

Engine nos: 1
 2
 3
 4

Aerodrome
Aircraft Operator
Civil Aviation Authority
Bird Strike Avoidance Team (if identification required)

Propeller
Wing/rotor (inc high lift devices)
Fuselage
Landing Gear
Tail
Lights
Other (specify*)

Remarks and other relevant information*

Effect on flight
None Return
Aborted Diverted
Other

Reporter Details
Name: _____
Employer: _____

Telephone no.: _____
Date: ____/____/____

Other Reports raised
Mandatory Occurrence Report (MOR)
Other* (specify)