



CIVIL AVIATION AUTHORITY OF BOTSWANA  
P. O. Box 250, Gaborone, Botswana Tel: +267 3688200 / 3688200 Fax +267 3930165

### FLIGHT SAFETY DIRECTORATE

## SERVICE DIFFICULTY AND MANDATORY OCCURRENCE REPORTING FORM

Use this form to report to the Authority in accordance with Airworthiness Regulation 3, AMO Regulation 33 and/or AOC Regulation 60.

AIRCRAFT INFORMATION																
AIRCRAFT MAKE, MODEL, AND SERIES		SERIAL NUMBER		REGISTRATION MARKS			AMO / OPERATOR			DATE		LOCATION / POSITION			TIME (UTC):	
FLIGHT NUMBER		ROUTE FROM		ROUTE TO			ALTITUDE			AIRSPEED		ETOPS <input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> DAY <input type="checkbox"/> NIGHT <input type="checkbox"/> TWILIGHT	
NATURE OF FLIGHT																
(Tick applicable box ) <input type="checkbox"/> Pax <input type="checkbox"/> Cargo <input type="checkbox"/> Positioning <input type="checkbox"/> Ferry <input type="checkbox"/> Test <input type="checkbox"/> Training <input type="checkbox"/> Business <input type="checkbox"/> Agriculture <input type="checkbox"/> Survey <input type="checkbox"/> Leisure <input type="checkbox"/> Club/Group <input type="checkbox"/> Private <input type="checkbox"/> Parachuting <input type="checkbox"/> Towing																
FLIGHT PHASE																
(Tick applicable box ) <input type="checkbox"/> Parked <input type="checkbox"/> Taxying <input type="checkbox"/> Take-off <input type="checkbox"/> Initial Climb <input type="checkbox"/> Climb <input type="checkbox"/> Cruise <input type="checkbox"/> Descent <input type="checkbox"/> Holding <input type="checkbox"/> Approach <input type="checkbox"/> Landing <input type="checkbox"/> Circuit <input type="checkbox"/> Aerobatics <input type="checkbox"/> Hover <input type="checkbox"/> Other:																
ENVIRONMENTAL DETAILS																
Wind		Cloud		Precipitation			Other Meteorological Conditions				RUNWAY STATE					
Direction	Speed - Knots	Type	H T	Rain	Snow	Hail	Visibility	Icing	Turbulence	OAT	Dry	Wet	Ice	Snow	Slush	
BRIEF TITLE OF SERVICE DIFFICULTY OR OCCURRENCE																
DESCRIPTION OF SERVICE DIFFICULTY OR OCCURRENCE																

## GROUND STAFF REPORT

AIRCRAFT ENGINE DETAILS		PROPELLER INFORMATION		EDTO APPROVED?		GROUND PHASE <i>(Tick applicable box below)</i>			
Make and Model: Serial Number:	Make & Model Serial Number	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Ground Handling <input type="checkbox"/>	Unattended <input type="checkbox"/>			
COMPONENT PART DESCRIPTION	MANUFACTURER	PART NUMBER	SERIAL NUMBER	MANUAL REF.	COMPONENT STATUS				
					New Overhauled etc.				
<b>DESCRIPTION OF OCCURRENCE</b> <i>(including defect location):</i>									
ORGANISATION AND APPROVAL REFERENCE	NAME	POSITION	SIGNATURE	DATE					
<b>REPORTING ORGANISATION – REPORT:</b> ORGANISATION COMMENTS - Assessment / Action taken / Suggestions to Prevent Recurrence									
AIRCRAFT UTILISATION				ENGINE COMPONENT UTILISATION				MANUFACTURER ADVISED?	
	Total	Since Overhaul/Repair	Since Inspection		Total	Since Overhaul/Repair	Since Inspection	YES	NO
Hours Cycles Landings				Hours Cycles Landings				<input type="checkbox"/>	<input type="checkbox"/>
ORGANISATION	TELEPHONE / FAX	REPORTER'S REF.	REPORT	REPORTER'S INVESTIGATION			FDR DATA RETAINED?		
			New Supplement <input type="checkbox"/> <input type="checkbox"/>	NIL	CLOSED	OPEN	YES	NO	
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
NAME	POSITION	SIGNATURE			DATE				