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DO NOT REPORT AIRCRAFT ACCIDENTS AND CRIMINAL ACTIVITIES ON THIS FORM.
ACCIDENTS AND CRIMINAL ACTIVITIES ARE NOT INCLUDED IN THE ASRS PROGRAM AND SHOULD NOT BE SUBMITTED TO NASA.
ALL IDENTITIES CONTAINED IN THIS REPORT WILL BE REMOVED TO ASSURE COMPLETE REPORTER ANONYMITY.

(SPACE BELOW RESERVED FOR ASRS DATE/TIME STAMP)

IDENTIFICATION STRIP: *Please fill in all blanks to ensure return of strip.*
NO RECORD WILL BE KEPT OF YOUR IDENTITY. This section will be returned to you.

TELEPHONE NUMBERS where we may reach you for further details of this occurrence:

HOME Area _____ No. _____ Hours _____

WORK Area _____ No. _____ Hours _____

NAME _____

ADDRESS/PO BOX _____

_____

CITY _____ **STATE** _____ **ZIP** _____

TYPE OF EVENT/SITUATION

_____

_____

DATE OF OCCURRENCE _____
(MM/DD/YYYY)

LOCAL TIME (24 hr. clock) _____
(HH:MM)

PLEASE FILL IN APPROPRIATE SPACES AND CHECK ALL ITEMS WHICH APPLY TO THIS EVENT OR SITUATION.

REPORTER		FLYING TIME (in hours)	CERTIFICATES & RATINGS		ATC EXPERIENCE
☐ Captain ☐ First Officer	☐ Single Pilot ☐ Instructor	Total Time _____ hrs	☐ Student ☐ Sport/Rec	☐ Flight Instructor ☐ Multiengine	☐ FPL ☐ Developmental
☐ pilot flying ☐ pilot not flying	☐ Trainee ☐ Dispatcher: _____ yrs	Last 90 Days _____ hrs	☐ Private	☐ Instrument	radar _____ yrs non-radar _____ yrs
☐ relief pilot ☐ check airman	☐ Other: _____	Time in Type _____ hrs	☐ Commercial ☐ ATP	☐ Flight Engineer ☐ Other: _____	supervisory _____ yrs military _____ yrs

AIRSPACE		CONDITIONS / WEATHER ELEMENTS			LIGHT / VISIBILITY		ATC / ADVISORY SVC.	
☐ Class A	☐ Class E	☐ VMC	☐ fog	☐ snow	☐ dawn	☐ night	☐ Ramp	☐ Center
☐ Class B	☐ Class G	☐ IMC	☐ hail	☐ thunderstorm	☐ daylight	☐ dusk	☐ Ground	☐ FSS
☐ Class C	☐ Special Use	☐ Mixed	☐ haze/smoke	☐ turbulence	Ceiling _____ feet		☐ Tower	☐ UNICOM
☐ Class D	☐ TFR	☐ Marginal	☐ icing	☐ windshear	Visibility _____ miles		☐ TRACON	☐ CTAF
			☐ rain	☐ other: _____	RVR _____ feet		ATC Facility Name: _____	

	AIRCRAFT 1			AIRCRAFT 2		
Your Aircraft Type (Make/Model) (e.g. B737) NOT "N #", Flt #, etc.: _____			**Operating FAR Part:** _____	**Other Aircraft:** _____		**Operating FAR Part:** _____
Operator	☐ air carrier ☐ air taxi ☐ corporate	☐ fractional ☐ FBO ☐ government	☐ military ☐ personal ☐ other: _____	☐ air carrier ☐ air taxi ☐ corporate	☐ fractional ☐ FBO ☐ government	☐ military ☐ personal ☐ other: _____
Mission	☐ passenger ☐ personal	☐ cargo/freight ☐ training	☐ ferry ☐ other: _____	☐ passenger ☐ personal	☐ cargo/freight ☐ training	☐ ferry ☐ other: _____
Flight Plan	☐ VFR ☐ IFR	☐ SVFR ☐ DVFR	☐ none	☐ VFR ☐ IFR	☐ SVFR ☐ DVFR	☐ none
Flight Phase	☐ taxi ☐ parked ☐ takeoff ☐ initial climb	☐ climb ☐ cruise ☐ descent ☐ initial approach	☐ final approach ☐ missed/GAR ☐ landing ☐ other: _____	☐ taxi ☐ parked ☐ takeoff ☐ initial climb	☐ climb ☐ cruise ☐ descent ☐ initial approach	☐ final approach ☐ missed/GAR ☐ landing ☐ other: _____
Route in Use	☐ airway (ID): _____ ☐ direct ☐ SID (ID): _____	☐ STAR (ID): _____ ☐ oceanic ☐ vectors	☐ visual approach ☐ none ☐ other: _____	☐ airway (ID): _____ ☐ direct ☐ SID (ID): _____	☐ STAR (ID): _____ ☐ oceanic ☐ vectors	☐ visual approach ☐ none ☐ other: _____

