	Civil Aviation Authority of Sri Lanka **Voluntary and Confidential Aviation Incident Reporting Form**	**CAA/AU/007**

This form is not for reporting of accident, serious incidents or criminal activities. This could be used to report hazards, or safety deficiencies.

The completed form shall send to Director General of Civil Aviation, Civil Aviation Authority of Sri Lanka, No.152/1, Minuwangoda Road, Katunayake.

Date of Occurrence:	Location of Occurrence:

Aircraft Type:	Aircraft Registration:	Aircraft Operator:	Flight No:

Occupation:	Total Pilot hours, if applicable:	Non pilot aviation experience (yr/m):

Phase of flight (Please tick)

Standing	☐	Taxiing	☐	Take-off	☐
En-route	☐	Manoeuvring	☐	Approach	☐

Altitude:	Visibility:	Wind:	Cloud:

Please fully describe the occurrence (include your suggestions to prevent similar occurrences)

Your Name:		Date:
Address:		
Contact No:	Leave Message: Yes ☐ No ☐	Time of day to call:

For Official use by VCAIR Administrator only:

Administered by:	Date of return to reporter: