



# Jamaica Civil Aviation Authority

Flight Safety Division  
4 Winchester Road - Kingston 10 – Jamaica

## Mandatory Occurrence Report

Operator/Co. \_\_\_\_\_ Co. Ref. # \_\_\_\_\_

### General

Registration	Aircraft Model	Date of Occurrence (d-m-y)	Location	Time (UTC)
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### Flight Info

Flight No.	Route From	Route To	Altitude	IAS (Kts)	ETOPS Y Yes Y No
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### Nature of Flight (check all that apply)

Y Pax (Com)	Y Cargo (Com)	Y Aerial Work	Y Towing	Y Parachute	Y Training	Y Ferry	Y Test	Y Pvt.
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### Flight Phase

Y Parked	Y Taxi	Y Take-off	Y Climb	Y Cruise	Y Descent	Y Hold	Y Appr	Y Land	Y Circuit	Y Aerobatics
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### Environment

Wind		Cloud			Precipitation (circle)				Conditions (circle)		Runway			
Dir	Speed	Height	8ths	Vis	Rain	Snow	Sleet	Hail	Ice	Turb	YDry	YWet	YIce	YSnow
					l / m / hvy				l / m / h	l / m / h	Category: Y I Y II Y III			

### Ground Staff Report

Aircraft S/N	Engine Model	ETOPs Approved Y Yes Y No	Ground Phase: Y Ground Handling Y Maintenance Y Unattended
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### Aircraft

Total Hours	Total Landings	Last Check		AMO
		Type:	Hours:	

### Equipment Details

Component	Position	Manufacturer	Part No.	Serial No.	Component Repair Agency	
ATA Code	TSN	CSN	TSO	CSO	Manual Ref	Condition of Component

**Enter Details Of Nature Of The Incident / Occurrence On The Back Of This Form**

**This MOR has been copied to the following:**

<b>Regulatory Authorities:</b>	
<b>Manufacturers:</b>	
<b>Overhaul Facilities:</b>	
<b>Suppliers:</b>	

- Type or Print ONLY -

**Description** : Full Description Of Occurrence or Service Difficulty:

**Short Term Action** : State immediate action to eliminate danger to personnel, aircraft or equipment:

**Long Term Action**: State action taken to prevent re-occurrence in the future:

**Status:** Open Y Closed Y

Remarks: \_\_\_\_\_

Reported by (print name): \_\_\_\_\_ Tel No: \_\_\_\_\_

Organization: \_\_\_\_\_ Position Held: \_\_\_\_\_

Signature: \_\_\_\_\_ Date (d-m-y): \_\_\_\_\_

----- JCAA Use Only -----

Closed Y Open Y – Assigned to Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

JCAA Ref. # \_\_\_\_\_ Assigned by: \_\_\_\_\_