

CHAPTER 8

Airspace Conflicts

I. Introduction

Federal Aviation Regulations establish a safe environment for all aircraft operating within the National Airspace System (NAS). It is imperative that users have an understanding of the regulations applicable to the airspace in which flights are being conducted. These requirements should be understood and adhered to by all pilots. Conflicts often occur in which aircraft are observed operating outside of established regulations. The FAA investigates aircraft incidents, collects and analyzes aircraft incident reports in order to provide a source of accident prevention information as required by Federal Aviation Administration Orders (FAAO 8020.11).

The land management agencies, as users of the NAS, have a responsibility to identify and report incidents to assist in the resolution of airspace conflicts. When a conflict or incident occurs, it may indicate a significant aviation safety hazard. Reports should be clear, concise and factual.

Primary reports of airspace safety incidents are done through the respective agency mishap, incident or Safety Communication (SAFECOM) reporting system. The agency Aviation Safety Manager or Airspace Coordinator may determine whether the incident warrants official submission to the FAA for investigation.

II. Defining or Reporting Situations of Unsafe Aircraft Operations

A. Near Midair Collision (NMAC)

A Near Midair Collision is defined in the Airman's Information Manual (AIM page 7-6-3) as "an incident associated with the operation of an aircraft in which the possibility of collision occurs as a result of proximity of **less than 500 feet to another aircraft**, or a report is received from a pilot or a flight crew member stating that a **collision hazard existed** between two or more aircraft".

FIGURE 8-1 Example of a Near Mid Air



The Air Force refers to their Near Midair incidents as Hazardous Air Traffic Reports (HATRs); the Army uses Operational Hazard Reports (OHRs). The Navy and Marine Corps facilities use the term NMAC.

A NMAC is not the same as a Pilot Deviation. However, some incidents, such as a TFR intrusion, may require that both types of reports be filed.

B. Pilot Deviation Reports

Pilot Deviation Reports are used to document other incidents that are violations of the Federal Aviation Regulations and create an unsafe situation. The following are types of incidents that are treated by the FAA as a Pilot Deviation.

1. Operation of an aircraft in a careless or reckless manner (14CFR 91.13)
2. Airplanes flying below 500' AGL unless in sparsely populated areas or over water (14CFR 91.119)
3. TFR intrusions (14CFR 91.137), which are occurrences of non-participating aircraft entering a TFR without permission (with exceptions for law enforcement flights, airport traffic, IFR traffic and accredited media)
4. Flight operations in restricted/prohibited areas (14CFR 91.133)
5. Non-compliance with standard or acceptable airport operations (14CFR 91.127)
6. Aircraft not operating within the parameters of their special-use airspace, e.g. Military Operating Areas (MOAs), Restricted Areas (RAs) or Military Training Routes (MTRs) (14CFR 91.117, FAAO 7610.4)
7. Although not a report to the FAA, non-compliance with joint-use scheduling as outlined in Memorandums of Understanding (MOUs), Letters of Agreement (LOAs), or Operations Plans should be reported to the appropriate Military Representatives (MILREPs) or other coordinating military representative(s)

III. NMAC Reporting

The primary purpose of the NMAC Reporting Program is to provide information that will enhance the safety and efficiency of the National Airspace System. Data ob-

tained from NMAC reports are used by the FAA to improve the quality of FAA services to users and to develop programs, policies and procedures aimed at the reduction of NMAC occurrences.

All NMAC reports are thoroughly investigated by Flight Standards District Offices (FSDOs) in coordination with Air Traffic Control (ATC) facilities. Data from these investigations are transmitted to FAA Headquarters in Washington, DC, where they are compiled and analyzed, and where safety programs and recommendations are developed.

Notification should be made immediately or as soon as possible after any unsafe incident occurs. Whenever possible, the written report should be received by the responsible FSDO within 15 (calendar) days to ensure all FAA flight records are available. Normally ATC records used to identify aircraft (e.g. flight plans, flight strips, radar and radio tapes) are only kept for 15 days. Late submission of a report may result in limiting the FSDOs ability to complete the investigation.

