

# Defence Air Safety Occurrence Report

ATM Section



Indicates Mandatory Field

Original Reference Number	Date of Occurrence <small>(dd/mm/yyyy)</small>
---------------------------	---

Details of Reporter

Rank/Title	Full Name
Job Title	
Contact Details	

Category of Occurrence

Is this a mandatory report

Occurrence Details

Location of Event	
<small>(Please give range and bearing from an airfield, beacon, reporting point, prominent geographical feature or large town)</small>	
Lat	Long
Airspace Classification	
Runway in use (Terminal Only)	

Aircraft Involved

Aircraft Registration	Aircraft Type/Mark	Aircraft Type (Other)
Aircraft Registration	Aircraft Type/Mark	Aircraft Type (Other)

Callsign	Type	SSR	Height/Altitude/FL/ NMC	Pressure Setting	Type of Service	Hdg or Track	Climbing/ Descending/Level	Under control of (Unit)
----------	------	-----	----------------------------	------------------	-----------------	--------------	-------------------------------	----------------------------

RT Frequency	Radar Equipment in use		
Equipment Serviceability	Number of Aircraft Involved		
Number of Aircraft on Frequency			
Were the aircraft co-ordinated?	Yes	No	Unsure
Was traffic information given by you?	Yes	No	Unsure
Was avoiding action given by you?	Yes	No	Unsure
Did either pilot receive a TCAS RA?	Yes	No	Unsure
Details of ATC System Alert (STCA, DAIW etc.)			

Personnel Factors

Shift Start Time	Time Since Last Break
Days Since Last Day Off	Task Difficulty For Controller at Time of Occurrence
Workload	

Runway Incursion                      Applicable

Details
Aircraft or Vehicle Type
Specific Vehicle Details

ATM Equipment Failures

ATS Facility	Duration of Outage		
Equipment Location	Equipment Type		
Equipment Status	Works Reference Number		
Facility Configuration	Previous Defects/ Occurrences		
Operational Impact	Major	Reportable	Slight