)
<b>Environment</b>	Flying in Mountainous Terrain while focused on a low-level mission.	Possible	Catastrophic	Extremely High (1)	Carded and experienced pilot. Chosen aircraft will have enough performance to allow for more options flying in mountainous terrain. Recon of the areas to be treated will occur prior to the mission. All boundaries aerial hazards will be pre-identified. Division of tasks between pilot, HMGB and crewmembers and communicating location relative to terrain.	Unlikely	Catastrophic	High (2)
<b>Aerial Hazards</b>	Other aircraft, powerlines, towers, birds, UAS, during operations especially while in Low Level flight profile (below 500') during the special use mission.	Possible	Catastrophic	Extremely High (1)	Brief personnel of known aerial hazards. Complete high-level reconnaissance prior to committing aircraft to low level operations. Practice "see and avoid". Communicate using principles of CRM to identify/mitigate hazards.	Unlikely	Catastrophic	High (2)



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**Risk Assessment Worksheet**

**System Being Evaluated:** Aviation Ecosystem Management

**Risk Assessment Worksheet Page: 04 of 05**

Sub System	Hazard(s)	Pre-Mitigation			Mitigation(s)	Post Mitigation		
		Probability	Severity	Risk Level		Probability	Severity	Risk Level
<b>In flight hazards- External cargo</b>	Unstable Load during Flight.	Possible	Catastrophic	Extremely High (1)	Improve crew training, preparation, and assembly. Prepare cargo correctly using approved equipment and rigging techniques.	Unlikely	Catastrophic	High (2)
<b>In flight hazards- Internal Cargo</b>	Loads not balanced properly for CG or items coming loose or moving during flight.	Possible	Catastrophic	Extremely High (1)	Follow proper loading techniques for center of gravity issues, pilot will be consulted on any questionable items or placement. Secure all cargo with adequate restraints.	Unlikely	Catastrophic	High (2)
<b>Hazardous Materials</b>	Transportation of Hazardous Materials in the Helicopter.	Possible	Catastrophic	Extremely High (1)	Follow the directions spelled out in the Transportation of Hazardous Materials Handbook for any and all Hazmat associated with the mission.	Unlikely	Catastrophic	High (2)
		Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.	Choose an item.



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**Risk Assessment Worksheet**

**System Being Evaluated:** Aviation Ecosystem Management

**Risk Assessment Worksheet Page: 05 of 05**

Sub System	Hazard(s)	Pre-Mitigation			Mitigation(s)	Post Mitigation		
		Probability	Severity	Risk Level		Probability	Severity	Risk Level
		Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.	Choose an item.
		Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.	Choose an item.
		Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.	Choose an item.
		Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.	Choose an item.

\*Final Risk Value is the overall risk of the mission/flight after all mitigations have been implemented. Overall risk cannot be lower than the highest risk after mitigations. One high risk rating will result in the overall risk being high. It is not an average.

**FINAL RISK VALUE: High (2)**

**Prepared By:** \_\_\_\_\_ **Title:** Regional Aviation Safety Officer **Date:** See Signature for Date



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#### Aircraft Performance Planning

The pilot is responsible for the accurate load calculation(s) completion. Trained personnel shall ensure that scheduled aircraft can perform the mission(s) safely and within selected aircraft capabilities. The helicopter manager shall ensure that manifests, load calculations, and weight and balance are properly completed using accurate environment and aircraft data. Reference NSHO chapter 7 for additional information.

