

**CONFIDENTIAL AVIATION HAZARD REPORTING (CAHRS) FORM**

<b>Submitter's Details</b>	
<i>Please fill in all blanks. This section will be destroyed, no record will be kept.</i>	
Full Name	
Telephone Number	
Email Address	
Postal Address	
Date of Submission	
<p>In terms of Civil Aviation Regulation (CAR) 2011: regulation 12.02.5(2) Any person who notifies the designated body or institution referred to in regulation 12.01.2 of an accident or incident, shall not be absolved from the duty to notify the Executive responsible for aircraft accident and incident investigation of such accident or incident in terms of regulation 12.02.1, 12.02.2 or 12.02.3, as the case may be;</p> <p>12.03.1 This report was compiled in the interest of the promotion of aviation safety and the reduction of the risk of aviation accidents or incidents and <b>not to establish legal liability</b>.</p> <p>All identities contained in this report will be removed to assure complete reporter confidentiality</p>	

<b>To be completed by all</b>						
Select the appropriate box and complete sections affiliated to that selection						
This report refers to	Flight Operations	Cabin	Air Traffic	Ground Hazards	Engineering	Other
	<i>Fill in Section A &amp; D</i>	<i>Fill in Section A &amp; D</i>	<i>Fill in Section B &amp; D</i>	<i>Fill in Section C &amp; D</i>	<i>Fill in Section C &amp; D</i>	<i>Fill in section D</i>
<b>The Event - Specify Hazard Type:</b>						
Location:						
Date of Occurrence		Vehicle Registration		Local Time		

<b>Section A: For FLIGHT DECK and CABIN CREW related Hazard Reports</b>											
Crew Position				Crew Duty							
Light / Visibility		Day			Night			Dawn		Dusk	
Type of Operation		Schedule			Charter			Corporate		Other specify	
Type of Aircraft (Make/Model)											
Flight Phase	Taxi	Takeoff	Climb	Cruise	Descent	Approach	Landing				
Missed Approach (GA)		Other Specify									
Weather (if applicable)	VMC		IMC		Ice		Snow		Mixed		Turbulence
	Marginal		Storm		Rain		Wind shear		Fog		Other Specify

Section B: For AIR TRAFFIC related Hazard Reports										
Type of Aircraft (Make/Model)										
Flight Phase	Taxi	Takeoff	Climb	Cruise	Descent	Approach	Landing	Other specify		
Missed Approach (GA)							Other specify			
Position of Aircraft			Altitude					feet	AMSL	AGL
			Distance and radial from airport							
Type of Flight		VFR	IFR	SVFR	Other specify					
					None					
Flight Plan										
Cloud/Visibility			Ceiling	feet	Visibility	meters	RVR	meters		
Name of ATC Facility										
ATC Service being provided										
Type(s) of Airspace						(Class A, B, C, D, E, F, G/Special Use Airspace)				
Control Status		Visual Approach		Radar Control		Radar Vectors		On SID/STAR		
		Nil Communications		Unknown		None		Other specify		
Ground Facility		Communications		Navigation		Surveillance				

Section C: For ENGINEERING and GROUND RELATED Hazard Reports										
Aircraft/ Engine Type										
System/Component										
Activity (Maintenance/Turn Around/Refueling etc. Around Refueling etc.)										
Weather (if applicable)	Rain		Windy		Wet		Thunderstorm			
	Snow		Icing		Fog		Hail			
Light / Visibility	Day		Night		Poor		Satisfactory			
	Good									
Area of Occurrence	Hangar		Run-Up Bay		Ramp		Gate			
	Parking		Other specify							

SAFETY INFORMATION									
Does the organization have a safety management program?	Yes	No	Does the organization have a quality assurance program?	Yes	No	Has the organization recently been subject to an outside audit?	Yes	No	
Is there a safety department? If so, to whom does it report?	Yes	No	Report to? (CEO/Executive/etc.)	Has there been a formal hazard analysis of the operation?			Yes	No	

Section D: COMPLETED BY ALL – Give a detailed account of the event
Keeping in mind the topics shown below, discuss those that you feel are relevant and anything else you think is important. Include what you believe caused the problem and what can be done to prevent recurrence or correct the situation (use extra pages if needed).
What Happened?

Why did it Happen? (Optional)

Was it fixed? (Optional)

<b>Please provide us with physical evidence such as photographs, chart or diagrams</b>
Any Recommendations? (Optional)

<b>FOR OFFICE USE ONLY:</b>	
REFERENCE NO.:	Date Report Received:
<b>SUBMITTING YOUR REPORT</b> <u>FAX or EMAIL your report</u> This is an email-locked and secure fax-based system Fax us on 011-545-1453 or Email: <a href="mailto:cahrs@caa.co.za">cahrs@caa.co.za</a>  <u>You can also POST your report</u> Please fold pages, enclose in a sealed, stamped envelope and mail to: Confidential Aviation Hazard Reporting System Private Bag x73 Halfway House 1685 <b>FEEDBACK ON REPORTS AND CORRECTIVE ACTIONS TAKEN CAN BE VIEWED ON THE CAA WEBSITE:</b> <a href="http://www.caa.co.za">www.caa.co.za</a>	