



# CONDOR MURPHY

## CONFIDENTIAL REPORT FORM

### GUARANTEE

Command Flight Safety Officers will copy your report and pass it to the Director, Directorate of Aviation Regulation & Safety (DARS). Before this report is passed to anyone else, Command Flight Safety Officers and DARS guarantee that your name and address will be removed. From then on your report will be anonymous.

Narrative.

Flight Safety matters are generally best addressed through your unit using normal Service channels or entered in the Flight Safety Log Book. Exceptionally, a mistake or error which would otherwise go unreported, may be reported directly to your Service CFSO (address overleaf) who guarantees that your anonymity will be preserved.

Please give a complete story of the situation. One way to include all the important facts in your report is to make sure you have answered the following questions: 1. What happened? 2. Why? 3. What did you do about it? 4. Any recommendations to prevent reoccurrence.

Use continuation sheets if necessary and post to the appropriate address overleaf.

It helps if the originator's name and unit are included, but neither is mandatory.

The table below indicates some other considerations. It is not exhaustive but contains many pertinent ingredients of past accidents/incidents.

Personal Details (Aircrew)	Aircraft type and Mk / Aircrew category Experience to nearest 100hrs: On type overall			
Personal Details (Ground Crew / Maintainers / Others)	Aircraft/Equipment type Length of time served / Length of time on unit / Trade / Class			
Air Occurrence	Height/FLI	Cockpit environment:	Personal problems	RC shortcomings
	Weather	Too hot? Too cold?	Time on duty when incident occurred	Cockpit layout
	Day/Night	Too noisy?	Other aircraft involvement	Briefing inadequacy
	IMC/VMC	Your state of health:	Air Traffic involvement	Workload when incident occurred
	Phase of flight	Tired? Hungry?		Aircraft unserviceabilities
	Manoeuvre	Hypnotic?		
	Weapon attack	Were you dazzled?		Misreading of instruments
	Speed	Were you distracted?		
	Formation			
Ground Occurrence	Time of year	Circumstances:	Place:	Workload when incident occurred?
	Time of day	Prep? Recovery?	Hangar? / Dispersal? Field Loc? / Ship?	Supervision inadequate?
	Conditions:	Exercise? Detachment?	Personal problems Manning / Short cuts	Length of time on duty
	Too hot? Too cold? Too noisy? Distracted?	Your state of health: Tired? Hungry? Hypnotic?	Training / Briefing / Experience Procedures / Orders / APs / Paperwork Damage / Danger / Injury Equipment / GSE / Tools	

Completed forms should be sent to the appropriate address below:

**RN Personnel**  
Personal for:  
The Officer in Charge  
RNFAIC  
RNAS Yeovilton  
Yeovil  
Somerset  
BA22 8HT

**Army Personnel**  
Personal for:  
SO1 FSS  
AFSSI  
Middle Wallop  
Stockbridge  
Hants  
SO20 8HD

**RAF Personnel**  
Personal for:  
CASO (OPS)  
RAF ASG  
HQ Air Command  
RAF High Wycombe  
Buckinghamshire  
HP14 4UE

**MoD Civilians and all MoD Contracted Civilian Personnel**  
(From 28/04/08)  
Personal for:  
DARS  
Bldg TW6A  
RAF Northolt  
West End Rd, Ruislip  
HA4 6NG

Name and Rank .....

Address ..... Tel no. ....