IV. Aircraft Identification

Usually the first step of reporting an unsafe aircraft situation is to identify the involved aircraft. The FAA and/or DoD, as applicable, need a positive identification of the aircraft involved to perform a complete investigation of an airspace incident. Although the aircraft registration number is the best method of obtaining positive identification, often the aircraft is moving too fast to read the identification numbers. Military aircraft normally have some markings but generally the speeds flown by jets will make these almost impossible to read.

Document as much information as available (e.g. direction of flight, altitude, etc.) and relay as soon as possible to the Agency Dispatcher or Aviation Manager. The more information provided by the observer, the greater the likelihood that identification can be obtained, resulting in a successful investigation.

A. Aircraft Incident Observation Checklist

The Aircraft Incident Observation Checklist (Figure 8-3) is provided as an aid to agency personnel in the gathering of incident information.

This Checklist assists personnel in describing an aircraft so that it may be identified. It can be used by an observer to fill in information, or by off-site personnel to ask questions and develop a description.

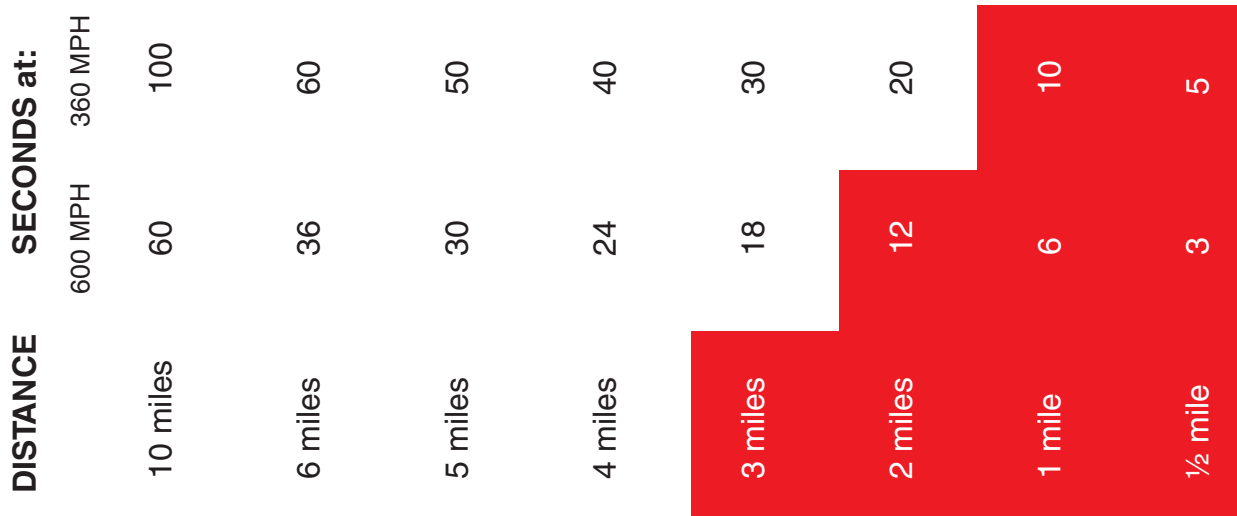
Incorrect aircraft identification may hamper the FAA or military's ability to determine the actual aircraft involved in the incident. Unless this identifica-

FIGURE 8-2 Near Midair Collision Analysis

CRITICAL SECONDS

Move back 12 feet from the illustration. From that position the silhouettes represents a T-33 aircraft as it would appear to you from the distances indicated in the on the left. The time required to cover these distances is given in seconds for *combined speeds*.

The blocks on the lower left mark the danger area for the speeds quoted. This danger area is based on the reaction times shown below.



see object	0.1
recognize a/c	1.0
become aware of collision course	5.0
decision to turn left or right	4.0
muscular reaction	0.4
aircraft lag time	2.0
TOTAL	12.5

