

## Los Angeles District (TWLA) **SPECIAL EVENTS Coordination Form**

## \* \* \* GENERAL INFORMATION \* \* \*

Type of Event	LOCATION [City / Landmark]		
If Other:	Event Name / Reason		
FIX Bearing & Distance [NM] to Site	Radius of Si	ite	DATE (multi date use pg 2)
START TIME of Event [specify if UTC or L	ocal] END	) TIME of E	Event [specify if UTC or Local]
POC Name	POC Phone #		POC Alternate Ph #
POC E-mail	ALT	ITUDE(s) [	Indicate MSL and/or AGL]
CALL SIGN(s)	AIRCI	RAFT TYP	E(s)

## **\*\*\* EVENT SPECIFIC INFORMATION \*\*\***

Determined by TYPE of Event [A, B, F, I, L, M, O, P, R, S or T]

F - POC must email all Special Events ten (10) working days prior to event to coordinate flight details.

P - # of aircraft, # of passes, # of jumpers per pass A - List practice days, Airboss Info, Twr Freq

W - Diameter & Payload

B - # of balloons & Diameter

Save completed form and email to:

AJT-SCT-Special-Activities@faa.gov and 9-AWP-SCT-TMU@faa.gov

## Additional Information

TWLA A&P Coordination Form 1R Updated March 7, 2024 Save completed form and email to:

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