#### Personal Protective Equipment

\* Always refer to current ALSE, NSHO, and manual direction\*

<u>Type of Operation</u> Check applicable boxes that may apply to mission	<u>Personnel Protective Equipment Requirements</u>
<input type="checkbox"/> - UAS Operations ----->	Fire-resistant clothing, hard hat w/chin strap, fire resistant and/or leather gloves, all leather boots, eye protection * Refer to appropriate guides or policies for UAS PPE pending mission*
<input checked="" type="checkbox"/> - Fixed-Wing ----->	Refer to current IASG, ALSE, and 5700 manual directions for PPE requirements.
<input checked="" type="checkbox"/> - Rotor-Wing ----->	Fire-resistant clothing, SPH-5 flight helmet or other approved model, hard hat w/chin strap, fire resistant and/or leather gloves, all leather boots, eye protection, hearing protection. Additional personnel restraints needed in the helicopter pending type of mission. * Refer to appropriate guides or policies ** Charter flights, (non-agency-controlled mission), shall comply with 14 CFR 135 requirements
<input type="checkbox"/> - Doors Off Flight(s) -----> *If Doors Off Flights is checked please go to page 12 (Doors-Off or Doors-Open Operations Checklist) all personnel involved shall review covered all items and signed for prior to operations*	Personnel will remain seated and inside fuselage during all flights, approved secondary restraint harness for doors off flights (only for PLDO, HRAP, HRSP, Aerial Photography, IR Operator, ACETA Gunner, Cargo Letdown, Short Haul Spotter, Cargo Free Fall Operations-Type 3 helicopter) * Refer to appropriate guides or policies* **Safety Alert IASA 18-03 Door(s)-Off, Door(s)-Open Operations**
<input type="checkbox"/> - Cargo Free Fall Operations ----->	Fire-resistant clothing, SPH-5 flight helmet or other approved model, fire resistant and/or leather gloves, all leather boots, eye protection, hearing protection. Additional qualifications, compliance with rotorcraft manual, and approved restraint requirement apply. * Refer to NSHO chapter eleven for additional details or other agency guides and policies. *



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### Policy and References

See and use the QR code below for policy and references on Personnel Protective Equipment Requirements for the type of operation conducted for this MASP.

<p>FS Standards for UAS Operations, June 2025</p>  <p>Chapter 11: Safety and Operational Risk Management, PG 56</p>	<p>PMS 505 IASG March 2025</p>  <p>Chapter 3: Policies, Regulations, and Guidelines, PG 42</p>	<p>ALSE March 2021</p>  <p>Chapter 2: Personal Protective Equipment, PG 10</p>	<p>FS Handbook 5709.16 ch.30 September 2020</p>  <p>Chapter 30.6: Personal Protective Equipment, PG 42</p>	<p>PMS 510 NSHO May 2023</p>  <p>Chapter 09: Equipment Requirements &amp; Maintenance, PG 82</p>
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**Aircraft Information:**

\*Check all that apply, if name is unknown, add information to safety plan briefing sheet\*

\*\*Leave text fields blank if unknown\*\*

\*\*\*All cooperators require an annual approval letter onboard except DOJ-DHS aircraft\*\*\*

**Agency:**  \_\_\_\_\_

**Cooperator:**  \_\_\_\_\_

**Vendor:**  Helicopter Express (Altoona) or Other \_\_\_\_\_

**Military:**  \_\_\_\_\_

**Other:**  \_\_\_\_\_

**Rotor-Wing:**

**Type I:**

**Type II:**

**Type III:**

\* Additional document requirements beyond standard typing in aircraft justification and resource order\* (performance capabilities, equipment, Etc.)

**Fixed-Wing**

**Single Engine:**

**Twin Engine:**

\* Document needs for turbine, twin-engine, air conditioning, high or low wing, pressurized cabin, radio package or any additional requirements in aircraft justification and resource order\*

**Aircraft Make and Model:**

Refer to the safety plan briefing sheet for vendor name, make, FAA#, and model (Rotor-Wong or Fixed-Wing only below).

