

Voluntary Aviation Safety Reporting System

DO NOT REPORT AIRCRAFT ACCIDENTS AND CRIMINAL ACTIVITIES ON THIS FORM.

ACCIDENTS AND CRIMINAL ACTIVITIES SHALL BE REPORTED I.A.W. THE REQUIREMENTS OF THE CARS!

ALL IDENTITIES CONTAINED IN THIS REPORT WILL BE REMOVED TO ASSURE COMPLETE REPORTER ANONYMITY.

(SPACE BELOW RESERVED FOR CASAS DATE/TIME STAMP) IDENTIFICATION STRIP: Please fill in all blanks to ensure return of strip. NO RECORD WILL BE KEPT OF YOUR IDENTITY. This section will be returned to you. TELEPHONE NUMBERS where we may reach you for further details of this occurrence: HOME No. __ Hours __ WORK No. _____ Hours _____ _____ TYPE OF EVENT/SITUATION _____ NAME ADDRESS/POBox ____ DATE OF OCCURRENCE __ LOCAL TIME (24 hr. clock) COUNTRY PLEASE FILL IN APPROPRIATE SPACES AND CHECK ALL ITEMS WHICH APPLY TO THIS EVENT OR SITUATION. REPORTER In what type of facility do you work? ☐ Tower ☐ Approach ☐ Center ☐ Other __ Describe your ATC qualifications. ☐ FPL ☐ Developmental Time certified on position/sector: ___ What is your ATC experience in years? radar limited radar non-radar military supervisor What was your control position or activity ☐ local □ arrival ☐ clrnc delivery ☐ pre-flight radar supervisor hand-off ground during the occurrence? (Check all that ☐ departure ☐ coordinator ☐ in-flight ☐ monitor apply for combined position) ☐ radar assoc ☐ assistant ☐ data ☐ manual ☐ flight watch other Was instruction a factor? I was instructing ☐ I was receiving training ☐ yes ☐ instrument rated Do you have pilot experience? ☐ no yes, _ hours WEATHER LIGHT/VISIBILITY AIRSPACE ☐ Class A ☐ VMC ☐ Special Use Airspace ПІсе □ Daylight ■ Night Class B Airway/Route _ ☐ IMC ☐ Snow ☐ Dawn ☐ Dusk ☐ Class G Unknown ☐ Mixed ☐ Turbulence Ceiling_ feet ☐ Thunderstorm Visibility__ ☐ Other _ ☐ Marginal miles Rain RVR _ Windshear feet □Fog AIRCRAFT 1 AIRCRAFT 2 Type of Aircraft (Make/Model) (Make/Model) □ Corporate ☐ Air carrier □ Corporate Operator ☐ Air carrier ☐ Military ■ Military □ Commuter □ Private ☐ Other ☐ Commuter ☐ Private ☐ Other ☐ Passenger □ Training ☐ Business ☐ Passenger ☐ Training ☐ Business Mission ☐ Unk/Other □ Pleasure ☐ Unk/Other ☐ Cargo ☐ Pleasure □ Cargo □ VFR ☐ SVFR ☐ None □ VFR ☐ SVFR ☐ None Flight plan ☐ IFR □ DVFR ☐ Unknown ☐ IFR □ DVFR ☐ Unknown ☐ Cruise Flight phases at □ Taxi □ Taxi ☐ Cruise □ Landing □ Landing ☐ Descent ☐ Missed Apch/GAR time of occurrence Takeoff ☐ Takeoff ☐ Descent ☐ Missed Apch/GAR ☐ Climb ☐ Approach ☐ Other _ □ Approach □ Other _ ☐ Climb ☐ Visual Apch☐ On Vector ☐ On SID/STAR ☐ On SID/STAR **Control status** ☐ Visual Apch☐ On Vector Controlled None ☐ Unknown ☐ Controlled ☐ None ☐ Unknown ☐ No radio □ Radar Advisories □ Radar Advisories ☐ No Radio If more than two aircraft were involved, please describe the additional aircraft in the "Describe Event/Situation" section. LOCATION **CONFLICTS** Altitude ☐ MSL ☐ AGL Estimated miss distance in feet: horiz Distance and radial from airport, NAVAID, or other fix Was evasive action taken? ☐ Yes □ No ☐ Yes Was TCAS a factor? □ No Nearest City/State _ **Did Conflict Alert Activate?** ☐ Yes □ No

VOLUNTARY AVIATION SAFETY REPORTING SYSTEM

I.a.w. the requirements of Civil Aviation Regulations of Suriname (CARS) Part 14 the CASAS has established a Voluntary Aviation Safety Reporting System in order to identify issues in the aviation system of our country that need to be addressed. Your assistance in informing us about such issues is essential to the success of this system. Please fill out the form as completely as possible and send it to the attention of the CASAS - VASRS at the CASAS office located at Zorg & Hoop Airfield, Paramaribo, Suriname or e-mail it to ${\underline{\sf VASRS@casas.sr}}$.

The information provided on the identity strip will be used only if it is determined that it is necessary to contact you in order to obtain additional and useful information that may be required to further analyze the issue reported by you. The report will not be utilized to initiate enforcement action for violations of the Civil Aviation Regulations of Suriname.

THANK YOU FOR YOUR CONTRIBUTION TO AVIATION SAFETY

CASAS – VOLUNTARY AVIATION SAFETY REPORTING SYSTEM **ZORG & HOOP AIRFIELD, POBOX 12587**

PARAMARIBO, SURINAME

DESCRIBE EVENT/SITUATION Keeping in mind the topics shown below, discuss those which you feel are relevant and anything else you think is important. Include what you believe really caused the problem, and what can be done to prevent a recurrence, or correct the situation. (USE ADDITIONAL PAPER IF NEEDED) CHAIN OF EVENTS **HUMAN PERFORMANCE CONSIDERATIONS**

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How the problem arose - How it was discovered Contributing factors - Corrective actions

- Perceptions, judgments, decisions - Actions or inactions

- Factors affecting the quality of human performance

DESCRIBE EVENT/SITUATION, continued			
	Extra	nago	
CHAIN OF EVENTS - How the problem arose - How it was discovered	EAUA		HUMAN PERFORMANCE CONSIDERATIONS - Perceptions, judgments, decisions - Actions or inactions
- Contributing factors - Corrective actions		- F	actors affecting the quality of human performance