### **Appendix B – Helitorch Operations**

### **Required Forms**

(Information may be contained in the IAP, Prescribed fire plan, or PASP and may be utilized in lieu of the following forms.)

- Helitorch Operations GO/NO GO Checklist\*
- HTMG, HTMM, HTPT Position Task Sheet\*

http://www.blm.gov/nifc/st/en/prog/fire/Aviation/training.html

- Helitorch Project Aviation Safety Plan
- Job Hazard Analysis
- Aviation Risk Assessment Worksheet (Reference IHOG Appendix J)
- Job Risk Analysis
- Aerial Ignition Organization Chart Helitorch Prescribed Fire
- Aerial Ignition Organization Chart Helitorch Wildland Fire
- Helicopter Crash Rescue/Medivac Plan
- Helitorch Inspection Checklist
- Helitorch Mix Systems Checklist

### **Optional Forms**

- Aerial Ignition Preplanning Checklist
- Aerial Ignition Annual Qualifications Update Sheet
- Helitorch Pre-Use Checklist
- Helitorch Post-Use Maintenance Checklist
- Helitorch Annual Maintenance and Winterization Checklist
- Helitorch Use Record (Example)

### NOTE; \* INDICATES REQUIRED FORMAT

Job Hazard Analysis (JHA)

A required document that should outline the primary tasks, identify hazards, and describe methods to mitigate or remove risks associated with helitorch operations. Review of the helitorch JHA with all helitorch personnel prior to commencing a project is required.

Project Aviation Safety Plan is required; this is an optional format

### **Project Aviation Safety Plan**

OPM-6 and FSM-5700 require a Project Aviation Safety Plan be completed prior to any special use missions involving aircraft. The Project Aviation Safety Plan is a proactive measure used for pre-planning and risk assessments which are paramount to a successful accident free mission. The PASP allows for a collaborative effort of all personnel involved to address all elements of the mission and generate a plan with risks at acceptable levels. The process is simple. Once the PASP is completed, project supervisors or flight managers must get approval to execute the mission. The amount of risk involved to accomplish the mission, dictates the level of approval required. The Risk Assessment matrix included in the PASP template provides guidance on the level of approval based on the level of risk. A mission with a level of risk in "Low" or "Medium" may only need approval from a Unit Aviation Manager or Forest Aviation Officer, but a mission in the "Serious" or "High" category will require approval from an Aviation Division or Regional Aviation Manager. After the mission is approved, conduct an on-site briefing covering the pertaining elements of the mission with all participants, and then you may implement the plan.

The key to a smooth process for the PASP is to be thorough. Line officers must be able to understand your plan from a written form. A template for Forest Service and DOI is available to aid in this process. Below is a list of the elements in PASP's.

- 1. **Supervision** Identify the qualified Project Aviation Manager.
- 2. **Project Name and Objective-** Description of the project and its objectives.
- 3. **Justification** Indicate why the project will require the use of an aircraft in special use flight conditions and list the most practical alternative for completion of the project.
- 4. **Project Dates** Dates the project will begin and end. These may be approximate, since the exact dates of flight may not be known.
- 5. **Location** Enter a descriptive location and include a map clearly showing the area where the flights will occur. Aerial hazard maps must be clearly indicated.
- Projected Cost and Aviation Resources- Enter cost coding, projected flight hours and cost, projected
  miscellaneous expense (overnight charges, service truck mileage etc.), and total cost of the aviation portion
  of the project.
- 7. **Aircraft** if know, identify company that own the aircraft anticipated to be used, registration number, aircraft type, date of aircraft data card expiration, and approved missions.
- 8. **Pilot** If know, identify Pilot(s), types of aircraft qualified in, types of mission qualified for, and expiration date of pilot card.
- 9. **Participants** List individuals involved in flights, their qualifications and role.
- 10. Communications Plan, Flight Following, Accident Response- Identify the procedures to be used.
- 11. **Aerial Hazard Analysis** An aerial hazard analysis with attached map will be provided to the pilot before the flight. Flights made in confined areas require that a prior ground and/ or aerial survey of hazards be made. A copy of the hazard map shall be provided to the pilot prior to any project flight. The necessary temporary flight restrictions and coordination with FAA and, if appropriate, military authorities, must be accomplished prior to project.
- 12. **Protective Clothing and Equipment** Identify the protective equipment required for the mission.
- 13. **Weight & Balance-** The pilot is responsible for the accurate completion of weight and balance load calculations. Trained aviation personnel shall ensure that aircraft scheduled are capable of performing the mission(s) safely and within the capability of the aircraft selected. The helicopter or fixed wing manager shall ensure that manifests and weight and balance load calculations are completed properly and completed daily.
- 14. **Risk Assessments/SMS-** Risk assessment utilizing the tools listed in Appendix J of IHOG or bureau approved SMS.
- 15. **Signatures-**Line Manager or appropriate level of approval based on the risk assessment or other bureau requirement.

### **Project Aviation Safety Plan**

1. Supervisio	on						
Qualified Project Aviatio	n Manager:						
2. Project Na	ame and Obje	ectives	•				
	Aerial Ig	nition F	Project A	viation Safe	ty Plan		
Mission:	Projec	t Name:				Unit:	
Project Plan Prepared by: Title:				Date	<b>:</b>		
Note: Signature by the p the required training for		at all pers	onnel have				
Objectives:							
3. Justification	3. Justification						
Indicate why the project will require the use of an aircraft in special use flight conditions/environments and list the most practical alternative for completion of the project. For example: Management has deemed aerial ignition as the best method of achieving Agency goals. Aerial ignition is conducted below 500' above ground level (AGL). Reference IHOG chapter 3, Operational Planning. All aerial ignition operations will be conducted in accordance with agency policy as well as the Interagency Aerial Ignition Guide and Interagency Helicopter Operations Guide. :							
4. Project Date Anticipated Project Date			Start Tim	0:	Endi	ing Time:	
5. Location							
Start Location	Latitude	Longi	tude	Elevation	Runway len	gth & Surface or Helispot	
Enroute Stops	Latitude	Longi	tude	Elevation	Runway len	gth & Surface or Helispot	
Destination Location	Latitude	Longi	tude	Elevation	Elevation Runway length & Surface or Helispot Size		
Attachments: Map	REQUIRED		Other:				
Attach	Map, clearly show	ving areas	s to be flow	vn; aerial haza	ards must be	indicated	
6. Projected Cost and Aviation Resources							
Type of Flight: Desired Airc			sired Aircra	aft Type: Charge Code:		Charge Code:	
Type Procurement:		Met	thod of Pay	ment:		Projected Cost:	
Support Equipment Ne	eded:						
7. Aircraft							
Vendor:				Phone:		Cell:	
Aircraft N#:	Make & Model:	•		Aircraft Color:			
Other:  Aircraft Card Expiration Date:  A/C Carded: Yes  No							

