



UNITED STATES DEPARTMENT OF THE INTERIOR
OFFICE OF AIRCRAFT SERVICES
PILOT EXPERIENCE VERIFICATION FORM
 (TYPE OR PRINT ALL INFORMATION)

Pilot's Name		Telephone No.
Home Address		Item No.
Contract No.	FAR 133 Qualified: Date	Examiner's Name

IN FULFILLMENT OF PARAGRAPH 302.8 OF CONTRACT, PROVIDE REQUESTED INFORMATION PERTINENT TO PILOT QUALIFICATIONS

Provide Verification of:	Date & Hours	Helicopter Co. or Operator's Name, Address, Telephone No.	Brief Description of Geographic Area of Operation	Client or Contractee's Name, Present Address, Phone Number	Party Chief's Name, Present Address, Phone Number
600 hours of geologic mapping and surveying type operations in remote and rugged terrain similar to areas of operation for this contract involving numerous landings and take-offs at unprepared sites at different elevations and under varied wind conditions, and sometimes involving heavy timber or brush, all requiring a high degree of pilot skill. All flight times will be within the last five years.					

