

Task Book for the Position of:

**HELICOPTER MANAGER – LIMITED  
USE/RESTRICTED  
(HMLR)**



**Note: This is an agency-specific approved by the BLM, National Park Service, and US Forest Service to meet agency requirements for the Helicopter Manager – Limited Use/Restricted (HMLR) position.**

**JANUARY 2025**

**Task Book Assigned To:**

Trainee's Name: \_\_\_\_\_

Home Unit/Agency: \_\_\_\_\_

Home Unit Phone Number: \_\_\_\_\_

**Task Book Initiated By:**

Official's Name: \_\_\_\_\_

Home Unit Title: \_\_\_\_\_

Home Unit/Agency: \_\_\_\_\_

Home Unit Phone Number: \_\_\_\_\_

Home Unit Address: \_\_\_\_\_

Date Initiated: \_\_\_\_\_

**Verification/Certification of Completed Task Book  
for the Position of:**

**HELICOPTER MANAGER – LIMITED USE/RESTRICTED  
(HMLR)**

**Final Evaluator's Verification**

*To be completed **ONLY** when you are recommending the Trainee for certification.*

I verify that (trainee name) \_\_\_\_\_ has successfully performed as a trainee by demonstrating all tasks for the position listed above and should be considered for certification in this position. All tasks are documented with appropriate initials.

Final Evaluator's Signature: \_\_\_\_\_

Final Evaluator's Printed Name: \_\_\_\_\_

Home Unit Title: \_\_\_\_\_

Home Unit/Agency: \_\_\_\_\_

Home Unit Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Agency Certification**

I certify that (Trainee name) \_\_\_\_\_ has met all requirements for qualification in the above position and that such qualification has been issued.

Certifying Official's Signature: \_\_\_\_\_

Certifying Official's Printed Name: \_\_\_\_\_

Title: \_\_\_\_\_

Home Unit/Agency: \_\_\_\_\_

Home Unit Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Additional copies of this publication are available through: Agency-specific Position Task Books webpage at <https://www.nwccg.gov/agency-specific-position-task-books>.**

## AGENCY-SPECIFIC POSITION TASK BOOK (PTB)

This agency-specific task book has been developed for the Helicopter Manager – Limited Use/Restricted (HMLR) position. The Federal Wildland Fire Qualifications Supplement outlines the required training and prerequisites for this position and can be found at <https://iqcsweb.nwcg.gov/>. Click on the “Associated Documents” link to access the Supplement

Each PTB lists the competencies, behaviors and tasks required for successful performance in specific positions. Trainees must be observed completing all tasks and show knowledge and competency in their performance during the completion of this PTB.

Trainees are evaluated during this process by qualified evaluators, and the trainee’s performance is documented in the PTB for each task by the evaluator’s initials and date of completion. An Evaluation Record will be completed by all evaluators documenting the trainee’s progress after each evaluation opportunity.

Successful performance of all tasks, as observed and recorded by an evaluator, will result in a recommendation to the agency that the trainee be certified in that position. Evaluation and confirmation of the trainee’s performance while completing all tasks may occur on one or more training assignments and may involve more than one evaluator during any opportunity.

### INCIDENT/EVENT CODING

Each task has a code associated with the type of training assignment where the task may be completed. While tasks can be performed in any situation, they must be evaluated on the specific type of incident/event for which they are coded. For example, tasks coded W must be evaluated on a wildfire. Performance of any task on other than the designated assignment is not valid for qualification. The codes are defined as:

**O = Other:** In any situation (classroom, simulation, daily job, incident, prescribed fire, etc.).

**I = Incident:** Task must be performed on an incident managed under the Incident Command System (ICS). Examples include wildland fire, structural fire, oil spill, search and rescue, hazardous material, and an emergency or non-emergency (planned or unplanned) event.

**W = Wildfire:** Task must be performed on a wildfire incident.

**RX = Prescribed fire:** Task must be performed on a prescribed fire incident.

**W/RX = Wildfire OR prescribed fire:** Task must be performed on a wildfire OR prescribed fire incident.

**R = Rare event:** Rare events such as accidents, injuries, vehicle or aircraft crashes occur infrequently and opportunities to evaluate performance in a real setting are limited. The Evaluator should determine, through interview, if the Trainee would be able to perform the task in a real situation.