8. F	Pilot	
------	-------	--

8.	Pilot					
Pilot N	ame:				Pilot Cardeo	d: ∐Yes ∐No
Expirat	ion Date:					
-						
9.	<b>Participants</b>					
	Supervisor:			Phone:		Cell:
	: Manager:			Phone:		Cell:
Particip				1 1101101		
	sit completed by aviation	n personnel: Y	N			
10	). Communication	ons Plan, Fl	liaht Follow	ina. Accider	ıt Respor	ıse
	follow Procedure:			Request or Flight		
	d of Resource Tracking:	☐ Phone ☐ R				op Enroute  Arrival at
				Dest.		
Schedu	uling Dispatch Phone:			Destination Dispar	tch Phone:	
FM Re	ceive:	FM Transmit:		Tones:		
FM Re	ceive:	FM Transmit:		Tones:		
FM Re		FM Transmit:		Tones:		
AM Air	to Air:	AM Unicom:		Other:		
	Helicon	oter Crasi	h Rescue/I	<b>Medivac Pl</b>	an	
Cenera	l Instructions					
	vent of an accident, the He	eliconter/Helihase	/Helitorch Manage	r will supervise and	coordinate th	e crash rescue activities
	crash rescue duties will b					
	ion and first aid equipmen					
	el. Information and instru					
Specific	Information and Instru	ıctions				
	cell phone if possible. Do		ver the radio.)			
1.	Nature of the injury(s)/ill	lness.				
2.	Is medical help needed?		ly vital signs!			
3.	What transportation is ne		• •			
4.	Location of victim.		,,			
5.	Route to be taken (use la	nd marks as quide	2)			
	Equipment needed.	ind marks as guide	·)·			
6.	1 1					
7.	Name of contact on site.	11 00				
8.	Notify appropriate agenc	cy line officer.				
T3 477/0	• 4					
	) on project					
	ole Medivac helicopters					
FAA#			HMGB			
Litter/ra	appel/extraction capable					
Remark	S					
FAA#			HMGB			
Litter/ra	ppel/extraction capable					
Remark	Remarks					
Nearest medical facility Location			Location			
· · · · · · · · · · · · · · · · · · ·		Longitude		Con	tact Freq	
						-
VOR			NM		DEC	J
Nearest	t burn center		Location			

☐ General/ground personnel

Latitude

Contact Freq

VOR		NM			DEG	
Life Flight			Location			
Type aircraft		Phone Number			Contact Fr	eq
Site condition	18					
Latitude		Longitude			Contact Fr	eq
VOR		NM			DEG	
Wind speed		Elevation (msl)	)		Temperatu	ire (F, C)
Terrain factor	s		Helispot size			
Proximity of helispot to injury site  Visibility/sunrise/sunset limitations						
Flight hazards	<u> </u>					
Other aircraft	in area (call signs and frequencies)					
Ground contact	ct and frequencies					
Identify if pro	erial Hazard Analysis ojected flight paths/project area in					
include "Risk affected rout	Low Altitude Tactical Navigational Management Considerations." A es or other airspace concerns ha ning Route (MTR) Information	ircraft Manage	r must confirm with			
MTR	Route Legs-Altitude		Activity	Time		Time Zone
	_		☐Hot ☐Cold	Start		UTC Local
			☐Hot ☐Cold	Stop Start		UTC Local
				Stop		
			☐Hot ☐Cold	Start Stop		UTCLocal
			☐Hot ☐Cold	Start Stop		☐UTC☐Local
			☐Hot ☐Cold	Start Stop		□UTC □Local
			☐Hot ☐Cold	Start Stop		□UTC□Local
			☐Hot ☐Cold	Start Stop		□UTC□Local
			☐Hot ☐Cold	Start Stop		UTCLocal
			☐Hot ☐Cold	Start Stop		UTCLocal
			☐Hot ☐Cold	Start Stop		☐UTC☐Local
			☐Hot ☐Cold	Start Stop		UTCLocal
Other airspace concerns/hazards:						
	Hazard map must be attacl		t			

Nomex clothing (or cotton clothing with helitorch mix crew), hardhat w/chin

strap, gloves, leather boots, eye protection, hearing protection, fire

Longitude

	extinguisher
Helicopter flights	Flight helmet, Nomex clothing, gloves, leather boots, eye protection, hearing protection, approved secondary restraint harness for doors off flights.

### 13. Weight and Balance

The Pilot is responsible for the accurate completion of a load calculation. Trained aviation personnel shall ensure that aircraft scheduled are capable of performing the mission(s) safely and within the capabilities of the aircraft selected. For helicopter operations, expected conditions of altitude, temperature and weight will be included. The helicopter manager will ensure load calculations are completed properly. The Flight Manager will ensure that cargo/passenger manifests are completed.