**Contract:** Exclusive-Use (EU)

**Vendor:** Helicopter Express (Altoona) or Other

**Make/Model:** Bell 429 (Altoona) or Other

**FAA No.:** N52HX (Altoona) or Other

\*\* CWN helicopter information attained after hiring process\*\*

\*\*Unknown or multiple aircraft in use (CWN or EU), have CWN inspection sheet or copy of aircraft data card on file with MASP for aircraft data\*\*

**Procurement and Cost Information:**

Check unknown if unable to provide accurate or estimated information

**Procurement Type:** Unknown

**Estimated Flight Hour Cost:** \_\_\_\_\_ **Unknown:**

**Mission Flight Hours:** \_\_\_\_\_ **Unknown:**

**Estimated Miscellaneous Cost(s):** \_\_\_\_\_ **Unknown:**

**Charge Code:** \_\_\_\_\_ **Unknown:**



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**Pilot Information (Rotor-Wing and Fixed-Wing)**

\* Fixed wing: Use "other" box, and state approved mission(s)

\*\* National Guard, DOJ, DHS, and Co-Op pilots do not require this section, refer to current agency or cooperative letters for information and guidance\*\*

<b><u>Pilot (P1) - PIC/Primary</u></b>	
Name:	_____
Phone:	_____
Card Expiration Date:	_____
Pilot Carded for Mission:	Yes: <input type="checkbox"/> or No: <input type="checkbox"/>

<b><u>Pilot (P2) - PIC/Primary or SIC/Secondary Pilot</u></b>	
Name:	_____
Phone:	_____
Card Expiration Date:	_____
Pilot Carded for Mission:	Yes: <input type="checkbox"/> or No: <input type="checkbox"/>

Chart Pilot  135 Certificate and FAR's Apply

\*\* Use of charter pilot requires Regional Forester Approval\*\*

Check all boxes that apply to pilot(s) carding below

<b><u>Authorized Missions</u></b>	<b><u>Pilot (P1)</u></b>	<b><u>Pilot (P2)</u></b>
Low-Level Recon & Survey	<input type="checkbox"/>	<input type="checkbox"/>
Helitack-Passenger Transport	<input type="checkbox"/>	<input type="checkbox"/>
External Load (Belly Hook)	<input type="checkbox"/>	<input type="checkbox"/>
Water-Retardant Delivery	<input type="checkbox"/>	<input type="checkbox"/>
Longline VTR (150')	<input type="checkbox"/>	<input type="checkbox"/>
Snorkel - VTR: <input type="checkbox"/> or Mirror: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mountainous Terrain Flying	<input type="checkbox"/>	<input type="checkbox"/>
Aerial Ignition - PSD: <input type="checkbox"/> or Torch: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rappel Operations	<input type="checkbox"/>	<input type="checkbox"/>
Cargo Letdown	<input type="checkbox"/>	<input type="checkbox"/>
Snow Operations (Deep Snow)	<input type="checkbox"/>	<input type="checkbox"/>
Hoist	<input type="checkbox"/>	<input type="checkbox"/>
Designated "Pilot Trainer"	<input type="checkbox"/>	<input type="checkbox"/>
"Trainee Only" Pilot	<input type="checkbox"/>	<input type="checkbox"/>
Short Haul - LE: <input type="checkbox"/> or SAR: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Float Operations (Fixed)	<input type="checkbox"/>	<input type="checkbox"/>
Platform Landings-Offshore	<input type="checkbox"/>	<input type="checkbox"/>
Vessel Landings	<input type="checkbox"/>	<input type="checkbox"/>
Night Vision Goggle Operations	<input type="checkbox"/>	<input type="checkbox"/>
ACETA Net Gun (All ACETA)	<input type="checkbox"/>	<input type="checkbox"/>
ACETA Eradication	<input type="checkbox"/>	<input type="checkbox"/>
ACETA (Herding)	<input type="checkbox"/>	<input type="checkbox"/>
ACETA Darting-Paintball	<input type="checkbox"/>	<input type="checkbox"/>
STEP	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>



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**Crash Rescue/Medivac Plan**

**General Instructions (in the event of an incident):**

During the daily safety briefing, crash rescue and assigned responsibilities will be discussed and recorded

Before flights of any kind, crash rescue duties will be assigned to ground operations personnel each day. Crash rescue and first aid equipment will be located near the helicopter operations site, and equipment location made known to all personnel. Information and instructions will be sent / received through the local dispatch office or communications.

