

**ATS OCCURRENCE REPORTING FORM****Form B**

For ATS personnel to report an occurrence caused by an aircraft or a vehicle, by your own or another ATS Unit, an alleged violation of ATS provisions or clearances, equipment / ATC procedures shortcomings, etc . . .

Fill in as many Boxes (1 to 19) as possible and relevant. Mark V as appropriate ; refer to Guidelines.

**1. Date/Time of occurrence (in UTC) :****2. Day or Night :****3. Geographical location of occurrence :**

YY

MM

DD

Day

hh

mm

Night

**4. Aircraft involved :**

Operator	CS and/or registration	Type	ADEP	ADES	FL, altitude or height	SSR Code	Mode C		Route segment	Flight rules	
							Yes	<input type="checkbox"/>		IFR	<input type="checkbox"/>
							No	<input type="checkbox"/>		VFR	<input type="checkbox"/>
							Yes	<input type="checkbox"/>		Spec.	<input type="checkbox"/>
							No	<input type="checkbox"/>		IFR	<input type="checkbox"/>
							Yes	<input type="checkbox"/>		VFR	<input type="checkbox"/>
							No	<input type="checkbox"/>		Spec.	<input type="checkbox"/>

**5. RTF frequency/communication equipment and surveillance equipment used :****6. Class of ATS airspace (A, B, C, D, E, F or G) :****7. Type of Air Traffic Services :****8. Estimated vertical distance (ft/m) :**

Estimated horizontal distance (NM/km/minutes) :

**9. Automated Warning Systems :**

Ground-based

Airborne

**10. Traffic information given :**

Yes

No


**11. Have you reviewed relevant RTF and/or surveillance recordings ?**

Yes

No


**12. Was Weather considered relevant ? (If yes, include details in Box 13)**

Yes

No


**13. Description of occurrence with diagram, if necessary ; Causes and factors believed relevant to the occurrence ; Suggested changes and improvements, if appropriate :***Use additional forms as necessary***14. Assessment of workload :**

(very)

heavy

medium

light

  
  
  

**15. Time since****last break :****16. Start time of shift****in UTC :****in local time :****17. Name of your ATS Unit and Sector :****18. On duty as :***FOR OFFICE USE ONLY***19. Your name, signature and local date :**