Passenger Name	Weight	Departure Point	Destination Point
Cargo	Weight	Hazardous Material	Destination
		☐Yes ☐No	
	I .	-	
Special Instructions:			

### 14. Risk Assessment

	Applicable Risk Management	Worksheet/Job	Hazard Analysis	(JHA)	referenced and on file:
--	----------------------------	---------------	-----------------	-------	-------------------------

		Risk As	sessment Co Matrix	ode	
			HAZARD PR	OBABILITY	
Severity Code		Frequent (A) Immediate danger to health and safety of the public, staff, property and/or resources.	Likely (B) Probably will occur in time if not corrected, or probably will occur one or more times.	Occasional (C) Possible to occur in time if not corrected.	Rarely (D) Unlikely to occur; may assume exposure, will not occur.
Catastrophic Imminent and immediate danger of death or permanent disability.	I	State Director/Associate State Director 1 CRITICAL	State Director/Associate State Director 1 CRITICAL	District Manager 2 SERIOUS	Field Office Manager 3 MODERATE

Critical Permanent partial disability, temporary total disability.	II	State Director/Associate State Director 1 CRITICAL	District Manager 2 SERIOUS	Field Office Manager 3 MODERATE	Branch Chief 4 MINOR
Significant Hospitalized minor injury, reversible illness.	III	District Manager 2 SERIOUS	Field Office Manager 3 MODERATE	Branch Chief 4 MINOR	Line Supervisor 5 NEGLIGIBLE
Minor First aid or minor medical treatment.	IV	Field Office Manager 3 MODERATE	Branch Chief 4 MINOR	Line Supervisor 5 NEGLIGIBLE	Line Supervisor 5 NEGLIGIBLE

Helitorch Job Hazard Analysis (Example)
Aircraft Manager/Pilot review with all participants as part of preflight briefing.

JOB HAZARD ANALYSIS (JHA) (Instructions on next page) This form complies with Certification	Helitorch Operations	2. LOCATION	3. UNIT
of Hazard Assessment 29 CFR 1910.133	4. Prepared By	5. JOB TITLE	6. DATE PREPARED
7. TASKS/HAZARDS 8. A	ABATEMENT ACTIONS		

7. TASKS/HAZARDS

8. ABATEMENT ACTIONS

This form complies with Certification of Hazard Assessment 29 CFR 1910.1	4. Prepared By	5. JOB TITLE	6. DATE PREPARED		
(JHA) (Instructions on next page)	Helitorch Operations	Z. Econilor	O. CIVE		
JOB HAZARD ANALYS	IS 1. WORK PROJECT/ACTIVITY	2. LOCATION	3. UNIT		
Multiple project aircraft	<ul> <li>-Pilot perform aircraft safety brief, stop.</li> <li>-Adequate aerial supervision. Ca aircraft separation and positive</li> </ul>	approach/depart	or each aircraft. Maintain	rotors	
Rotor hazards	suitable landing area and chec headset/helmet w/remote trans- devices such as radios, pagers fuel preparation/vapor removal	mit switch for tak , cell phones, etc	eoffs/landings. All hand held		
Unplanned aircraft events Communications	<ul> <li>Flight following established, chec Maintain communications at all handheld radio along. Call in p</li> </ul>	times, establish rior to landing. If	backup alternate frequencies. radio contact is lost return to	Take	
Hazardous materials	<ul> <li>-All personnel equipped with requipment</li> <li>-Qualified personnel will handle, report batch truck will have current Hamper federal/state/local laws.</li> </ul>	eview MSDS, inf	orm pilot. Use proper PPE. [		
Noise, rotor wash	-Wear ear and eye protection. 15	-minute eye was			
Low level obstacles Pilot not familiar with area	down-wind runsComplete a high level recon, no u-Supply hazard maps. Complete area identified. Pre – Burn orie	unnecessary low high-level recon	level flight.	t	
High/Hot/Heavy	-Performance planning complete/insure accurate load calculations. Do not place the aircraft in performance related situations for current and expected environmental conditions. Do not place the aircraft in performance related situations. Avoid				
Weather	management; confirm that Dispatch has made contact with schedulers to deconflict. Fly established airport patterns, initiate and stay in radio contact.  Jse weather advisory. Maintain VFR minimums, cancel mission if necessary.				
Responsibilities  Aircraft Avoidance	rior to each project, operator will review appropriate portions of IHOG and IAIG. The project briefing will cover responsibilities and emergency procedures ee and avoid. Check Military Training Routes (MTR) in advance. Practice risk management; confirm that Dispatch has made contact with schedulers to de-				
	performed. Use of proper PPE	by all. Pre- and I	Post Op briefings will be perfo	rmed.	
Unknown	use of the fire shelter. Use of p		able in fire behavior and train.  Pre- and Post Op briefings		
Qualifications	( 11 12 1 22 B) (				

Helitorch Equipment		rent retrofits as per IAIG	. Equipment		
Fuel/Gelling Agent Ignition Issues	checks prior to operations.  -MSDS sheets on-site and reviewed, fir hazards, emergency contingency plantagenet complies with agency direction sources. Proper bonding. Limit person operation. Eyewash station onsite.  -Conduct orientation flight with Firing Both	n reviewed and in place, on, No Smoking signs po onnel on site to those rec	transportation of sted, no ignition quired for		
Aircraft Fueling	escaped fire contingency established checklists prior to starting operations.  -Vendor responsibility. No agency persunless closed circuit, open port in accumulation and requested by governounced by governounced.	, must complete all oper onnel on board. Aircraft cordance with NFPA 407	ational shutdown 3-21,		
Missing Aircraft, Crash/Search & Rescue Malfunctions	extinguisherDuties assigned for extraction, suppressible to have Response/Crash Search and Rescue implementMalfunctions will be addressed in projections.	e current Aviation Incide Plan posted and ready	nt to		
Personal in Burn Area	immediately halt the project. Helicop identified and mitigated. If entanglem helicopter are safely on the ground an approach the aircraft. Designate helicopter high level recon to insure that maintain communication and are clear	nent occurs, wait until the and the pilot has given ap torch jettison site. agency personnel near l ar of the burn area. Insu	torch and proval to burn unit		
General Aviation Aircraft	agency personnel are clear of burn a -PIO will post maps and descriptions of Backcountry VHF-AM will be monitor Helibase.	activities at Local FBO's			
	ITEMS LISTED BELOW ARE SPECIFIC TO				
Moving fuel	-Get help moving fuel drums. Life		ick. Ensure route		
barrels	is unobstructed. Hand and for -Remove large barrel bung slowly		ase of pressure		
Pressure release	Use eye protection.	y to provide graduar felec	ase of pressure.		
of fuel barrels	-Maintain good visual and radio o crew. Ground crew is equipp	ed with a radio headset	and hardhat or		
Barrel exchanges	SPH 4/5 flight helmet with remote transmit button/switch. Maintain visual contact with cables. Primary crewmember ensures cables do not twist as helicopter lifts. Do not attempt to make contact with the				
Component changes	helitorch until it has made gro -Mixing of helitorch components l issues due to different tolerar	between kits may cause	compatibility		
9. LINE OFFICER or D	ESIGNEE SIGNATURE	10. TITLE	11. DATE		

### Job Hazard Analysis (Example) Continued

Aircraft Manager/Pilot review with all participants as part of preflight briefing.