**EMT(s) On-Site:** YES:  or NO:

**EMT Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**EMT Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**First Responder(s) On-Site:** YES:  or NO:

**Department/Unit Name:** \_\_\_\_\_

**POC Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Locations:** \_\_\_\_\_

**Available Medivac Helicopter?** YES:  or UNKNOWN:

\*Unknown: Select if medivac helicopter will not be ordered for the mission or incident prior to need. The helicopter will be requested on-demand through the dispatch process. Dispatch will provide medivac ship call sign or tail number, including capabilities and contact information.

**Medivac Helicopter On-Site?** YES:  or NO:

**Level of care medivac helicopter personnel can provide:**

Basi Life Support (BLS):       Advanced Life Support (ALS):       Unknown:

**FAA Tail #:** \_\_\_\_\_

**Contact Information:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Hoist/Rappel/Extraction Capable?** YES:  or NO:

**Check all that apply:**

Hoist:       Rappel:       Short-Haul:



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**Doors-Off or Doors-Open Operations Checklist**

*\*All personnel involved in Doors-Off or Doors-Open operations flights shall review covered all items and signed for prior to operations\**

“Agency personnel involved in any public aircraft operations mission that require aircraft doors to be removed prior to flight, or open during flight, shall receive hands-on secondary restraint refresher training prior to conducting flight operations”.

- Aircraft connection point and secondary restraint configuration (Interagency Safety Alert IASA 17-02)
- Proper donning and adjustment of secondary restraint system.
- Have an understanding of the secondary restraint interaction with FAA approved seat belts.
- Potential of secondary restraint interference with Airbus AS 350 fuel shut off lever if applicable.
- Know location and use of secondary restraint interaction quick- release.
- Perform buddy-check and Pilot in Command check of secondary restraints before flight.
- Practice egress with secondary restraint quick-release mechanism and function of seatbelt.
- Know location and use of rescue knife.



Safety Alert IASA  
18-03 Door(s)-  
Off, Door(s)-Open

**Vendor Name:** \_\_\_\_\_ **Aircraft Model:** \_\_\_\_\_  
**Aircraft Make:** \_\_\_\_\_ **FAA No.:** \_\_\_\_\_

_____	_____	_____
<b>Mission Supervisor/Manager Name (Print)</b>	<b>Mission Supervisor/Manager (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Pilot Name (Print)</b>	<b>Pilot (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>
_____	_____	_____
<b>Participant's Name (Print)</b>	<b>Participant's (Signature)</b>	<b>Date</b>



**R8 Southern Region Mission Aviation Safety Plan**  
**Navy Flight Operations**  
**National Forests in Florida**



**Mission Aviation Safety Plan Acknowledgment**

We, the Project Supervisor/Manager and Crewmember acknowledge our participation in developing this MASP. We have thoroughly discussed and understand each MASP provision.

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

**Mission/Project Name:** \_\_\_\_\_

**Aircraft Make and Model:** \_\_\_\_\_ **FAA No.:** \_\_\_\_\_

**We are Operating Under Supplement:** \_\_\_\_\_

**General**

**YES NO**

- Load Calculations (OAS-67/FS 5700-17) prepared, reviewed, signed, and posted.
- Helicopter Passenger/Cargo Manifest (OF 252) prepared, reviewed, signed, and posted.
- Filled out the Daily DORA- G0/N0-Go with Pilot, signed, and posted.
- Discussed the Mission Aviation Safety Plan (MASP) with all personnel involved.

