Defence Air Safety Occurrence Report

Investigation Section

Indicates Mandatory Field



		ii lan	cated Managery 1 loid		
Original Reference Number		Date of Occurrence (dd/mm/yyyy)			
Lead Inve	estigator				
Rank/Title		Full Name			
	Job Title				
	Contact Details				
Date Investigation Started		Date Investigation Completed		Man hours Expended on Investigation	
Experien	ce				
Aircre	ew .				
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Hours Last 30 days	Hours last 3 months	Hours on Type	Total Hours	
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Hours Last 30 days	Hours last 3 months	Hours on Type	Total Hours	
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Hours Last 30 days	Hours last 3 months	Hours on Type	Total Hours	
ΑT	гс				
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Time on Console	Experience Years	Experience Months	Endorsements	
	Other Info				
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Time on Console	Experience Years	Experience Months	Endorsements	
	Other Info				
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Time on Console	Experience Years	Experience Months	Endorsements	
	Other Info				
Maintenan	ce				
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
	Total on Type	Experience Years	Experience Months		()
	Other Info	rours	World		
Tag	Rank/Title	Role			Include Fatigue (Attach Fatigue form)
Ü	Total on	Experience	Experience		(Audorri augue Ioiiii)
	Type Other Info	Years	Months		
	0				

Tag	Rank/Title	Role		Include Fatigue (Attach Fatigue form)
	Total on	Experience	Experience	(Allacti Fallgue Ioilli)
	Type Other Info	Years	Months	
Oth				
Tag	Rank/Title	Role		Include Fatigue (Attach Fatigue form)
1.59	Trade		Experience	Experience
	Other Info		Years	Months
Tag	Rank/Title	Role		Include Fatigue (Attach Fatigue form)
ray		Kole	Experience	Experience
	Trade		Years	Months
	Other Info			Ingludo Estiguo
Tag	Rank/Title	Role	Experience	Include Fatigue (Attach Fatigue Form) Experience
	Trade		Years	Months
	Other Info			
Narrative				
Summary o	f Investigation			
Sequence of	of Events			
Findings				
Outcome				
Narrative D	escription of Outcome			

Cause			
Narrative Description of Cause			
Link to Existing Recommendation			
Recommendation for DDH/ODH/AM Ap (additional fields available on final page of d	pproval		
(additional fields available on final page of d	ocument)		
Full Recommendation			
ADH/AM			
Mitigation/Local Actions	Justification of No Action		
Causal Factors			
Contributory Aggravating	Other		
Narrative Description of Causal Factor			
Link to Existing Recommendation			
Recommendation for DDH/ODH/AM Ap (additional fields available on final page of do	ocument)		
Title			
Full Recommendation			
ADH/AM			
Mitigation/Local Actions	Justification of No Action		

Observations	
Effects	
	Flight Effect Only

Cause/Causal Factor			
Link to Existing Recommendation			
Recommendation for DDH/ODH/AM Ap	pproval		
Title			
Full Recommendation			
ADH/AM			
Mitigation/Local Actions	Justification of No Action		
Cause/Causal Factor			
Link to Existing Recommendation			
Recommendation for DDH/ODH/AM Approval			
Title			
Full Recommendation			
ADH/AM			
Mitigation/Local Actions	Justification of No Action		
Cause/Causal Factor			
Link to Existing Recommendation			
Recommendation for DDH/ODH/AM Approval			
Title			
Full Recommendation			
ADH/AM			