### **JHA Instructions**

The JHA shall identify the location of the work project or activity, the name of employee(s) writing the JHA, the date(s) of development, and the name of the appropriate line officer approving it. The supervisor acknowledges that employees have read and understand the contents, have received the required training, and are qualified to perform the work project or activity.

Blocks 1, 2, 3, 4, 5, and 6: Self-explanatory. Block 7: Identify all tasks and procedures associated with the work project or activity that have potential to cause injury or illness to personnel and damage to property or material. Include emergency evacuation procedures (EEP). Identify all known or suspect hazards associated with each respective task/procedure listed in Block 7. For example:

- a. Research past accidents/incidents
- Research the Health and Safety Code, FSH 6709.11 or other appropriate literature.
- c. Discuss the work project/activity with participants
- d. Observe the work project/activity
- e. A combination of the above

Block 8: Identify appropriate actions to reduce or eliminate the hazards identified in Block 8. Abatement measures listed below are in the order of the preferred abatement method:

- a. Engineering Controls (the most desirable method of abatement). For example, ergonomically designed tools, equipment, and Furniture.
  - Substitution. For example, switching to high flash point, nontoxic solvents.
  - c. Administrative Controls. For example, limiting exposure by reducing the work schedule; establishing appropriate procedures and practices.
  - PPE (least desirable method of abatement). For example, using hearing protection when working with or close to portable machines

(chain saws, rock drills portable water pumps)

e. A combination of the above.

Block 9: The JHA must be reviewed and approved by a line officer. Attach a copy of the JHA as justification for purchase orders when procuring PPE.

### **Emergency Evacuation Instructions**

Project Supervisor and crew members are responsible for developing and discussing field emergency evacuation procedures (*EEP*) and alternatives in the event a person(s) becomes seriously ill or injured at the worksite.

Be prepared to provide the following information:

- Nature of the accident or injury (avoid using victim's name).
- b. Type of assistance needed, if any (ground, air, or water evacuation)
- c. Location of accident or injury, best access route into the

worksite (road name/number), identifiable ground/air landmarks.

- d. Radio frequency(s).
- e. Contact person.
- f. Local hazards to ground vehicles or aviation.
- Weather conditions (wind speed & direction, visibility, temp).
- h. Topography.
- i. Number of person(s) to be transported
- j. Estimated weight of passengers for air/water evacuation. The items listed above serve only as guidelines for the development of emergency evacuation procedures.

JHA and Emergency Evacuation Procedures Acknowledgment We, the undersigned Project Supervisor and crew members, acknowledge participation in the development of this JHA (as applicable) and accompanying emergency evacuation procedures. We have thoroughly discussed and understand the provisions of each of these documents:

SIGNATURE I	DATE Project Supervisor	SIGNATURE	DATE

Job Risk Analysis
Helicopter/helitorch Manager/Pilot review with all participants as part of preflight briefing.

Is everything approved with clear instructions, aviation plan signed and reviewed?	Yes	No	NA
Are communications and flight following established, including repeater tones?	Yes	No	NA
Can terrain, altitude, temperature, or weather that could have an adverse effect be mitigated?	Yes	No	NA
Are all aerial hazards identified and known to all participants?	Yes	No	NA
Have mitigating measures been taken to avoid conflicts with military or civilian aircraft.	Yes	No	NA
Have adequate landing areas been identified and or improved to minimum standards.	Yes	No	NA
Are all agency personnel qualified for the mission?	Yes	No	NA
Is the pilot carded and experienced for the mission to be conducted?	Yes	No	NA
Are pilot flight and duty times compromised?	Yes	No	NA
Are there enough agency personnel to accomplish the mission safely?	Yes	No	NA
Will adequate briefings be conducted prior to flight to include Pilot, Passengers, and Dispatch?	Yes	No	NA
Are all involved aware that the Pilot has the final authority, but if any passenger feels uncomfortable, that they can decline the flight?	Yes	No	NA
Is the aircraft capable of performing the mission with a margin of safety?	Yes	No	NA
Have manifests of cargo and passengers, load calculations, and/or weight and balance completed?	Yes	No	NA
Is the aircraft properly carded?	Yes	No	NA
Do all personnel have the required PPE?	Yes	No	NA
Fuel planning, adequate fuel on board, fuel truck location, availability of commercial fuel?	Yes	No	NA
Remember maps of areas/sites, handheld radios, cell phones, day/survival packs, and sick sacks.	Yes	No	NA
Is there an alternative method that would accomplish the mission more safely?	Yes	No	NA
Will the mission be conducted at low levels? (Below 500' AGL). Discuss.	Yes	No	NA
	Yes	No	NA

Assess the risks involved with the proposed operation. Use additional sheets if necessary.					
Assignment:		Date:			
		Pre-Mitigation hazards rate out as:			te out as:
Describe the Hazard:		Likelihood	Sever	ity	Risk
1		A-E	I-IV		Level
1.       2.					
3.       4.					
5. 6.					
7.					
8.					
Pre-Mitigation Overall Rating:					
		Post Mitigati	ion haz	ards ra	ate out as:
Mitigation Controls:				erity Risk	
		A-E	I-IV	,	Level
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
Post-Mitigation Overall Rating:					
Success Probability/Benefits Statement:					
Operation Approved By:	Title:			Date:	

	Appropriate Management Level for Risk Decisions				
Risk Level	Fire	Project			
HIGH	Incident Commander or Ops Chief	State Director/ Regional Manager			
SERIOUS	Incident Commander or Ops Chief	District Manager/Forest Aviation Officer			
MEDIUM	Air Operations Branch Chief	Field Manager/District Ranger			

LOW Helibase Manager Helicopter or Flight Manager

Contact your unit aviation manager if you questions on the level of approval.

