**DANGEROUS GOODS OCCURRENCE REPORT FORM**

|  |
| --- |
| DETAILS OF FLIGHT |
| **1. OPERATOR:** | **2. DATE OF OCCURRENCE:** | **3. TIME OF OCCURRENCE:** |
|  |  |  |
| **4. FLIGHT DATE:** | **5. FLIGHT NUMBER:** |
|  |  |
| **6. DEPARTURE AIRPORT:** | **7. DESTINATION AIRPORT:** |
|  |  |
| **8. AIRCRAFT TYPE:** | **9. AIRCRAFT REGISTRATION:** |
|  |  |
| DETAILS OF OCCURRENCE |
| **10. LOCATION OF OCCURRENCE:** |
| **12. DESCRIPTION OF OCCURRENCE (INCLUDING DETAILS OF DAMAGE, INJURY ETC):** |
|  |
| DETAILS OF DANGEROUS GOODS |
| **13. ORIGIN OF GOODS:** |
|  |
| **14.PROPER SHIPPING NAME:** | **15. UN/ID NUMBER:** |
|  |  |
| **16. CLASS/DIVISION:** | **17. SUBSIDIARY RISK:** | **18. PACKING GROUP:** | **19. CATEGORY (CLASS 7):** |
|  |  |  |  |
| **20. TYPE OF PACKAGING** | **21. PACKAGING SPECIFICATION MARKING:** | **22. NUMBER OF PACKAGES:** | **23. QUANTITY:** |
|  |  |  |  |
| **24.NAME & ADDRESS OF SHIPPER:** |
|  |
| **25. OTHER RELEVANT INFORMATION (AIRWAYBILL NUMBER, PASSENGER NAME/TICKET NUMBER ETC)** |
|  |
| DETAILS OF REPORTER |
| **26. NAME & TITLE OF PERSON MAKING THE REPORT:** | **27. TELEPHONE NUMBER:** |
|  |  |
| **28. REPORTER’S REFERENCE:** |
|  |
| **29. COMPANY:** | **31. SIGNATURE:** |
|  |
| **30. ADDRESS** |
| **32. DATE:** |

NOTES ON COMPLETING DANGEROUS GOODS OCCURRENCE REPORT FORM:

1. Any type of dangerous goods occurrence must be reported, irrespective of whether the dangerous goods are contained in cargo, mail or baggage.
2. A dangerous goods **accident** is an occurrence associated with and related to the transport of dangerous goods which results in fatal or serious injury to a person or major property damage. A dangerous goods accident may also be an aircraft accident; in which case the normal procedure for reporting of air accidents must be followed.

*For this purpose serious injury is an injury which is sustained by a person in an accident and which: (a) requires hospitalisation for more than 48 hours, commencing within 7 days from the date the injury was received; or (b) results in a fracture of any bones (except simple fractures of fingers, toes or nose); or (c) involves lacerations which cause severe haemorrhage, nerve, muscle or tendon damage; or (d) involves injury to any internal organ; or (e) involves second or third degree burns, or any burns affecting more than 5% of the body surface; or (f) involves verified exposure to infectious substances or injurious radiation.*

1. A dangerous goods **incident** is an occurrence, other than a dangerous goods accident, associated with and related to the transport of dangerous goods, not necessarily occurring on board an aircraft, which results in injury to a person, property damage, fire, breakage, spillage, leakage of fluid or radiation or other evidence that the integrity of the packaging has not been maintained. Any occurrence relating to the transport of dangerous goods which seriously jeopardises the aircraft or its occupants is also deemed to constitute a dangerous goods incident.
2. This form should also be used to report any occasion when undeclared or mis-declared dangerous goods are discovered in cargo, mail or unaccompanied baggage or when accompanied baggage contains dangerous goods which passengers or crew are not permitted to take on aircraft.
3. An initial report, which may be made by any means, must be despatched within 72 hours of the occurrence, to the Falkland Islands Civil Aviation Department. This occurrence report form, duly completed, must be sent as soon as possible, even if all the information is not available.
4. Copies of all relevant documents and any photographs should be attached to this report.
5. Providing it is safe to do so, all dangerous goods, packaging, documents, etc, relating to the occurrence must be retained until after the initial report has been sent to the Department of Civil Aviation and they have indicated whether or not these should continue to be retained.