Tasks within the PTB are numbered sequentially; however, the numbering does NOT indicate the order in which the tasks need to be performed or evaluated.

The bullets under each numbered task are examples or indicators of items or actions related to the task. The purpose of the bullets is to assist the Evaluator in evaluating the Trainee; the bullets are not all-inclusive. Evaluate and initial ONLY the numbered tasks. DO NOT evaluate and initial each individual bullet.

### RESPONSIBILITIES

The responsibilities of the Home Unit/Agency, Trainee, Coach, Training Specialist, Evaluator, Final Evaluator, and Certifying Official are identified in the *NWCG Standards for Wildland Fire Position Qualifications*, PMS 310-1, <https://www.nwcg.gov/publications/310-1>. Individuals are responsible for ensuring their tasks are met and the PTB is complete.

## INSTRUCTIONS FOR THE POSITION TASK BOOK EVALUATION RECORD

### Evaluation Record #

Each evaluator will need to complete an evaluation record. Each evaluation record should be numbered sequentially. Place this number at the top of the evaluation record page and also use it in the column labeled "Evaluation Record #" for each numbered task the Trainee has satisfactorily performed.

### Trainee Information

Print the trainee's name, position on the incident/event, home unit/agency, and the home unit/agency address, and phone number.

### Evaluator Information

Print the evaluator's name, position on the incident/event, home unit/agency, and the home unit/agency address and phone number.

### Incident/Event Information

**Incident/Event Name:** Print the incident/event name.

**Reference:** Enter the incident code and/or fire code.

**Duration:** Enter inclusive dates during which the trainee was evaluated.

**Incident Kind:** Enter the kind of incident (e.g., search and rescue, flood).

**Location:** Enter the geographic area, agency, and state.

**Management Type or Prescribed Fire Complexity Level:** Circle the ICS organization level or the prescribed fire complexity level.

**Fire Behavior Prediction System (FBPS) Fuel Model Group:** Circle the Fuel Model Group letter that corresponds to the predominant fuel type in which the incident/event occurred.

**G = Grass Group** (includes FBPS Fuel Models 1 – 3): 1 = short grass (1 foot); 2 = timber with grass understory; 3 = tall grass (1½ - 2 feet)

**B = Brush Group** (includes FBPS Fuel Models 4 – 6): 4 = Chaparral (6 feet); 5 = Brush (2 feet); 6 = dormant brush/hardwood slash; 7 = Southern rough

**T = Timber Group** (includes FBPS Fuel Models 8 – 10): 8 = closed timber litter; 9 = hardwood litter; 10 = timber (with litter understory)

**S = Slash Group** (includes FBPS Fuel Models 11 – 13): 11 = light logging slash; 12 = medium logging slash; 13 = heavy logging slash

### Evaluator's Recommendation

For 1 – 4, initial only one line as appropriate, this will allow for comparison with your initials in the Qualifications Record.

**Comments:** Additional information specific to the evaluator's recommendation. The evaluator should note any deficiencies, additional assignment needs, or additional focus areas that were identified. Record additional remarks/recommendations on an Individual Performance Evaluation or by attaching an additional sheet to the Evaluation Record.

**Evaluator's Signature:** Sign here to authenticate the recommendation.

**Date:** Document the date the Evaluation Record is completed.

**Evaluator's Relevant Qualification (or agency certification):** List your qualification or certification relevant to the trainee position you supervised.

**Note:** Evaluators must be either qualified in the position being evaluated, a Helicopter Manager (HMGB), or supervise the trainee; final evaluators must be qualified as a Helicopter Manager (HMGB) or qualified in the trainee position they are evaluating.