### 15. Signatures

Note: Signature by the preparer verifies that all personnel have the required training for the mission.					
Attach Map, clearly showing areas to be flown; aerial hazards must be indicated.					
Project Plan Reviewed by: Title: Date:					
Project Plan Reviewed by:	Title:	Date:			
Project Plan Reviewed by:	Title:	Date:			
This Flight is Approved by: Title: Date:					

# Mission Planning/Preflight Briefing Checklist: Review with all participants as part of preflight briefing

Chain of command, individual roles and responsibilities are identified to all participants?	Yes	☐ No	☐ NA
Project Aviation Safety Plan is approved and signed at the appropriate levels?	Yes	☐ No	□ NA
3. Is the emergency evacuation plan, helibase crash/rescue plan reviewed?	☐ Yes	☐ No	□NA
4. Are communications and flight following established, including repeater tones?	Yes	☐ No	□NA
5. Can terrain, altitude, temperature or weather that could have an adverse effect be	Yes	☐ No	☐ NA
mitigated?			
6. Are all aerial hazards identified and known to all participants?	☐ Yes	☐ No	☐ NA
7. Have ground operations hazards and safety been identified to all participants?	☐ Yes	☐ No	☐ NA
8. Have mitigating measures been taken to avoid conflicts with military or civilian aircraft?	☐ Yes	☐ No	☐ NA
9. Have adequate landing areas been identified and or improved to minimum standards?	☐ Yes	☐ No	☐ NA
10. Are all agency personnel qualified for the mission?	☐ Yes	☐ No	☐ NA
11. Are there enough (qualified) agency personnel to accomplish the mission safely?	Yes	☐ No	☐ NA
12. Is the pilot carded and experienced for the mission to be conducted?	☐ Yes	☐ No	☐ NA
13. Will adequate briefings be conducted prior to flight to include Pilot, Passengers and Dispatch (all participants)?	☐ Yes	☐ No	□ NA
14. Are all involved aware that the pilot has the final authority, but if any passenger/aircrew/ground personnel feels uncomfortable, that they can refuse/curtail the flight without fear of reprisal?	☐ Yes	☐ No	□ NA
15. Is the aircraft capable of performing the mission with a margin of safety?	Yes	☐ No	□NA
16. Have manifests of cargo and passengers, load calculations and/or weight & balance completed?	☐ Yes	☐ No	□ NA
17. Is the aircraft properly carded?	☐ Yes	☐ No	☐ NA
18. Do all personnel have the required PPE?	☐ Yes	☐ No	☐ NA
19. Fuel planning, adequate fuel on board, fuel truck location, availability of commercial fuel?	☐ Yes	☐ No	□ NA
20. Remember; maps of areas/sites, handheld radios, cell phones, day/survival packs, sic sacks	☐ Yes	☐ No	□ NA
21. Will the mission be conducted at low levels? (Below 500' AGL)	☐ Yes	☐ No	☐ NA
22. Can the same objective be achieved by flying above 500' AGL?	☐ Yes	☐ No	☐ NA
23. Are pilot flight and duty times compromised?	☐ Yes	☐ No	☐ NA
24. Is there an alternative method that would accomplish the mission more safely?	☐ Yes	☐ No	☐ NA
25. Other? (identify)	☐ Yes	☐ No	☐ NA
26. Other? (identify)	Yes	☐ No	☐ NA
27. Other? (identify)	☐ Yes	☐ No	☐ NA
28. Other? (identify)	☐ Yes	☐ No	☐ NA
Above items (1-20) checked "NO" and item (22-24) checked "YES" require and /or re-evaluation of flight/mission before proceeding. Evaluate addition Identify Correction:			

Aircraft/Flight Mgr. Signature:		Date:	Pilot Signature:		Date:
Project Aviation	Safety Briefing				
A copy of this br	iefing page will be submitt	ed to the Av	iation Manag	ger.	
Briefing Leader:					
Briefing Date:	Time:	Location	:	_	
Discussion Item a. Hazard An	s: alysis (as outlined in plan)				
b. Safety Air	Ops (Ground)				
c. Safety Air	Ops (Flight)				
d. Military Tra	aining Routes				
e. Flight Follo	owing				
f. Frequencie	es				
g. Fueling					
h. Emergenc	y Evacuation Plan				
i. Authorities					
j. Weather Co	onsiderations				
k. Review ap	plicable JHAs/Risk Assess	sments			
I. other					
Briefing Attende	es Signature and Concurre	ence:			

Estimated cost:

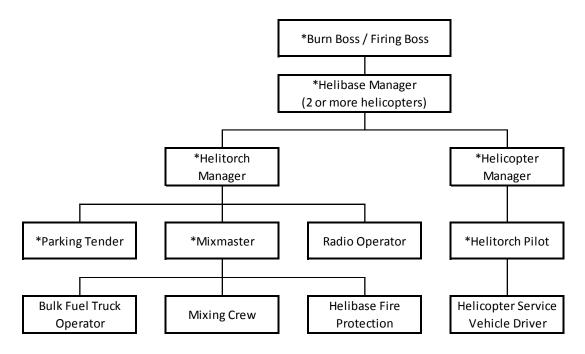
Helitorch Aerial Ignition Pr	replann	ing Chec	klist
Prescribed Burn plan approved	☐ yes	☐ no	
Project Aviation Safety Plan approved	☐ yes	☐ no	
Burn Blocks prepped for aerial ignition	☐ yes	☐ no	<b>□</b> N.A.
Helitorch Equipment serviced and ready	☐ yes	no	<b>□</b> N.A.
Approved Flight Helmets for all occupants of aircraft	☐ yes	no	<b>□</b> N.A.
Adapters needed/available	☐ yes	☐ no	
Extra Gelling Agent/Propane/Fuel available/where	☐ yes	☐ no	<b>□</b> N.A.
Backup/spare Helitorch	☐ yes	☐ no	<b>□</b> N.A.
Crash rescue/Evacuation equipment ready	☐ yes	no	<b>□</b> N.A.
Helispots prepared and approved	☐ yes	☐ no	<b>□</b> N.A.
Fire Suppression needs available (extinguishers, foam, Engine, CAFS)	☐ yes	no	<b>□ N.A.</b>
Enough qualified people available Helicopter Manager(s) Helibase Manager Helitorch Manager Parking Tender(s) Mixmaster Mixing Crew Fire Protection Group	<ul> <li>□ yes</li> </ul>	☐ no	□ N.A.         □ N.A.
Approved aircraft availability Aircraft and fuel truck reserved/scheduled the week before	☐ yes ☐ yes	no no	☐ N.A. ☐ N.A.
Additional reminders:			
	yes	no	<b>□</b> N.A.
	yes	☐ no	
	yes	☐ no	□ N.A.