**Safety**

**YES NO**

- Reviewed and Signed Job Hazard Analysis (JHA) or Risk Management Assessment (RMA)
- Hazardous Material Manifest Form DOT-SP-9198 filled out, signed, and posted

**Participant's Signature**

\_\_\_\_\_  
**Project Supervisor or Manager**

\_\_\_\_\_  
**Participant and Qual/Position**

\_\_\_\_\_  
**Pilot**

\_\_\_\_\_  
**Participant and Qual/Position**



**R8 Southern Region Mission Aviation Safety Plan**  
**Navy Flight Operations**  
**National Forests in Florida**



**Supplement – 1: Ocala National Forest**

Only cover pages 15 to 19.

**Map of Mission Area**

Please attach a QR code below of the Mission Area map or the actual Mission Area map to supporting documents as an appendix. Attach the addendum to the end of the MASP. **\*A map will be provided prior to the mission\***

 FL-FNF Aviation Maps		QR Code  Name of the QR code		QR Code  Name of the QR code
--	--	------------------------------------	--	------------------------------------

**Aviation Hazards Map**

Please attach a QR code below of the Aviation Hazards map or the actual Aviation Hazards map to supporting documents as an appendix. Attach the addendum to the end of the MASP. **\*A map will be provided prior to the mission\***

 FL-FNF Aviation Maps		QR Code  Name of the QR code		QR Code  Name of the QR code
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**Aerial Hazard Analysis**

Ocala Helibase has completed a Flight Hazard Map, which identifies existing, known hazards. Examples of hazards include other aircraft, towers, power lines, wires, birds, weather, unimproved landing areas, major highways, airports, subdivisions, external load operations, and possible hostile actions against aircraft, personnel, etc. Hazard mitigation will be in effect utilizing the attached Risk Assessment Worksheet. A copy of the hazard map will be provided to the pilot as a working reference. Along with such aviation hazards there are seven Restricted Areas on the Ocala National Forest. These Restricted Areas shall be given top priority to avoid airspace conflict with its users. The Pilot and Helicopter Manager shall coordinate all operations with FICC & SEALORD to eliminate any airspace conflict within the Restricted Areas. The assigned Helicopter Manager, Pilot and LEI Mission Supervisor will review the Aviation Flight Hazard Map before flight operations commence.



**R8 Southern Region Mission Aviation Safety Plan**  
**Navy Flight Operations**  
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**Flight Following and Frequencies**

*\*Confirm frequencies during the briefing prior to flight\**

*\*FAA Flight Plan (chartered aircraft non-agency-controlled mission) no frequencies required\**

*\*Chartered 135 operator is responsible for communications and flight plan\**

**Flight Following Method**

Automated Flight Following (AFF):   
 Radio (Local or GACC Aircraft Desk):

**FAA Flight Plan**

Agency-owned or agency contracted aircraft mission:   
 Charter aircraft non-agency-controlled mission:

**Flight Following and Frequencies for: Ocala National Forest**

**Command:** Fire Central

Receive Freq. (RX): <u>172.3750</u>	Transmit Freq. (TX): <u>165.2250</u>
RX NAC: <u>\$F7E</u>	TX NAC: <u>\$4CE</u>
RX Tone: _____	TX Tone: _____

**Command:** Fire South

Receive Freq. (RX): <u>172.3750</u>	Transmit Freq. (TX): <u>165.2250</u>
RX NAC: <u>\$F7E</u>	TX NAC: <u>\$526</u>
RX Tone: _____	TX Tone: _____

**Air to Ground (Primary):** A/G 79

Receive Freq. (RX): <u>169.4000</u>	Transmit Freq. (TX): <u>169.4000</u>
RX Tone: <u>No Tone</u>	TX Tone: <u>No Tone</u>

**Air to Ground (Secondary):** A/G 34

Receive Freq. (RX): <u>167.1750</u>	Transmit Freq. (TX): <u>167.1750</u>
RX Tone: <u>No Tone</u>	TX Tone: <u>No Tone</u>

**Air to Air (Primary):** Statewide

Receive Freq. (RX): <u>122.925</u>	Transmit Freq. (TX): <u>122.925</u>
RX Tone: <u>N/A</u>	TX Tone: <u>N/A</u>

