

## Air Tanker Drop Evaluation

Date:	Incident Name:
Incident #:	
Descriptive Location:	
Tanker #:	Pilot:
Vendor :	
Elevation:	Wind (speed/direction):
Terrain (flat, rolling, steep):	
Fuel Type:	
<b>Drop Evaluation:    1 = Unacceptable    2 = Poor    3 = Good    4 = Excellent</b>	
Fire Area Traffic Pattern (1-4):	
Communications (1-4):	
Target Acquisition (1-4):	
Drop Accuracy (1-4):	
Number of Drops:	
Comments:	
Evaluator's Name:	Position:
Address:	
Email:	Phone: