Transportation Safety Board of Canada

Bureau de la sécurité des transports du Canada

Aviation Occurrence Reporting Form

From:

Name

Organization

E-mail Address

Telephone

Mailing Address

Fax

Aircraft

Registration

Nationality

Manufacturer

Model

Owner

Name; or

Organization

E-mail Address

Phone Number

Operator

Name; or

Organization

E-mail Address

Phone Number

Pilot-in-Command

Name

License Number

E-Mail Address

Phone Number

Flight Details

Flight Number

Departure Date

Departure

Intended Dest.

Actual Dest.

Occurrence Details

Occ. Date

Occ. Time

Occ. Location

Persons on Board

Total #

Flight Crew #

Cabin Crew #

Passengers #

Injuries

	Fatal	Serious	Minor	None
Flight Crew				
Cabin Crew				
Passengers				

Dangerous Goods on Board or Released from Aircraft?	☐ Yes ☐ No	Description	

Damage to Aircraft, Environment or Property?	☐ Yes ☐ No	Description or Extent	

Occurrence Summary / Description of Events

Post Occurrence Actions / Maintenance

Please send via email to the appropriate region below:

Pacific - airnotifications.vancouver@tsb-bst.gc.ca
Western - airnotifications.edmonton@tsb-bst.gc.ca
Central - airnotifications.winnipeg@tsb-bst.gc.ca
Ontario - airnotifications.toronto@tsb-bst.gc.ca
Quebec - airnotifications.montreal@tsb-bst.gc.ca
Atlantic - airnotifications.dartmouth@tsb-bst.gc.ca
International or Uncertain - airops@tsb-bst.gc.ca

Do you believe this report requires immediate attention by a TSB Investigator? ☐ Yes ☐ No