**Air to Air (Secondary):** A/A Secondary

Receive Freq. (RX): <u>122.050</u>	Transmit Freq. (TX): <u>122.050</u>
RX Tone: <u>N/A</u>	TX Tone: <u>N/A</u>



## R8 Southern Region Mission Aviation Safety Plan

### Navy Flight Operations National Forests in Florida



\*\*Manager or Mission Supervisor will coordinate Temporary Flight Restrictions (TFR) with dispatch if needed\*\*

**MTR's and MOA's for: Ocala National Forest**

**Military Training Route(s) (MTR'S) or Military Operating Area(s) (MOA'S)**

Prior to the flight, the mission supervisor, alternate supervisor, or delegated manager shall confirm route and area deconfliction with dispatch or other approved local methods. Deconfliction will be addressed during the aviation safety plan briefing.

**US Navy Fleet Area Control & Surveillance Facility (FACSFAC) Jacksonville, a.k.a. SEALORD)**

**Scheduling (24 hours/day):** (904) 542-2028

**Air Traffic Control:** (904) 542-2250

MTR-MOA	Route Legs-Altitudes	Activity	Time	Time Zone
Palatka 1 MOA	3,000' AGL-17,999' MSL	Hot: <input type="checkbox"/> Cold: <input type="checkbox"/> N/A: <input type="checkbox"/>	Start: _____ Stop: _____ Check Daily	UTC: <input type="checkbox"/> Local: <input checked="" type="checkbox"/>
Palatka 2 MOA	3,000' AGL-17,999' MSL	Hot: <input type="checkbox"/> Cold: <input type="checkbox"/> N/A: <input type="checkbox"/>	Start: _____ Stop: _____ Check Daily	UTC: <input type="checkbox"/> Local: <input checked="" type="checkbox"/>
R-2906	VR-1010, VR-1041 & VR-1040 Surface-14,000' MSL	Hot: <input type="checkbox"/> Cold: <input type="checkbox"/> N/A: <input type="checkbox"/>	Start: _____ Stop: _____ Check Daily	UTC: <input type="checkbox"/> Local: <input checked="" type="checkbox"/>
R-2907	VR-1010, VR-1041, & VR-1040. R-2907A: Surface – 23,000' MSL R-2907B: 2,000' – 23,000' MSL	Hot: <input type="checkbox"/> Cold: <input type="checkbox"/> N/A: <input type="checkbox"/>	Start: _____ Stop: _____ Check Daily	UTC: <input type="checkbox"/> Local: <input checked="" type="checkbox"/>
R-2910	VR-1009, VR-1008, VR-1005, VR-1039 & IR-023. R-2910A: Surface – 23,000' MSL R-2910B: 2,000' – 23,000' MSL R-2910C: Surface – 6,000' MSL R-2910D: 2,000' – 23,000' MSL R-2910E: 500' -1,999' MSL	Hot: <input type="checkbox"/> Cold: <input type="checkbox"/>  N/A: <input type="checkbox"/>	Start: _____ Stop: _____  Check Daily	UTC: <input type="checkbox"/> Local: <input checked="" type="checkbox"/>



# R8 Southern Region Mission Aviation Safety Plan

## Navy Flight Operations

### National Forests in Florida



#### Medical Information for: Ocala National Forest

\*\*\*\* NOTE: CLOSEST MEDICAL FACILITIES MAY BE OUT OF STATE \*\*\*\*

#### MEDICAL FACILITY

**Advent Health Waterman Hospital**      **Helipad on Facility:**                      YES      **FAA Identifier:**   32FL    
 1000 Waterman Way      *See AirNav.com for more info.*  
 Tavares, FL 32778  
**352-253-3333**

**Trauma Center:**                      It's Not      **Helipad H1 Lat/Long:**                      N 28° 49. 46' W 81° 42.63'  
**Manager:**                      Joshua Pinion      **Helipad H2 Lat/Long:**                       
**Contact Freq:**                      Have Dispatch contact prior to landing  
**Ground Travel Time:**   35 Minutes        **Air Travel Time:**   10 Minutes  