Appendix	В	-Interagency	Aerial	Ignition	Guide

Page B - I
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Location of aircraft:\_\_\_\_\_

### **Helitorch Organization Chart – Prescribed Fire**

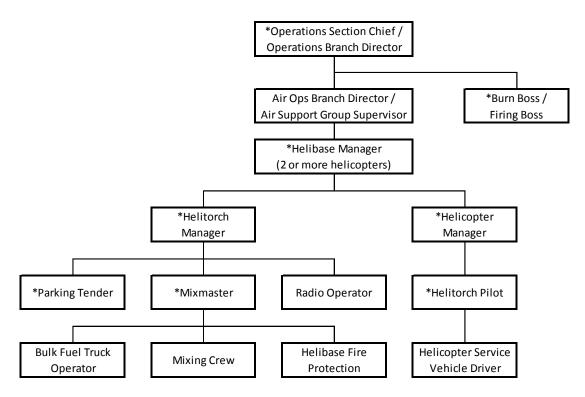


<sup>\*</sup>Minimum required organization. Deviation from staffing required positions requires prior approval from Regional Helicopter Operations Specialist or State/Regional Aviation Manager. Other positions to be filled as needed to provide for a safe and efficient operation.

Note: Helibase Fire Protection may be staffed by members of the Mixing Crew.

Note: Identify all trainees for given positions on the organization chart.

### Helitorch Organization Chart -Wildland Fire



<sup>\*</sup>Minimum required organization. Deviation from staffing required positions requires prior approval from Regional Helicopter Operations Specialist or State/Regional Aviation Manager. Other positions to be filled as needed to provide for a safe and efficient operation.

**Note:** On operations utilizing only one helitorch helicopter, the Helitorch Manager may have collateral duties as the Helicopter Manager as well as either (not both) the HTMM or HTPT (reference chapter IV for collateral duty allowances for all positions).

**Note:** Helibase Fire Protection may be staffed by members of the Mixing Crew.

Note: Identify all trainees for given positions on the organization chart.

### Helicopter Crash Rescue/Medivac Plan

# General Instructions In the event of an accident, the Helicopter/Helibase/Helitorch Manager will supervise and coordinate the crash rescue activities. Specific crash rescue duties will be assigned to helibase personnel each morning before flights of any kind. Crash rescue, evacuation and first aid equipment will be located near the helipad and equipment's location made known to all helibase personnel. Information and instructions will be sent/received through the local dispatch office or communications. Specific Information and Instructions (Utilize cell phone if possible. Do not use names over the radio.) 1. Nature of the injury(s)/illness. 2. Is medical help needed? If available supply vital signs! 3. What transportation is needed? Is patient(s) ambulatory?

4. Location of victim.										
5. Route to be taken (use land marks	s as guide).									
6. Equipment needed.										
7. Name of contact on site.										
8. Notify appropriate agency line of	ficer.									
EMT(S) on project										
Available Medivac helicopters	In (an									
FAA#	HMGB									
Litter/rappel/extraction capable										
Remarks	In (CD									
FAA#	HMGB									
Litter/rappel/extraction capable										
Remarks										
Nearest medical facility	Location			Ta =						
Latitude	Longitude	<u> </u>		Contact Freq						
VOR	NM		DEG							
Nearest burn center	Location			T						
Latitude		Longitude		Contact Freq						
VOR	NM		T =	DEG						
Life Flight			Location							
Type aircraft	Phone Num	ber		Contact Freq						
Site conditions										
Latitude		Longitude		Contact Freq						
VOR		NM		DEG						
Wind speed	Elevation (n			Temperature (F, C)						
Terrain factors		Helispot size								
Proximity of helispot to injury site		Visi	bility/sunrise/sunset l	imitations						
	Flight hazards									
Other aircraft in area (call signs and frequ	encies)									
Ground contact and frequencies										

**Helitorch Inspection Checklist** 

Project/Incident			I	Location				
Helite	orch :	Manager					Date	
Helite	orch :	Mixmaster					Date	
				DAILY INSPECT	ION			
HEL	ITO	RCH DRU	M/TAN					
				lly inspect for damage and leaks				
	Ē	i		and ready for use				
		1		s clean and working properly				
	<u></u>	1		tings in place and leak free				
	-	1		vable drum head in place, securing band tig	ht and le	ank fron		
	<del>-</del>	1		olts/pins in place and secure	iii, aiid id	cak fice		
	_ <u></u>	<u>]</u> 1			allary as	mtimuitu.		
	<u> </u>	1		ing cable connection paint free and clean to	anow co.	nununty		
TTET	Replacement drum available on-site HELITORCH FRAME							
HEL	110	KCH FKA.		1 1 1				
		<u> </u>		acks or breaks				
Clean and ready for use								
				olts/pins in place and secure				
MOT	COR_	AND ELE		CAL HOUSING				
			Clean					
				r pulley and belt in good condition				
				rical wiring free from cracks, corrosion and	connecte	d properly		
			Pump	motor lubricated				
			All sc	rews and bolts in place and tight				
			Pump	operating (primed)				
			Ignitio	on system adjusted, clean and working				
HOS	E CO	ONNECTION	ONS					
				with clamp or compression fittings tight/lea	ak free			
			Dry B	reak Valves clean. Caution! Do not open	valve ur	nless attached!		
	Ē	1		el rotates freely				
SUSI	PENS	SION SYS	ГЕМ А	ND HELITORCH ELECTRICAL CABI	Æ			
5052		1		and free of kinks, nicks, corrosion, and burn				
		1		ension line connectors secure and in good co				
	╁	1		olts, nuts, and attachment ring meet MTDC of		nronerly secure	-d	
		1		rical connector clean and tight w/line proper				
	<u>_</u>	1		ator bars not cracked or broken and properly				.1
			Бераг	HELITORCH SUPPO			swedges	
$\overline{}$	137	ndsock		HELITOREH SEITO	/K1 K11	Dust masks		
+		proved pov	ydor die	nancar	+	First aid kit/b	uen kit	
				ne per pad, four per mixing area; 40 BC, or	++		coveralls or Carbon Fi	har
ΙШ				inguishers (see Chapter IV)		NOMEX (var		.Dei
$\neg$		ntinuity tes		inguishers (see Chapter IV)				
$\vdash \vdash \vdash$				-14-	+H	Spare dry bre		
$\vdash \vdash$		o 5-gallon			<del>                                     </del>	Chemical spla		
		ol kit and E		encn	<del>                                     </del>	Wire brush, s	teel wool	
屵		are parts ki			+ ;;	Wire ties	1	
Щ.		aring prote			<del>                                     </del>	Electrical & d		
닏	_	<u> </u>		ent flagging/pad markers	<del>                                     </del>		lubricant/engine de-g	
		nding cable			<u> </u>		oap, and 5 gallons of v	vater
oxdot	Emery cloth and extra tip parts				<u> </u>	Hand cleaner		
	Metal funnel and coffee can						op for measuring gelli	ing agent
	Approved Flight helmet, flight suit					Fuel thermon		
	Approved vapor recovery/removal hose 2"					ressure relief valve		
	2 extra sight glasses				Nonferrous pa			
	5 gallons of diesel for cleanup				Cleaning rags	, hand cleaner, garbag	ge bags	
2 extra drum head seals				Nitrile, cottor	n, leather gloves			
	Grease gun w/grease					uarded electrical switc	h	
		tra nuts and				Propane bottl		
		gallon hazm		kit	ΤĒ	Headset/patch		
同				pe wrenches		Eye wash stat		
Helit			Signa					Date
Mixn								
	•							

