

AIR OPERATIONS SUMMARY	PREPARED BY:	PREPARED DATE/TIME:
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1. INCIDENT NAME	2. OPERATIONAL PERIOD DATE:	START TIME:	END TIME:	SUNRISE:	SUNSET:
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3. REMARKS (Safety Notes, Hazards, Air Operations Special Equipment, etc.):	4. MEDEVAC A/C:	5. TFR: Radius: _____ NM Altitude: _____ ' MSL Centerpoint: Lat: _____ Long: _____
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6. PERSONNEL	Phone	7. FREQUENCIES	AM	FM	8. FIXED-WING #Available/ Type/ Make-Model/ FAA N#/ Bases
AOBD:		AIR/AIR FW:			Airtankers
ATGS:		AIR/AIR RW:			
HLCO:		AIR/GROUND:			
ASGS:		COMMAND: (Simplex)			Leadplanes
HEBM:		COMMAND RPT	Rx:	Tx:	Base FAX#
ATB MGR:		DECK FREQ.:			ATGS Aircraft
		TOLC FREQ.:			
					Other

9. HELICOPTERS (Use Additional Sheets As Necessary)

FAA N#	TY	MAKE/MODEL	BASE	AVAIL	START	REMARKS	FAA N#	TY	MAKE/MODEL	BASE	AVAIL	START	REMARKS

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10. TASK/MISSION/ASSIGNMENT (Type/Function includes Air Tactical, Retardant, Recon, Personnel Transport, Water Dropping, S&R, etc.)

TYPE/FUNCTION	NAME OF PERSONNEL OR CARGO (if applicable) OR INSTRUCTIONS FOR TACTICAL AIRCRAFT	MISSION START	FLY FROM	FLY TO