#### MEDICAL FACILITY

**HCA Florida Putnam Hospital**      **Helipad on Facility:**                      YES      **FAA Identifier:**   30FL    
 611 Zeagler Drive      *See AirNav.com for more info.*  
 Palatka, FL 32177  
**386-328-5711**

**Trauma Center:**                      It's Not      **Helipad H1 Lat/Long:**                      N 29° 38.61'    W 81° 41.57'  
**Manager:**                      David Kovaks      **Helipad H2 Lat/Long:**                       
**Contact Freq:**                      Have Dispatch contact prior to landing  
**Ground Travel Time:**   50 Minutes        **Air Travel Time:**   20 Minutes  

#### MEDICAL FACILITY

**HCA Florida Ocala Hospital**      **Helipad on Facility:**                      YES      **FAA Identifier:**   3FD1    
 1431 SW 1st Ave      *See AirNav.com for more info.*  
 Ocala, FL 34471  
**ER 352-401-1137**

**Trauma Center:**                      Level II      **Helipad H1 Lat/Long:**                      N 29° 10.53' W 81°08.20'  
**Manager:**                      Gabe Bullaro 352-401-1000      **Helipad H2 Lat/Long:**                       
**Contact Freq:**                      Have Dispatch contact prior to landing  
**Ground Travel Time:**   52 Minutes        **Air Travel Time:**   15 Minutes  

#### NEAREST BURN FACILITY North End of Forest

**UF Health Shands Hospital**      **Helipad on Facility:**                      YES      **FAA Identifier:**   FA12    
 1600 SW Archer Rd      *See AirNav.com for more info.*  
 Gainesville, FL 32608

**352-265-0222**

**Trauma Center:**                      Level I      **Helipad South Lat/Long:**                      N 29° 38.33' W 82° 20.55 ER/Burn Center South Side  
**Manager:**                      Dispatcher 352-265-0222      **Helipad North Lat/Long:**                      N 29° 38.43' W 82° 20.56 Pediatric ER North side of  
**Contact Freq:**                      Unicom 123.050 Request permission (352-265-0222)      **Archer Road (Secondary)**  
**Ground Travel Time:**   1 Hour 25 Minutes        **Air Travel Time:**   27 Minutes



# R8 Southern Region Mission Aviation Safety Plan

## Navy Flight Operations National Forests in Florida



### NEAREST BURN FACILITY South End of Forest

**Orlando Regional Medical Center**

52 W Underwood Street  
Orlando, FL 32806

**1-800-895-4615 Air Care Team**

**Helipad on Facility:** YES

See AirNav.com for more info.

**FAA Identifier:** FD28

**Helipad 1 Lat/Long:** N 29° 31.52' W 81° 22.62 (Accommodates two aircraft at a time East side of the Helipad is designated as the transient pad)

**Trauma Center:** Level I

**Helipad 2 Lat/Long:** \_\_\_\_\_

**Manager:** Michael Talento

**Contact Freq:** \_\_\_\_\_

(Primary) RX 155.340 TX 155.340 Tone: 85.4

(Secondary) Unicom 123.050

Request permission (1-800-895-4615) to land

**Ground Travel Time:** 1 hour 16 Minutes

**Air Travel Time:** 17 Minutes

### AIR AMBULANCE INFORMATION

**Company's Name:** ShandsCair

**Aircraft Type:** Rotor and Fixed Wing (Bell 407 Villages Base)

**Bases:** Gainesville, The Villages and Perry Florida

**Services:** Registered Nurse/Paramedic or APRN/Paramedic and a Critical Care Paramedic

**Night Vision Capability:** Yes

**Dispatch Emergency Phone No.:** 800-342-5365

**Non-Emergency Phone No.:** 352-265-0222

**Additional Medical Information Attached?** YES:  or NO: