

AIRPLANE QUESTIONNAIRE

This questionnaire in conjunction with the AMD-13, Request for Contract Services, is designed to involve the requester/user in analyzing their operational and programmatic needs. The questionnaire is not to be used for eliminating makes of aircraft 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 airplane.

1b. INTERAGENCY FIRE	LAW ENFORCEMENT	FULLY CONTRACTOR OPERATED	WITHOUT PILOT
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES Explain below <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES - Explain below

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 performed on a Reservation may be subject to Tribal Employment Rights Ordinances (TEROs). Include address and telephone number of Tribal Employment Office. If none, so indicate.

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

2b. Your requirements for airplane performance (AT DESIGNATED BASE)

MAXIMUM PAYLOAD (To include passengers, baggage and cargo)

RUNWAY LENGTH

HIGHEST TEMPERATURE	ELEVATION	
		MSL

FLIGHT HOURS OR STATUTE MILES FOR NORMAL MISSION

QUESTIONS CONCERNING THIS QUESTIONNAIRE SHOULD BE DISCUSSED WITH YOUR AM REGIONAL OFFICE
WESTERN REGION, BOISE-208-334-9310 / PHOENIX-623-879-0589 EASTERN REGION, ATLANTA 770-458-7474
ALASKA REGION, ANCHORAGE 907-271-5021

