

HELICOPTER QUESTIONNAIRE

This questionnaire in conjunction with the OAS-13, Request for Contract Services is designed to involve the requester/user in analyzing their operational and programmatic needs. The questionnaire is not be used for eliminating makes of helicopters or the equipment needed to perform the required tasks. Any unique operational or configuration requirement that would limit this request in any manner from full and open competition will require a separate justification. Proper identification of your requirements is an important step in obtaining the proper aviation resources.

If you require additional space to explain your requirements, please attach additional sheets with further details.

This form may be filled in on the computer or a blank form can be printed and filled in by hand. Use the mouse to navigate and click a box and begin typing. To check or uncheck a box, left 'click' the box. Answer each question with a narrative or check the appropriate block. Items not applicable to your requirements should be marked N/A (not applicable) or left blank.

1a. GENERAL - DESCRIPTION OF WORK TO BE PERFORMED – Primary projects that will be supported by the helicopter.

1b. INTERAGENCY FIRE YES NO **LAW ENFORCEMENT** YES Explain NO **FULLY CONTRACTOR OPERATED** YES NO

1c. REPORTING BASE (only if applicable)	1c. RELEASE BASE (only if applicable)
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1d. COMMERCIAL FUEL SOURCE – Name, location and telephone number of closest fuel facility where the Contractor could obtain fuel.

1e. GOVERNMENT FACILITIES - Identify Government facilities that are available for Contractor use and the rental cost to the Contractor, if any.

1f. COMMERCIAL FACILITIES – Identify closest food and lodging facilities.

1g. BIA ONLY – Services accomplished on a Reservation may be subject to Tribal Employment Rights Ordinances (TEROs). Include address and telephone number of Tribal Employment Office.

2a. HELICOPTER PERFORMANCE – List make(s) and model(s) that you anticipate will satisfactorily support your program requirements.

2b. Your requirements for helicopter performance below:

INTERNAL PAYLOAD HIGE
(excluding pilot and fuel) HOGE

FUEL (VFR fuel reserve of 20 minutes will be added to the number you identify)

ALTITUDE (Typical)

TEMPERATURE (Typical)

2d. Highest altitude (MSL) and temperature where landings and take-offs will be made in your primary area of operation:

2e. Description of terrain in your primary area of operation:

2c. APPROXIMATE HELICOPTER AIRSPEED REQUIREMENT

YES NO If YES, indicate speed: Kts.

3a. PERSONNEL REQUIREMENTS - Identify crew compliment

- Single Pilot Two Pilots
- Driver (If a fuel vehicle is required, normally a driver is required.) Check if no driver is required
- Mechanic - ON-SITE - If you require an on-site mechanic, can the mechanic also be the driver? Check one. YES NO
(If a mechanic is not required, the contract will permit the Contractor to determine the need for a mechanic to service/inspect the aircraft.)
- Relief Crew. If checked, the compliment will be the same as specified above.
(Pilots, drivers, and mechanics must have two days off within any 14-day period.)

3b. DOI Departmental Manual identifies minimum standard experience levels that Contractor pilots must meet. These are automatically included in each solicitation and resulting contract. Indicate any other special requirement that should be included.

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| <input type="checkbox"/> Animal capture/tagging/herding | <input type="checkbox"/> Instruments | <input type="checkbox"/> Fixed Floats |
| <input type="checkbox"/> Deep snow landings | <input type="checkbox"/> Aerial ignition | <input type="checkbox"/> Other - Identify: _____ |
| <input type="checkbox"/> Off-shore | <input type="checkbox"/> Long line | |
| <input type="checkbox"/> Geological survey work (USGS approved pilot) | | |

**QUESTIONS CONCERNING THIS QUESTIONNAIRE SHOULD BE DISCUSSED WITH YOUR AREA OFFICE
ALASKA REGION, ANCHORAGE - 907-271-3700**

