



Aircraft Accident/Incident Immediate Notification Form

☐ - **ACCIDENT (ACCID)**

☐ - **INCIDENT (INCID)**

Name of reporter:	Date:
Address:	Contact Nos.:

AIRCRAFT: Manufacturer, Type & Model:		Registration Marks:	Serial No.:
Name of Owner / Operator / Hirer:			
Name of Pilot-in-Command:		Nationality:	
Name of Crew(s):		Nationality:	
Name of Passenger(s):		Nationality:	
Date and Time of the Accident/Incident:		Last point of departure and point of intended landing of the aircraft:	
Position of aircraft with reference to some easily defined geographical point and latitude & longitude: (continue on separate sheet if necessary)			
INJURIES	CREW	PASSENGER	OTHERS
FATAL			
SERIOUS			
MINOR/NONE			
Brief description of the ACCID/INCID and the extent of damage to aircraft / indication of access difficulties or special requirements to reach the site / presence and description of dangerous goods on board the aircraft: (continue on separate sheet if necessary)			



Aircraft Accident/Incident Immediate Notification Form

NOTE:

1. This form could be used by any air operator, organization and or individual who has knowledge / witness any aircraft accident / incident.
2. Please enter NA for data that are not available and sent / transmit this form / data by the most expeditious means to any of the following:

OFFICE OF THE DIRECTOR GENERAL

Tel Nos. +632 8246-2001/+632 8246-2004
Email: odg@caap.gov.ph / odg.caap@gmail.com

AIRCRAFT ACCIDENT INVESTIGATION AND INQUIRY BOARD

Tel Nos. +632 8246-2020 / +632 8246-2021
Email: aaib@caap.gov.ph / caap.aaib2013@gmail.com

OPERATIONS CENTER

Civil Aviation Authority of the Philippines
Tel No. +632 8246-2234 / +632 8246-2235
Email: opcen@caap.gov.ph / opcencaap@gmail.com

Nearest CAAP, PNP and AFP Facilities

3. Any CAAP office who receives a copy of this report shall immediately send copies to the following:
 - a. Director General, CAAP
 - b. Head, AAIB
 - c. Operations Center, CAAP



Aircraft Accident/Incident Immediate Notification Form

INSTRUCTIONS

- 1) Write legibly and fill-out completely.
- 2) Use blue or black ink pens only.
- 3) Add additional pages or attachments if necessary.
- 4) Always write full name, date.
- 5) Ensure all signature lines are signed, even when submitted thru email or other online channels.

ITEM	DESCRIPTION
Name of Reporter	Full Name of Person filling out the form.
Address	Full Address of Reporter
Date	Date when the form is filled-out (dd/mm/yyyy).
Contact Number	Contact Number of Reporter
Aircraft Manufacturer & Model	Manufacturer, Type & Model of the aircraft involved
Registration Marks	Registration Number of the Aircraft involved
Serial No.:	Serial Number of Aircraft involved
Name of Operator/Owner/Hirer	Name of Operator/Owner/Hirer of the Aircraft involved
Name of Pilot-in-Command	Full Name of Pilot-in-Command of the Aircraft involved
Name of Crew/s	Full Name of Crew/s of the Aircraft involved
Name of Passenger/s	Full Name of Crew/s of the Aircraft involved
Nationality	Nationality of Pilot-in-Command, Crew/s, Passenger/s
Date and Time of Accident/Incident	Date and Time of Accident/Incident of the Aircraft involved
Last point of departure and point of intended landing of the aircraft	Last point of departure and point of intended landing of the aircraft involved
Position of aircraft	Position of aircraft with reference to some easily defined geographical point and latitude & longitude
Injuries	Number/s of fatalities/Injured on the aircraft/collateral damages
Brief description of the ACCID/INCID	Briefly describe the ACCID/INCID and the extent of damage to aircraft / indicate the difficulties to access or special requirements to reach the site / presence and description of dangerous goods on board the aircraft