**HELICOPTER MANAGER – LIMITED USE/RESTRICTED (HMLR)**

**COMPETENCY: ASSUME POSITION RESPONSIBILITIES.**

*Description: Successfully assume role of Amphibious Water Scooper Manager and initiate position activities at the appropriate time according to the following behaviors.*

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
<b>Behavior: Ensure readiness for assignment.</b>			
1. Obtain and assemble information and materials needed for kit. Suggested items: <ul style="list-style-type: none"> <li>• <i>NWCG Incident Response Pocket Guide (IRPG), PMS 461</i></li> <li>• <i>Incident-specific reference materials</i></li> <li>• <i>Documentation materials</i></li> <li>• <i>NWCG Standards for Helicopter Operations (NSHO), PMS 510</i></li> <li>• <i>Contracts</i></li> <li>• <i>Load calculation book</i></li> <li>• <i>Aircraft payment book</i></li> </ul>	O		
2. Obtain complete information from dispatch upon assignment. <ul style="list-style-type: none"> <li>• <i>Incident name</i></li> <li>• <i>Incident order number</i></li> <li>• <i>Request number</i></li> <li>• <i>Incident phone number</i></li> <li>• <i>Reporting time</i></li> <li>• <i>Reporting location (drop point)</i></li> <li>• <i>Transportation arrangements/travel routes</i></li> <li>• <i>Contact procedures during travel (telephone/radio)</i></li> <li>• <i>Authorization for use of equipment (laptops, cell phones, rental vehicle)</i></li> </ul>	O		
3. Travel to and from assignment. <ul style="list-style-type: none"> <li>• <i>Have assigned personnel ready at specified location on time.</i></li> <li>• <i>Arrange tool transport.</i></li> <li>• <i>Manifest assigned personnel for helicopter, if needed.</i></li> <li>• <i>Use time effectively during delays (e.g., critique assignment).</i></li> <li>• <i>Take head count prior to departure.</i></li> <li>• <i>Ensure driver/operator is qualified and has had required rest.</i></li> <li>• <i>Ensure safety procedures are followed for transporting personnel and equipment.</i></li> </ul>	O		

*Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.*

**HELICOPTER MANAGER – LIMITED USE/RESTRICTED (HMLR)**

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
4. Arrive at incident and check in. <ul style="list-style-type: none"> <li>• <i>Arrive properly equipped at assigned location within acceptable time limits.</i></li> <li>• <i>Notify dispatch of any time delays.</i></li> </ul>	I		

**Behavior: Gather, update, and apply situational information relevant to the assignment.**

5. Obtain initial briefing from supervisor. <ul style="list-style-type: none"> <li>• <i>Tactical assignment</i></li> <li>• <i>Special considerations and hazards</i></li> <li>• <i>Values to be protected</i></li> </ul>	I		
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**Behavior: Establish effective relationships with relevant personnel.**

6. Conduct self in a professional manner. <ul style="list-style-type: none"> <li>• <i>Respectful and courteous</i></li> <li>• <i>Respectful of public and private property</i></li> </ul>	I		
7. Establish and maintain positive interpersonal and interagency working relationships.	I		

**Behavior: Establish organization structure, reporting procedures, and chain of command of assigned resources.**

8. Organize assigned resources into configurations which will meet incident/tactical objectives.	I		
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**Behavior: Understand and comply with ICS concepts and principles.**

9. Apply the ICS. <ul style="list-style-type: none"> <li>• <i>Follow chain of command.</i></li> <li>• <i>Maintain appropriate span of control.</i></li> <li>• <i>Use appropriate ICS forms.</i></li> <li>• <i>Use appropriate ICS terminology.</i></li> </ul>	I		
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**Behavior: Take appropriate action based on assessed risks.**

10. Apply the Risk Management Process found in the IRPG. <ul style="list-style-type: none"> <li>• <i>Step 1: Situation Awareness</i></li> <li>• <i>Step 2: Hazard Assessment</i></li> <li>• <i>Step 3: Hazard Control</i></li> <li>• <i>Step 4: Decision Point</i></li> <li>• <i>Step 5: Evaluate</i></li> </ul>	I		
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*Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.*

**HELICOPTER MANAGER – LIMITED USE/RESTRICTED (HMLR)**

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
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**Behavior: Ensure availability, qualifications, and capabilities of resources to complete assignment.**

11. Provide tactical capabilities of helicopter and qualifications of personnel to assignment supervisor. <ul style="list-style-type: none"> <li>• <i>Missions' aircraft and pilot are approved to perform passenger, cargo and water dropping capabilities, etc.</i></li> <li>• <i>Helicopter accessories and equipment available in support vehicle; order additional equipment when needed.</i></li> </ul>	I		
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**COMPETENCY: COMMUNICATE EFFECTIVELY.**