## **Helitorch Mix Systems Checklist**

Project/In	ect/Incident Location							
Helitorch Manager Date								
Helitorch Mixmaster Date								
	DAILY INSPECTION							
DRUM/TANK								
	Visually inspect for damage and leaks							
	Clean and ready for use							
	Valves clean and working properly							
		in place and leak free						
		drum head in place, securing band ti	ght, aı	nd le	eak free			
		ns in place and secure						
		ble connections paint free and clean t	to allo	w cc	ontinuity throughout mixing syster	1		
<u> </u>	_	on-site and in working condition						
		nt drum available on-site						
MIXING	SYSTEM FR							
	No cracks o							
<u> </u>		eady for use						
ENGINE		ns in place and secure						
ENGINE		RICAL SYSTEMS						
	Clean	fts, and belts in good condition						
		riring free from cracks, corrosion, and	d conn	nacta	ad properly			
		bearings lubricated	a com	iccic	cu property			
	_	and bolts in place and tight						
$ \overline{H}$	_	tion checked						
-	Gas tank fu							
		ad at operating level						
		operational and spare available						
Ħ		ean and foam sponge lightly oiled						
		tem clean and operational						
PLUMBI	NG AND HO							
	Clean with	clamp or compression fittings tight/le	eak fre	ee				
	Dry Break \	Valves clean. Caution! Do not open	n valv	e un	nless attached!			
		ntinuity tested						
		racks, wear and serviceability						
		ate freely and not leaking						
		PPORT KIT (in addition to Helito	rch su	ıppo				
		tire lug wrench		Ц.	Jumper cables, tow chain			
	Spare trailer lig			<u> </u>	First aid kit			
	fire extinguish	ner, 40-B:C		<u>Ц</u>	Extra trailer hitch ball			
	Extra fuses			<u>Ц</u>	Extra motor oil			
	Chock blocks			<u> </u>	Safety can of gasoline			
	Gelling agent 8 hours worth			<u> </u>	20-foot emergency shut off lanyard			
	Current copy of Interagency Aerial Ignition Guide Emergency release attachment handle					handle		
	Copy of MSDS		+	片	Extra pressure gauge			
	OOT Transport		+	片	Terra torch wand			
	Mixmaster	Hazardous Materials Guide		Ш_	Barrier flagging	Doto		
nemorch	wiixinaster	Signature:				Date		

### **Helitorch Operations GO/NO GO Checklist**

The helicopter operations on this project require the use of this checklist. If all items are not checked as satisfactory and maintained in that state for the duration of the mission, flying operations will be suspended until the deficiency is mitigated.

Project/Inc	ident	0			Location			
Helitorch Manager						Date		
	Firing Boss					Date		
			DAILY IN	SPECTION				
ORGANIZ	ZATION							
GO	NO/GO							
		Helitorch orga functions by n		en prepared and posted	showing responsibility	/ for		
		All helitorch po	All helitorch positions are filled by qualified personnel and trainees identified.					
		Pilot and aircr	aft agency approved	cards checked.				
			Agency Helitorch module certified by agency aviation manager/HOS and documentation checked by HTMG.					
		Vendor provid HTMG.	Vendor provided equipment and personnel approved through contracting and checked by HTMG.					
		Multiple aircra	ıft - Helibase Manage	r qualified and assigned.				
		_		all required Helitorch pers personnel, and Helitorch	, , , , ,	onnel, fire		
		Overhead per	sonnel responsibilitie	s and authorities identifie	d and discussed.			
		Area flight haz	zard map posted, haz	ards discussed and mitig	ated with pilot.			
		Personnel ass	signments/duties/resp	oonsibilities known and ur	nderstood.			
		Helibase Managers checklist reviewed.						
		Fire Shelter provided for pilot, on board and accessible and pilot familiar with use.						
		Establish rendezvous point, escape routes and safety zone for personnel and equipment accountability for Helitorch base incidents and escaped fire situation. Radio notification will be made in the event personnel need to evacuate work area.						
		All personnel	will be briefed on the	hazards associated with	the handling of the m	aterials.		
CRASH R	 ESCUE PLA	<u> </u> .N						
		Aviation Safet	ty Plan approved, and	d posted at helibase.				
		Helibase cras	h rescue personnel a	ssigned, duties discusse	d and understood.			
		Aircraft Incide	nt Response Plan/Cra	ash Rescue Plan posted	at Helitorch base and	dispatch		
			flight routes, Helitorcling posted on a bullet	h area, flight hazards, gro tin board.	ound access routes, a	nd		
		Emergency pr	rocedures with torch of	operations reviewed, duti-	es discussed and und	lerstood.		
				edivac procedures review cue, evacuation and 1 ai				
MIXING A	REA							
		Separate from	n other helibase activi	ties				
		Traffic, ground	d vehicles, personnel,	, and aircraft control mea	sures in place.			
		Bulk fuel supp		erly located, bonding me	asures properly applic	ed, fuel		
		Operational 15 minute gravity fed portable eye wash station that meets ANSI Z358.1-1998, OSHA 1910.141						

