Form Revised 2-14-18

2018 Reported Heliskiing Activity

Bi-weekly Period: from 4/17/2018 to 5/3/2018

Company Name: SEABA

Person Completing Report: Austin Shannon

Date	Start Time	End Time	Heli ID #	Skier Days Used (do not count training/guide school days)	Area(s) / Flight Path(s)	Deviation from the flight guidelines? (provide explanation below*)	Accidents? (provide explanation below*)	Incidental Wildlife Observation? (provide explanation below inc. type of wildlife & location*)
4/17/2018	1000	1900	293LF	21	Town Zone	No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
						No	No	None
				21				

*** Explanations-------flight deviations, accidents, incidental wildlife observations, if any**

Date	