

SCAA Occurrence No.

Complete all sections where information is relevant.
For multi-choice boxes, indicate which entry is appropriate.

Aircraft Type and Series 1	Registration 2	Operator 3	Date of Occurrence 4
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FLIGHT AND WEATHER DETAILS							Flight Phase		Flight Phase	
Flight No. 5	DAY NIGHT TWILIGHT	Wind 12	Runway Used 16	Precipitation 18 RAIN <input type="checkbox"/> LIGHT <input type="checkbox"/> SNOW <input type="checkbox"/> MOD <input type="checkbox"/> SLEET <input type="checkbox"/> HEAVY <input type="checkbox"/> HAIL <input type="checkbox"/>	Icing 19 LIGHT <input type="checkbox"/> MOD <input type="checkbox"/> HEAVY <input type="checkbox"/>	Turbulence 20 LIGHT <input type="checkbox"/> MOD <input type="checkbox"/> SEVERE <input type="checkbox"/> EXTREME <input type="checkbox"/>	22 PARKED <input type="checkbox"/> TAXYING <input type="checkbox"/> TAKE-OFF <input type="checkbox"/> INIT CLIMB <input type="checkbox"/> CLIMB <input type="checkbox"/> CRUISE <input type="checkbox"/> DESCENT <input type="checkbox"/> HOLDING <input type="checkbox"/> APPROACH <input type="checkbox"/> LANDING <input type="checkbox"/> CIRCUIT <input type="checkbox"/> AEROBATICS <input type="checkbox"/> HOVER <input type="checkbox"/>	23 PAX <input type="checkbox"/> FREIGHT <input type="checkbox"/> SURVEY <input type="checkbox"/> PLEASURE <input type="checkbox"/> AGRICULTURAL <input type="checkbox"/> BUSINESS <input type="checkbox"/> CLUB/GROUP <input type="checkbox"/> PRIVATE <input type="checkbox"/> POSITIONING <input type="checkbox"/> FERRY <input type="checkbox"/> TEST <input type="checkbox"/> TRAINING <input type="checkbox"/> PARACHUTING <input type="checkbox"/> TOWING <input type="checkbox"/>		
From 6	9	IAS 13 Kts	State 17	Cloud Type Height / ft 21 Amount / 8ths						
To 7	Time 10 GMT	HT/ALT/FL 14 ft	DRY <input type="checkbox"/> WET <input type="checkbox"/> ICE <input type="checkbox"/> SNOW <input type="checkbox"/> SLUSH <input type="checkbox"/>							
Geog. Position 8	Visibility 11	OAT 15 °C								

NARRATIVE

ENGINEERING DETAILS	Aircraft Constructor's No. 25	Engine Type & Series 26	Ground Phase Maintenance <input type="checkbox"/> Ground Handling <input type="checkbox"/> Taxy <input type="checkbox"/> Unattended <input type="checkbox"/> 27	AIRCRAFT BELOW 5700Kg ONLY		
				Maintenance Organisation 27 (a)	Tel No. 27(b)	

Component/Part 28	Location on aircraft 29	Manual Reference 30	Overhaul/Repair Agency 31	32 Maintnce. Prog.			Reliability Prog. Cat 'A' Item YES/NO 33
				O.C	C.M	H.T	

Manufacturer 34	Part No. 35	Serial No. 36	HOURS/ CYCLES/ LANDINGS 37	TOTAL 38	Since O/H or repair 39	Since Inspect ion 40	Manufacturer Advised YES/NO 41
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Is there any published Airworthiness Information or control procedures (e.g. AD, SB etc) relevant to occurrence. 42 YES/NO	Reference No. and Compliance Status of Aircraft or Equipment
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Report ORIGINAL/SUPPL 43	If report is submitted voluntarily i.e not subject to mandatory requirements 46	Organisation 48	Address and Tel No. (if reporter wishes to be contacted privately)				
Reporter's Investigation NIL/OPEN/CLOSED 44		Position 49					
Flight Data Record Held 45 YES/NO	Can the information be disseminated in the interests of safety 47 YES/NO	Reference No 50	Date 51	Name 53	Signature		