If more than two aircraft were involved, please describe the additional aircraft in the "Describe Event/Situation" section.

LOCATION	CONFLICTS
Altitude: _____ (single value) ☐ MSL ☐ AGL	Estimated miss distance in feet: horiz _____ vert _____
Distance: _____ and/or Radial (bearing): _____ from:	Was evasive action taken? ☐ Yes ☐ No
☐ Airport _____ ☐ ATC Fac _____	Was TCAS a factor? ☐ TA ☐ RA ☐ No
☐ Intersection _____ ☐ NAVAID _____	Did terrain warning system activate? Reset ☐ Yes ☐ No

NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

NASA has established an Aviation Safety Reporting System (ASRS) to identify issues in the aviation system which need to be addressed. The program of which this system is a part is described in detail in FAA Advisory Circular 00-46E and FAA Handbook 7210.3. Your assistance in informing us about such issues is essential to the success of the program. Please fill out this form as completely as possible, enclose in a sealed envelope, affix proper postage, and send it directly to us.

The information you provide on the identity strip will be used only if NASA determines that it is necessary to contact you for further information. THIS IDENTITY STRIP WILL BE RETURNED DIRECTLY TO YOU. The return of the identity strip assures your anonymity.

AVIATION SAFETY REPORTING SYSTEM

Section 91.25 of the Federal Aviation Regulations (14 CFR 91.25) prohibits reports filed with NASA from being used for FAA enforcement purposes. This report will not be made available to the FAA for civil penalty or certificate actions for violations of the Federal Air Regulations. Your identity strip, stamped by NASA, is proof that you have submitted a report to the Aviation Safety Reporting System. We can only return the strip to you, however, if you have provided a mailing address. Equally important, we can often obtain additional useful information if our safety analysts can talk with you directly by telephone. For this reason, we have requested telephone numbers where we may reach you.

Thank you for your contribution to aviation safety.

NOTE: AIRCRAFT ACCIDENTS SHOULD NOT BE REPORTED ON THIS FORM. SUCH EVENTS SHOULD BE FILED WITH THE NATIONAL TRANSPORTATION SAFETY BOARD AS REQUIRED BY NTSB Regulation 830.5 (49CFR830.5).

If you want to mail this form, please fold both pages (and additional pages if required), enclose in a sealed, stamped envelope, and mail to:

NASA AVIATION SAFETY REPORTING SYSTEM
POST OFFICE BOX 189
MOFFETT FIELD, CALIFORNIA 94035-0189

DESCRIBE EVENT/SITUATION

Keeping in mind the topics shown below, discuss those which you feel are relevant and anything else you think is important. Include what you believe really caused the problem, and what can be done to prevent a recurrence, or correct the situation. (USE ADDITIONAL PAPER IF NEEDED)

CHAIN OF EVENTS
- How the problem arose
- How it was discovered
- Contributing factors
- Corrective actions

HUMAN PERFORMANCE CONSIDERATIONS
- Perceptions, judgments, decisions
- Actions or inactions
- Factors affecting the quality of human performance

DESCRIBE EVENT/SITUATION, continued...

CHAIN OF EVENTS
- How the problem arose
- How it was discovered
- Contributing factors
- Corrective actions

HUMAN PERFORMANCE CONSIDERATIONS
- Perceptions, judgments, decisions
- Actions or inactions
- Factors affecting the quality of human performance