

BMAA – ACCIDENT REPORT FORM

Reg: G- _ _ _ _	Type:	Time of Accident:	Date of Accident:
Location / Runway:	Owner of site (if known):	Names of any 3 rd parties suffering injury or property damage:	

What is a reportable accident?

A reportable accident is any occurrence associated with the operation of an aircraft which might take place between the time any person boards the aircraft with the intention of flight and such time as all persons have disembarked, in which:

(a) a person suffers a fatal or serious injury; (b) the aircraft sustains damage or structural failure which adversely affects its strength, performance or flight characteristics requiring a major repair or replacement; (c) the aircraft is missing or is completely inaccessible. It does not include engine failure or damage, when the damage is limited to the engine, its cowling or accessories. Damage limited to propellers, wing tips, antennae, tyres, brakes, fairings, small dents or punctured holes in the aircraft skin – although these can still be reported to the BMAA on the Incident report Form BMAA/AW/021 for others to learn from. All accidents must be reported to the UK Air Accidents Investigation Branch (AAIB) promptly by telephoning 01252 512299. Please report as much as you are able, even if parts of the reporting form are left blank – for the future safety of all aviators.

Pilot's Name:		BMAA No:
Address:		
Daytime phone:	Home phone:	Email:
License Type(s):	License No(s):	Ratings:
Total Flying Hours:	Hours PI:	Total Hours on Type:
Years Flying Experience:	Flying Hours last 90 days:	Flying Hours last 28 days:

Passenger / Student Name:		BMAA No:
Address:		
Daytime phone:	Home phone:	Email:
Flying Experience:		

Engine type / model:	Total engine hours:	Date and occasion of last engine service:
Propeller type:	Total airframe hours:	Date and occasion of last airframe service:

The aircraft was flying on a:	Permit to Fly, expiring on:	Form BMAA/AW/029 expiring on:
Manufacturers B-conditions certificate, expiring on:	CAA Permit to Test, expiring on:	Ground handling (no intention of flight, e.g. positioning on airfield for maintenance):

The following were witnesses to the accident	Name:	Name:
	Address:	Address:
	Tel:	Tel:

Please ring or complete the following:

The flight was a:	pleasure flight	dual training flight	solo training flight	test/check flight
The segment of flight was:	Take-off Local flying Other (explain)	Circuit Cross-country	Landing Taxiing	
The Visibility was:	Good (10km+)	Moderate (5-10km)	Poor (<5km)	
Precipitation was:	Rain	Snow	Hail	Drizzle
The cloud cover was:		(Type)	(Coverage)	(Cloudbase)
The wind was:			knots at	direction
Conditions were:	Turbulent	Gusty	Smooth	
Thermals were:	Severe	Moderate	Light	None
The following conditions were also relevant:				

Injuries to pilot were:	Nil	Minor	Serious	Fatal
Injuries to passenger were:	Nil	Minor	Serious	Fatal
Injuries to others were:	Nil	Minor	Serious	Fatal
Damage to aircraft was:	Nil	Minor	Moderate	Severe
Damage to property was	Nil	Minor	Serious	Severe

Narrative Report / Sketch of Accident:

Please feel free to attach further sheets.

In the reporters opinion, the following were contributory factors:

In the reporters opinion, the primary cause of the accident was:

DECLARATION BY PERSON MAKING REPORT

I declare that the foregoing information is correct to the best of my knowledge

Signed:	Name:	Date:
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If person making report is other than the pilot, instructor or passenger, please also give name, address and phone no.

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