*Description: Use suitable communication techniques to share relevant information with appropriate personnel on a timely basis to accomplish objectives in a rapidly changing, high-risk environment.*

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
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**Behavior: Ensure relevant information is exchanged with all contract and government personnel.**

12. Conduct pre- and post-flight briefings with flight, support, and helicopter crews. <ul style="list-style-type: none"> <li>• <i>Mission objectives, time frames, reporting locations, travel routes.</i></li> <li>• <i>Performance, safety, and/or efficiency problems encountered.</i></li> <li>• <i>Adjustments in future operations.</i></li> </ul>	I		
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**Behavior: Ensure relevant information is exchanged during briefings and debriefings.**

13. Conduct pre-use inspection of helicopter and fuel service vehicle to ensure compliance with contract/agreement specifications as related to mission required equipment, systems, and operation. Document as per agency policy.	I		
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*Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.*

**HELICOPTER MANAGER – LIMITED USE/RESTRICTED (HMLR)**

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
14. Ensure required documents are current and onboard the aircraft. <ul style="list-style-type: none"> <li>• <i>Transportation of hazardous materials (HazMat) Emergency Response Guidebook and Department of Transportation (DOT) exemption</i></li> <li>• <i>Copy of contract/agreement</i></li> <li>• <i>Helicopter flight manual</i></li> <li>• <i>Aircraft logbook</i></li> <li>• <i>Agency aircraft data card</i></li> </ul>	I		
15. Maintain communication with appropriate agency aircraft contracting/administrative personnel.	I		
16. Complete daily diary, agency flight use summary, and appropriate cost summaries.	O		
17. Complete agency incident/accident reports.	O		
18. Complete contract evaluation closeout form and forward to contracting officer.	R		

**Behavior: Ensure compliance with all legal and safety requirements relevant to air operations.**

19. Ensure turbine power assurance checks are conducted and documented as required by agency. <ul style="list-style-type: none"> <li>• <i>Contact agency maintenance specialist if trend analysis indicates sub-par engine performance.</i></li> </ul>	I		
20. Continuously monitor and document flight and/or duty hours of pilots, mechanics, and fuel service vehicle drivers to ensure agency limitations are not exceeded. <ul style="list-style-type: none"> <li>• <i>Schedule and manage flight and duty times to meet current and projected work objectives.</i></li> <li>• <i>Ensure relief pilots, mechanics, etc.,</i></li> </ul>	I		
21. Ensure flight planning, flight following, and resource tracking requirements are met. <ul style="list-style-type: none"> <li>• <i>Obtain Resource Order, Flight Request, or other mission information.</i></li> <li>• <i>Work with pilot to develop agency and/or Federal Aviation Administration (FAA) flight plans.</i></li> <li>• <i>Obtain appropriate radio frequencies, phone numbers, transponder codes, and area and hazard maps for mission.</i></li> <li>• <i>Conduct or ensure radio check-ins are accomplished at established intervals.</i></li> </ul>	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.



## HELICOPTER MANAGER – LIMITED USE/RESTRICTED (HMLR)

TASK	C O D E	EVAL. RECORD #	EVALUATOR: Initial & date upon completion of task
22. Ensure helicopter pilot accurately completes and approves helicopter load calculation (reflecting current aircraft configuration), appropriate flight manual performance charts, and environmental conditions. <ul style="list-style-type: none"> <li>• <i>Flight crew weights</i></li> <li>• <i>Fuel quantity on board</i></li> <li>• <i>Elevations at takeoff and landing sites</i></li> <li>• <i>In-ground or out-of-ground effect conditions</i></li> <li>• <i>Density altitude</i></li> </ul>	I		
23. Verify helicopter is maintained to FAA and agency standards. <ul style="list-style-type: none"> <li>• <i>Review aircraft logbook entries to ensure scheduled maintenance inspections are completed at required intervals.</i></li> <li>• <i>Contact agency maintenance specialist during unscheduled maintenance or major component replacement.</i></li> <li>• <i>Facilitate return-to-service process.</i></li> <li>• <i>Inform supervisor of current or future helicopter maintenance/unavailability.</i></li> </ul>	I		
24. Use risk management techniques and Go/No-Go Checklist prior to each flight. <ul style="list-style-type: none"> <li>• <i>Airspace deconfliction</i></li> <li>• <i>Aerial hazard map</i></li> <li>• <i>Weather assessment</i></li> <li>• <i>Radio communications</i></li> </ul>	I		
25. Ensure actual helicopter payloads do not exceed the calculated allowable payload.	I		
26. Ensure pre-flight briefings are conducted and the appropriate PPE is utilized for missions.	I		
27. Ensure crash rescue/response procedures and equipment are established and communicated to helicopter personnel.	I		
28. Comply with applicable requirements in the <i>Aviation Transport of HazMat Guide</i> .	I		

