



BIRD/OTHER WILDLIFE STRIKE REPORT

| | | | | | | | |
|--|--|-----------------------------------|--|--|------------------------------|--------------------------|--|
| | | BIRD/OTHER WILDLIFE STRIKE REPORT | | | | | |
| 1. Name of Operator | 2. Aircraft Make/Model | | 3. Engine Make/Model | | | | |
| 4. Aircraft Registration | 5. Date of incident | | 6. Local Time of incident | | | | |
| | ____ / ____ / ____ Month Day Year | | | <input type="checkbox"/> Dawn <input type="checkbox"/> Dusk ___HR ___ MN <input type="checkbox"/> Day <input type="checkbox"/> Night <input type="checkbox"/> AM <input type="checkbox"/> PM | | | |
| 7. Airport Name | 8. Runway Used | | 9. Location if En Route | | | | |
| 10. Height (AGL) | 11. Speed (IAS) | | (Nearest town/reference and governorate) | | | | |
| 12. Phase of Flight | 13. Part(s) of Aircraft Struck or Damaged | | | | | | |
| | | Struck | Damaged | | Struck | Damaged | |
| <input type="checkbox"/> A. Parked <input type="checkbox"/> B. Taxi <input type="checkbox"/> C. Take-off Run <input type="checkbox"/> D. Climb <input type="checkbox"/> E. En Route <input type="checkbox"/> F. Descent <input type="checkbox"/> G. Approach <input type="checkbox"/> H. Landing Roll | A. Radome | <input type="checkbox"/> | <input type="checkbox"/> | H. Propeller | <input type="checkbox"/> | <input type="checkbox"/> | |
| | B. Windshield | <input type="checkbox"/> | <input type="checkbox"/> | I. Wing/Rotor | <input type="checkbox"/> | <input type="checkbox"/> | |
| | C. Nose | <input type="checkbox"/> | <input type="checkbox"/> | J. Fuselage | <input type="checkbox"/> | <input type="checkbox"/> | |
| | D. Engine No.1 | <input type="checkbox"/> | <input type="checkbox"/> | K. Landing Gear | <input type="checkbox"/> | <input type="checkbox"/> | |
| | E. Engine No.2 | <input type="checkbox"/> | <input type="checkbox"/> | L. Tail | <input type="checkbox"/> | <input type="checkbox"/> | |
| | F. Engine No.3 | <input type="checkbox"/> | <input type="checkbox"/> | M. Lights | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | | | N. Other: | | |
| | | | | | (Specify if "N " is checked) | | |
| | | | | | | | |
| | | | | | | | |

| | | | | |
|--|-------------------|---|--------------------------|---|
| | G. Engine No.4 | | | |
| 14. Effect of Flight | | 15. Sky Condition | | 16. Precipitation |
| <input type="checkbox"/> None <input type="checkbox"/> Aborted Take-Off <input type="checkbox"/> Precautionary Landing <input type="checkbox"/> Engines Shut Down <input type="checkbox"/> Other: (Specify) | | <input type="checkbox"/> No Clouds <input type="checkbox"/> Some Clouds <input type="checkbox"/> Overcast | | <input type="checkbox"/> Fog <input type="checkbox"/> Rain <input type="checkbox"/> Snow <input type="checkbox"/> None |
| 17. Bird/Other Wildlife Species | | 18. Number of Birds / Other Wildlife seen and/or struck | | 19. Size of Bird(s) seen and/or struck |
| | | Number | Seen | Struck |
| | | 1 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 2-10 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | 11-100 | <input type="checkbox"/> | <input type="checkbox"/> |
| | | more than 100 | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Pilot warned of Birds | | <input type="checkbox"/> yes <input type="checkbox"/> No | | |
| 21. Remarks (Describe damage, injuries and other pertinent information) | | | | |
| DAMAGE / COST INFORMATION | | | | |

| | | |
|--|--|---|
| 22. aircraft time out of service: _____ hours | 23. Estimated cost of repairs or replacement (JD) JD | 24. Estimated other costs (JD) (e.g. loss of revenue, fuel, hotels): JD |
| Reported by (Optional) | Title | Date |