CLEAR

LAW ENFORCEMENT AGENCY (LEA)
AIRCRAFT REQUEST

SCREENER ID: _____ AGENCY NAME:_____

AIRCRAFT POC:_____

ADDRESS (No P.O. Box):_____

CITY: _____ STATE: _____

ZIP: _____ EMAIL: _____

PHONE: _____ FAX: _____

1. Type of Aircraft Requested:_____
2. Number of Aircraft Requested: _____Flyable _____Non-Flyable
3. Geographic Responsibility (Square Miles Covered):_____
4. Is the LEA in a High Intensity Drug Trafficking Area (HIDTA): Yes No

   Verify at: http://www.whitehousedrugpolicy.gov/hidta
5. Anticipated Annual Flight Hours:_____
6. Number/Type of 1208/1033 Aircraft Currently on Inventory: _____

The Chief Executive Official/Head of Agency (Local Field Office), by signing, certifies that the requesting agency listed above has the appropriate funds, personnel (qualified pilots and maintainers), hanger/apron space, and equipment to operate and maintain the requested aircraft. It is also understood that this agency will not sell, trade, or cannibalize for parts, aircraft acquired through the 1033 Program. They certify that all information contained above is accurate and the request for aircraft is warranted and has been approved

CHIEF EXECUTIVE OFFICIAL/:
HEAD OF LOCAL AGENCY

_____ **DATE:**_____
PRINTED NAME

_____
SIGNATURE

STATE COORDINATOR:
(NOT REQUIRED FOR FEDERAL)

_____ **DATE:**_____
PRINTED NAME

_____
SIGNATURE

LESO USE ONLY

LESO OFFICIAL:

_____
PRINTED NAME

_____
SIGNATURE

DATE LEA WAS ADDED TO THE NATIONAL PRIORITY LIST: _____

LESO NOTES: _____

DISAPPROVED BY LESO: ☐ REASON: _____