

Safety Report

Note: Completing this safety report does not release you from the obligation to accidents/ incidents/ malfunctions in accordance with § 7 LuftVO and §9 and §10 LuftVO.

Type of accident/incident/safety notice/serious incident

Accident
Near accident
Safety note
(Operational) serious disruption

Date and time (local time) of the accident/incident

Date, time
In daylight/bright
In the dark

Location of the incident/event

„EAST“ Apron (A1 - A6)	Building, room
„NORTH“ Apron	Southern operating zone
„WEST“ Apron	Other location

Weather conditions during the accident/incident

Precipitation type	Surface	View
Rain	Dry	Good
Snow	Wet	Medium
Hail	Smooth	Bad
Fog	Muddy	

Wind in kt and wind direction

Technology involved

Aircraft type	Vehicle
Aircraft registration	Device/Other

Persons involved

Surname, first name
Company/Department
Telephone, mobile phone number, e-mail

Name of reporting party with contact details (telephone, mobile phone, e-mail, *voluntary)

Description of the incident: defect, condition, note

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Contact details of the SMS office

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