**BLM Aviation Enhancement Application Form V2.0**

The following template applies to aviation enhancement requests for programs such as rappel, short-haul and cargo let-down, RADS. Additionally the template should be used for changes in utilization of aviation programs already approved.

The intent of the template is to organize information required by aviation and line managers to make informed decisions.

Published standards have been established to prevent aviation mishaps and to provide a standardized approach to efficient and effective operations. Aviation enhancements have inherent increases of exposure of personnel which require careful scrutiny to ensure the operational gain is worth the risk and that identified hazards are mitigated where possible.

**REVIEW AND APPROVALS**

|  |  |
| --- | --- |
| Prepared By: | Date: |
| State Aviation Manager Review: | Date: |
| District Manager/Line Managment, Approval: | Date: |
| State Director, Approval: | Date: |
| National Aviation Office Program Manager Review: | Date: |
| Division Chief Aviation, Approval: | Date: |
| **Background:** *Provide information pertaining to the program that will undergo enhancement. Include any historic information applicable to past practices and success or other operator’s ability to perform the required aviation elements without the BLM restrictions.* | |
| **Objectives**: *These must be clearly stated and achievable with the criteria provided that will be used to measure success and attainment. What is the District trying to accomplish with the enhancement?* | |
| **Justification:** *What benefit accrues to the BLM or the District by granting the enhancement* | |
| **Benefit and Risk Analysis:** *Benefits of the use of the enhancement will be provided along with the analysis of the risks that will be involved. Describe the consequences of use and non-use of the enhancement to BLM policy.*   |  |  |  |  | | --- | --- | --- | --- | |  | **Benefits** | **Risks** | **Consequences for BLM Policy** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   **Note:** | |
| **Limitations and Controls:** *Provide a description of any barriers that would affect the use of this enhancement? Indicate which can be mitigated and which cannot?* | |
| **Funding provisions:** *Describe how any additional funding would be accessed and where any savings would be applied.* | |
| **Contracting issues:** *Describe any contract modification that would be needed to meet the needs of this enhancement and vendor’s requirements in order to accept them.* | |
| **Security provisions:** *Describe any additional security measures that will be needed to assure aircraft and crewmembers are not harmed as a result of expanded operational abilities.* | |
| **Training and support provisions:** *Describe the training and support needs applicable for the enhancement and how these will be satisfied without affecting other existing program elements?* | |
| **Other methods available:** *Provide a comprehensive description of other methods of accomplishing the objective and the limitations these pose. Describe any restrictions these methods possess and possible solutions that would make them viable options.* | |