### **Helitorch Operations GO/NO GO Checklist (continued)**

GO	AREA (con NO/GO			
00	NO/GO	Fire suppression equipment in place: Reference IAIG Chap IV section VI		
		Post "No Smoking" signs at all vapor removal outlets and mixing areas.		
		Equipment operational, dry run/walk through with mixing personnel completed.		
		Personal protective equipment: Personnel must be equipped with eye protection,	hardhat	
		fire retardant anti-static or 100 percent cotton coveralls and Nitrile Chemical Resist gloves.		
		Mixing equipment located outside of safety circle and out of approach and departu	re paths.	
		OSHA 1910.141 and 1926.51 Requires that potable drinking water be provided at jobsite. In addition if the employee is consuming their lunch at the site then hand so water or another form of cleansing/disinfecting agent must be provided.		
LANDIN	G AREA(s)			
		Approach and departure paths adequate.		
		Landing Area/Safety Circle free from hazards.		
		Traffic, ground vehicles, personnel, and aircraft control measures in place.		
		Dust abatement measures taken.		
		Helicopter fuel truck parking area and driving route designated, located away from landing areas, and personnel.	flight routes,	
		Fire extinguishers, crash rescue/extraction kit and evacuation kit on site per IHOG.		
COMMU	NICATIONS	S		
		Communication Plan completed and posted at Helitorch base		
		Have established radio frequencies as designated on the Aviation Safety Plan.		
		Parking Tender is equipped with a radio with headset and hardhat or approved Flight Helmet with remote transmit button/switch.		
		Radio frequency assignments established to include the discrete frequency.		
		Communications tested and operational with all functions to include Dispatch/ICP.		
ORIENT	ATION FLIC	GHT		
		Discuss flight profile, watchout situations including loss of tail rotor authority, settlin power, downwind turns, etc.	g with	
		Ignition patterns understood.		
		Location of control lines and personnel known.		
		Communication terminology and objectives discussed.		
		Flight routes include jettisoning torch considerations and alternate landing sites, identified pilot orientation flight/briefing.	entified durin	
GO/NO G	O CHECKI	IST		
		All checklists completed (Helitorch Inspection Checklist, Mixing Systems Checklist)	).	
		Helitorch Operations Go/No Go Checklist Completed. (All items must be checked commencing operations.)	GO prior to	
Helitorcl	n Manager	Signature:		
Mixmaster		Signature: Date		

### \* Aerial Ignition Annual Qualifications Update Sheet

Submitted by:

As of (date):

	Helitorch/PSD Annual Re-	Last Operational Assignment Dates:				
Name	Certification**  Dates:	HTMG	НТММ	НТРТ	PLDO	

<sup>\*</sup> Agency/Bureau Unit Name

Submit this form annually to the appropriate Agency/Bureau manager responsible for tracking qualifications and re-certification.

<sup>\*\*</sup> Reference the Interagency Aerial Ignition Guide chapter II, IV B. for annual recertification requirements.

### **Helitorch Pre-Use Checklist**

### **Batch Mixer**

	Pump:
	Gas
	Oil
	Air filter
	Zirc greased
	Hose reel
	Pump
	Start and warmup
Fuel Drum	
	All welds
	Interior clean
	Cover and latch working
	Properly placarded
Helitorch	
	Grease zircs on drum
	Dry-breaks tight and functioning
	Inspect:
	Hoses
	Switches
	Cables
	Electrical lines
	Bell ring properly configured for specific helicopter
	Install spreader bars
	Inspect barrel for cleanliness
	Replace propane bottle for new, full one
	Inspect hose clamps
	Ensure U-bolts for paddles are tight
	Inspect lid on barrel
	Ensure correct polarity
	Inspect drive belt
	Check ignitor distance from propane nozzle (1/2")
	Check plunger on tip, ensure complete springback
	Inspect sled for cracks, welds, etc.
	Flush 50-foot line of remnant diesel prior to inserting into torch
	Perform pre-operational checks on:
	Hook check
	Pump
	Ignition
	Propane
	Complete checklist from burn plan (daily)

### **Helitorch Post-Use Maintenance Checklist**

Date: _	//_	Inspector:
		Flush batch mixer and helitorch(s) with diesel; remove residual gel.
		Ensure pump switches are turned off.
		Cover helitorch tips.
		Cover batch mixer dry break.
		Remove spreader bars.
		Tape up cables.
		Protect torches and pump with covers.
		Grease trailer axles.
		Ensure all lights, electrical connections on trailer functioning.
		Properly secure all items on trailer.

### **Helitorch Annual Maintenance and Winterization Checklist**

<b>Date:</b> /	Inspector:
	Completely clean and drain batch mixer and barrels.
	Remove all gas from pump.
	Add 5 gallons diesel to batch mixer, circulate, and store.
	Grease all zircs on batch mixer.
	Disassemble and clean all helitorch tips.
	Inspect all items and store trailer in covered area.
	Ensure all items on inventory are present and functioning.
	Reorder/purchase any needed items.
	Routine inspection of equipment should occur even during times of
non-us	e to prevent corrosive damage.

### **Helitorch Use Record (Example)**

Date:/	Location:		
		Management Code:	
Burn Boss:			
Mixmaster:			
Parking Tender:			
Driver (Batch Mixer)	):		
Torch #:	Fuel Used (gal): _	Gelling Agent Used (lb/gal):	
Bottles of Propane U	sed:	Acres Treated:	
Fuel Vendor:			
Helicopter Make/Mo	odel:	N#:	
Helicopter Company:		Pilot:	
Weather:			
Problems Encountered	ed:		
Maintenance Perforn	ned/Needed:		
Comments:			