



**Report Form -
Incident**

Accident

Serious

Owner, Operator

Pilot in Command

Instructor

Tick as appropriate ✓

REPORT FORM

In order to assist the AAIB further in the investigation of this occurrence, please complete this Report Form to the best of your ability providing details of the event.

Please then sign it to confirm the accuracy of all details therein, and return the completed form within fourteen days to the Chief Inspector of Air Accidents at the address below.

If you have any difficulties in completing this Form or any other queries relating to the occurrence please contact the AAIB (see contact details below).

Should additional information be required, an Inspector of Air Accidents will contact you in due course.

It is recommended that you retain a copy of your completed form for your records

In Accordance with Annex 13 to the International Civil Aviation Organisation Convention, Regulation (EU) No 996/2010, and Cyprus Aircraft Accident & Incident Investigation Law of 2015, the sole purpose of these investigations is to prevent aviation accidents and serious incidents occurring in the future.

It is not the purpose of these investigations to apportion blame or liability.

Signature:

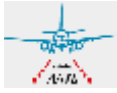
Name:

Reporting Officer

Date:

Πύργος Ελέγχου Εναέριας Κυκλοφορίας 1^{ος} Όροφος, Γραφείο 214 – Διεθνής Αερολιμένας Λάρνακας Τηλ: +357 -24643086/87, +357 24802913/915/919
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P.O BOX 43086 6650 Larnaca Fax:+357-24643052, Website: www.aaib.gov.cy



Occurrence notification

Send to : Email address : aaib@mcw.gov.cy

Fax : +357-24643052

a) for accidents the identifying abbreviation ACCID, for serious incidents INCID;	ACCID (Accident) <input type="checkbox"/>	INCID (Serious Incident) <input type="checkbox"/>	Incident (optional) <input type="checkbox"/>
b) manufacturer, model, nationality, flight number and registration marks, and serial number of the aircraft;			
c) name of owner, operator and hirer, if any, of the aircraft;			
d) name of the pilot-in-command, name of co-pilot for communications purpose and nationality of crew and passengers;			
e) date and time (local time or UTC) of the accident or serious incident;	(dd/mm/yyyy – hh:mm) local date: local time:	(dd/mm/yyyy – hh:mm) UTC date: UTC time:	
f) last point of departure and point of intended landing of the aircraft;	Last point of departure: Point of intended landing:		
g) position of the aircraft with reference to some easily defined geographical point and latitude and longitude;			
h) number of crew and passengers; aboard, killed and seriously injured; others, killed and seriously injured;	Persons on board	crew	pax
	Fatal	crew	pax
	Serious injury	crew	pax
	Minor	crew	pax
			others
			others
			others
i) description of the accident or serious incident and the extent of damage to the aircraft so far as is known;			
j) physical characteristics of the accident or serious incident area, as well as an indication of access difficulties or special requirements to reach the site;			
k) presence and description of dangerous goods on board the aircraft.	<input type="checkbox"/> No <input type="checkbox"/> Yes – If yes, UN#		
Operation Type (If information is available)	Commercial aviation <input type="checkbox"/>	Scheduled <input type="checkbox"/>	Passenger <input type="checkbox"/>
	General aviation <input type="checkbox"/>	Non-scheduled <input type="checkbox"/>	Cargo <input type="checkbox"/>
Level of damage to aircraft (If information is available)	Destroyed <input type="checkbox"/>	Substantial <input type="checkbox"/>	
	Minor <input type="checkbox"/>	None <input type="checkbox"/>	
l) identification of the originating authority (Name – Address – Email – Phone)			