**Behavior: Plan for demobilization and ensure demobilization procedures are followed.**

29. Anticipate demobilization of resource. <ul style="list-style-type: none"> <li>• <i>Prepare schedule for demobilization.</i></li> </ul>	I		
30. Check in with agency dispatcher prior to demobilization, if necessary.	I		

Evaluate the numbered tasks ONLY. DO NOT evaluate bullets; they are provided as examples/additional clarification.

**Trainee Information**

Printed Name:  
 Trainee Position on Incident/Event:  
 Home Unit/Agency:  
 Home Unit /Agency Address and Phone Number:

**Evaluator Information**

Printed Name:  
 Evaluator Position on Incident/Event:  
 Home Unit/Agency:  
 Home Unit /Agency Address and Phone Number:

**Incident/Event Information**

Incident/Event Name: \_\_\_\_\_ Reference (Incident Number/Fire Code): \_\_\_\_\_  
 Duration: \_\_\_\_\_  
 Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify): \_\_\_\_\_  
 Location (include Geographic Area, Agency, and State): \_\_\_\_\_  
 Management Type (circle one): Type 5, Type 4, Type 3, Type 2, Type 1, Complex Incident Management, Area Command  
OR Prescribed Fire Complexity Level (circle one): Low, Moderate, High  
 FBPS Fuel Model Letter: G = Grass, B = Brush, T = Timber, S = Slash

**Evaluator's Recommendation**  
 (Initial only one line as appropriate)

- \_\_\_\_\_ 1) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. The trainee has successfully performed all tasks in the PTB for the position. I have completed the Final Evaluator's Verification section and recommend the trainee be considered for agency certification.
- \_\_\_\_\_ 2) The tasks initialed and dated by me on the Qualification Record have been performed under my supervision in a satisfactory manner. However, opportunities were not available for all tasks (or all uncompleted tasks) to be performed and evaluated on this assignment. An additional assignment is needed to complete the evaluation.
- \_\_\_\_\_ 3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- \_\_\_\_\_ 4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Comments: \_\_\_\_\_  
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 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Evaluator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluator's Relevant Qualification (or agency certification): \_\_\_\_\_

Additional Evaluation Record Sheets can be downloaded at <https://www.nwcg.gov/training/nwcg-position-task-books>.

**Trainee Information**

Printed Name:  
 Trainee Position on Incident/Event:  
 Home Unit/Agency:  
 Home Unit /Agency Address and Phone Number:

**Evaluator Information**

Printed Name:  
 Evaluator Position on Incident/Event:  
 Home Unit/Agency:  
 Home Unit /Agency Address and Phone Number:

**Incident/Event Information**

Incident/Event Name: \_\_\_\_\_ Reference (Incident Number/Fire Code): \_\_\_\_\_  
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 Incident Kind: Wildfire, Prescribed Fire, All Hazard, Other (specify): \_\_\_\_\_  
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**Evaluator's Recommendation**  
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- \_\_\_\_\_ 3) The trainee did not complete certain tasks in the PTB in a satisfactory manner and additional training, guidance, or experience is recommended.
- \_\_\_\_\_ 4) The individual is severely deficient in the performance of tasks in the PTB for the position and additional training, guidance, or experience is recommended prior to another training assignment.

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Evaluator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluator's Relevant Qualification (or agency certification): \_\_\_\_\_

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