## LAW ENFORCEMENT AGENCY (LEA) AIRCRAFT REQUEST

**ORI:** 

**DODAAC: AGENCY NAME: AIRCRAFT POC:** AGENCY PHYSICAL ADDRESS (as it appears in FEPMIS): CITY: STATE: ZIP: **EMAIL: PHONE:** FAX:

TYPE OF AIRCRAFT AND QUANTITY OF EACH TYPE					
ROTARY	OH-58	OH-6	UH1H	UH1L	UH1N
Flyable Quantity					
Non-Flyable Quantity					
FIXED	C12	C172	C182		
Flyable Quantity					
Non-Flyable Quantity					
OTHER (State type)					
Quantity					

If something other than the marked/stated above aircraft becomes Yes No available, would you like to be offered it?

1. Please thoroughly explain the intended use and impact the resource will have upon your jurisdiction and/or neighboring jurisdiction support to other agencies (examples may include SWAT, active shooter, barricaded suspect, emergency response, first responder, critical incident, hostage rescue, natural disaster response, homeland security, or counter terrorism). List additional information as needed to explain the intended use of the resource.

2. Is the requesting agency located within an office of National Drug Control Policy designated High Intensity Drug Trafficking Area (HIDTA)? If yes, please describe.

3. Is the requesting agency involved by mutual agreement with multi-agency associations/task forces of a counter-drug/counter-terrorism/border security nature?

4. State the population within the requesting agencies jurisdiction and describe the geographical size of the area of responsibility.

5. Describe the type of facility that will be used to store and secure the resource.

6. Provide the estimated usage/mission requirements for the requested aircraft.

7. List all Federal Aviation Administration (FAA) certified pilots, type of certification (for what type of aircraft) does the pilot hold.

By signing this document, the Chief Law Enforcement Official or Head of Local Federal Agency (Supervisor/Regional Agent in Charge/Special Agent in Charge [RAC/SAC]) certifies that: a) the requesting agency listed above has the appropriate funds, license (s), safety, and operational training required to operate and maintain the requested aircraft, b) that the agency is abiding by the current version of the LESO approved State Plan of Operation (SPO) and any SPO Addendum(s), c) that the agency has a signed copy of the SPO and any SPO Addendum(s) on file, d) the agency certifies that all information contained above is accurate, e) the request for aircraft (s) is warranted and f) the request for aircraft has been approved/is endorsed by the agency signatory listed below.

PRINTED NAME: DATE: CHIEF LAW ENFORCEMENT OFFICIAL **OR HEAD OF LOCAL FEDERAL** AGENCY (SUPERVISOR/RAC/SAC): SIGNATURE: STATE OR FEDERAL COORDINATOR USE ONLY By signing this application, I certify that as the State Coordinator/State Point of Contact, I have determined that: a) the agency meets the definition of a "Law Enforcement Agency/Activity", b) that all information contained in this application is valid and accurate, c) that the LEA is abiding by the current version of the LESO approved SPO and any SPO Addendum(s) and d) that the LEA has a signed copy of the SPO and any SPO Addendum(s) on file. **PRINTED NAME:** DATE: STATE OR FEDERAL COORDINATOR: SIGNATURE: LESO USE ONLY ADDITIONAL NOTES: # OF OFFICERS: TOTAL # OF AIRCRAFT: AIRCRAFT SPECIALIST (SIGNATURE): DATE: Is agency on the Department of Justice (DOJ) Active Case List?: Yes No DOJ Liaison Is agency on the LESO Suspension List?: Yes No notes: **LESO OFFICIALS: COMPLIANCE LIAISON SPECIALIST (SIGNATURE):** DATE: LESO BRANCH CHIEF (SIGNATURE): DATE: LESO DIVISION CHIEF (SIGNATURE): DATE: