

CONFIDENTIAL AVIATION HAZARD REPORTING SYSTEM (CAHRS)

Submitter's Details

Please fill in all blanks. This section will be destroyed, no record will be kept.

Name: _____ Surname: _____
 Phone Number: _____ E-mail Address: _____
 Postal Address: _____
 _____ Date: _____

Information contained in this report shall NOT be used to prosecute the reporter. The CAA will NOT take steps unless advised by the CAHRS Independent Advisory Board. All identities contained in this report will be removed to assure complete reporter confidentiality

To be completed by all

Select the applicable box and complete the sections affiliated to that section.

This report refers to:	Flight Operations	Cabin	Air Traffic	Ground Hazards	Engineering	Other
	Fill in sections A&D	Fill in sections A&D	Fill in sections B&D	Fill in section D	Fill in sections C&D	Fill in section D

The event:

Specify hazard type: _____
 Date of occurrence: _____ Location: _____ Time: _____

Section A: Flight Deck and Cabin Crew related Hazard Reports

Crew Position: _____ Crew Duty: _____
 Light/Visibility: Day Night Dawn Dusk
 Type of operation: Schedule Charter Corporate Other _____
 Type of aircraft (make/model): _____
 Flight Phase: Taxi Takeoff Climb Cruise Descent
 Approach Landing GA Missed Approach
Weather (if applicable):
 VMC IMC Ice Snow Mixed Turbulence
 Marginal Storm Rain Windshear Fog Other: _____

Section B: Air Traffic related Hazard Reports

Type of aircraft (make/model): _____
 Flight Phase: Taxi Takeoff Climb Cruise Descent
 Approach Landing GA Missed Approach
 Position of aircraft: Altitude _____ feet Distance and radial from airport: _____
 Type of flight VFR IFR SVFR None Unkown
 Flight Plan: _____
 Cloud/Visibility: Ceiling _____ feet Visibility _____ metres RVR _____ metres
 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
 None Unknown Nil Communications
 Ground Facility: Communications Navigation Surveillance

Section C: Engineering related Hazard Reports

Aircraft/Engine: _____

System/Component: _____

Activity (Maintenance/turn around/refuelling, etc): _____

Submitting your report

Fax and e-mail your report: This is an e-mail locked and secure fax based system.

Fax us on (011) 545 1453 or e-mail cahrs@caa.co.za

You can also post your report: Please fold pages, enclose in a sealed, stamped envelope and mail it to: Confidential Aviation Hazard Reporting System, Private Bag X73, Halfway House, 1685.

Section D: To be completed by all

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 really caused the problem and what can be done to prevent a recurrence, or correct the situation (use extra paper if needed).

Chain of events		Human Performance Considerations	
How the problem arose	How it was discovered	Perceptions	Decisions
Contributing factors	Corrective actions	Actions or inactions	Judgments
		Factors affecting the quality of human performance	

FOR OFFICE USE ONLY

Ref No: _____ Date report was received: _____

Corrective Action Recommended:

Corrective Action taken: _____ *Date:* _____
