

Air Operations/Safety 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.

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|-------------------------------------|--|
| Helibase Safety | <input type="checkbox"/> Approved Project Aviation Safety Plan.
<input type="checkbox"/> Qualified Helibase/Helispot Manager assigned.
<input type="checkbox"/> Helibase/helispot meet established standards.
<input type="checkbox"/> Organizational chart posted, assignments known.
<input type="checkbox"/> Communications chart posted. Frequency assignments known.
<input type="checkbox"/> Helibase/helispot fire protection meets established standards.
<input type="checkbox"/> Crash rescue/evacuation kits on the helibase/helispot.
<input type="checkbox"/> Current Aviation Incident Response Plan posted at Dispatch/Helibase and ready to implement.
<input type="checkbox"/> All personnel briefed. Personnel briefed on in-flight operations.
<input type="checkbox"/> Separation of aircraft (if more than one used).
<input type="checkbox"/> Personal protective equipment meet established standards.
<input type="checkbox"/> Flight hazard map posted/hazards known to pilot. |
| Aircraft/Pilot(s) | <input type="checkbox"/> Check pilot and aircraft approval cards.
<input type="checkbox"/> Check pilot and aircraft limitations.
<input type="checkbox"/> Load calculations prepared and posted.
<input type="checkbox"/> Check aircraft radios.
<input type="checkbox"/> Remove all loose articles from aircraft.
<input type="checkbox"/> Fire shelter/PFD/Anti-Exposure Suit on board aircraft for each person.
<input type="checkbox"/> Water bucket ordered with aircraft (optional).
<input type="checkbox"/> Approved Secondary Restraint Harness and approved aircraft hardpoint to attach to. |
| Equipment | <input type="checkbox"/> Installation correct with restraints in place.
<input type="checkbox"/> Mechanical operation satisfactory.
<input type="checkbox"/> Extinguisher operational.
<input type="checkbox"/> All components serviced and checked.
<input type="checkbox"/> Activation achieved.
<input type="checkbox"/> Intercom and aircraft-to-ground communications operable.
<input type="checkbox"/> Pilot has been briefed and agrees that all is in order.
<input type="checkbox"/> Equipment secured to approved hardpoints.
<input type="checkbox"/> Seat belt cutter available for emergency use.
<input type="checkbox"/> Additional container of water available.
<input type="checkbox"/> Tool kit on board aircraft (optional). |
| Operations | <input type="checkbox"/> All persons briefed and assignments known.
<input type="checkbox"/> Maps/photos of project area used/posted.
<input type="checkbox"/> Special weather considerations known/discussed.
<input type="checkbox"/> Communication plan posted and frequency assignments known.
<input type="checkbox"/> Emergency operations plan known and discussed.
<input type="checkbox"/> Personal protective equipment meets established standards.
<input type="checkbox"/> Special safety considerations known and discussed. |
| Support Equipment/ Personnel | <input type="checkbox"/> Adequate support equipment/personnel to complete mission.
<input type="checkbox"/> Pump/engine operational checks.
<input type="checkbox"/> Radios/communications operationally checked.
<input type="checkbox"/> Support equipment/personnel propositioned before actual operations begin.
<input type="checkbox"/> Adequate supply of fuel/resources on hand to complete project.
<input type="checkbox"/> Checklist complete. |

_____/_____
Helicopter Manager Date

_____/_____
Pilot Date

_____/_____
Project Manager Date