RECOGNITION AND REACTION TIMES
FROM US NAVY AVIATION SAFETY BULLETIN

FIGURE 8-3 Near Midair Checklist

AIRCRAFT INCIDENT OBSERVATION CHECKLIST		
Location: _____ By: _____ Date: ___/___/___		
GENERAL		
<input type="checkbox"/> Date and time of the incident _____		
<input type="checkbox"/> Type of incident: NMAC, TFR Intrusion or other (include description of events) _____ _____		
<input type="checkbox"/> Weather conditions _____		
<input type="checkbox"/> Incident location _____		
<input type="checkbox"/> Altitude(s) and direction of flight _____		
TYPE AIRCRAFT		
<input type="checkbox"/> Jet (number and location of intakes) _____		
<input type="checkbox"/> Prop (number and location of propellers) _____		
<input type="checkbox"/> Helicopter (number and location of rotors) _____		
<input type="checkbox"/> Other (i.e. balloon, ultralight, hang glider, etc.) _____		
<input type="checkbox"/> Unknown		
ADDITIONAL DESCRIPTION		
<input type="checkbox"/> Readable markings and side numbers _____ _____		
<input type="checkbox"/> Color scheme _____		
<input type="checkbox"/> High wing versus low wing (refers to wing placement on main body) _____		
<input type="checkbox"/> Landing gear (wheels): retractable or fixed gear (usually gear visible in-flight is fixed)		
<input type="checkbox"/> Number of Tails _____		
<input type="checkbox"/> Other distinctive configuration _____ _____ _____ _____		
OTHER COMMENTS		

tion is without doubt, encourage reporting personnel to provide generic descriptions to substitute or supplement the checklist information.

B. Aircraft Profile Identification Guide

Use of an aircraft profile identification guide can assist in swiftly identifying the type of aircraft. Many published guides are available at local bookstores.

C. Radar Identification

Real-time aircraft identification from FAA radar facilities is possible only if the occurrence is reported immediately, and the FAA is tracking the aircraft. The Dispatcher or Aviation Manager should contact the local Air Route Traffic Control Center (ARTCC) or Terminal Radar Approach Control (TRACON) and explain the nature of the incident, along with all available information from the observation report. Request identification of the aircraft involved and include this information in the written report. (NOTE: In some areas ARTCC radar coverage may be limited to higher altitudes and TRACONs should be contacted for information on low altitude traffic).

Even if the conflict is immediately reported, standard conflict reporting processes to the FSDO should be followed. The report should be processed through the FSDO by the agency Aviation Safety Manager or Airspace Coordinator.

V. Agency Reporting and Documentation Requirements

All incidents involving aircraft shall be reported and recorded as a SAFECOM or other appropriate mishap or incident report, in accordance with agency policy and reporting procedures. The Aircraft Conflicts Action Checklist (Figure 8-4) is designed to assist in processing SAFECOMs.

A. Initial Response/Action

The initial report should be recorded by the aircraft passenger, pilot, crew or ground observer on a SAFECOM, detailing pertinent information that will support the agency notice to the FAA. SAFECOM submissions may be made through either the USFS (www.fs.fed.us/r6/fire/av_safety) or through DOI (www.oas.gov). The future combined website (currently under construction) will be www.safecom.gov.

1. Upon receipt of an initial airspace conflict report, the Unit Dispatcher or Aviation Officer should immediately contact the FAA ARTCC/ TRACON and request a positive identification of the aircraft involved.
2. When possible, immediate reports should be forwarded to the FAA within 15 minutes of the incident.
3. If the occurrence involves a military aircraft and there is the potential for a recurrence, immediately contact the military airspace scheduling activity responsible for flight in the area of operations. If necessary cease all agency aviation activities until the safety issue is resolved.
4. With aircraft operating at different speeds, it's possible that all pilots involved may not see a close call between two or more aircraft. Feedback to DoD is important to bring this to their attention.

B. Formal Reporting

1. NMAC Reports

An FAA Near Midair Collision (NMAC) report should be submitted for all incidents that meet the definition. The pilot of the aircraft reporting the incident should complete Blocks A-E on the NMAC form.

It is the responsibility of the pilot and/or flight crew to determine whether a Near Midair Collision situation actually occurred and, if so, to initiate an NMAC report. For the initial report, the pilot/crew should notify the nearest Air Traffic facility on the ATC frequency while airborne, or by phone immediately after landing.

2. Pilot Deviation Reports

Any authorized personnel using information from ground and/or airborne observers may make reports of Federal Aviation Regulation deviations and other unsafe operations.

Items to be reported are as follows:

- a. Date, time (UTC), location and altitude of the occurrence.
- b. Location of the incident in relation to the nearest navigation fix or ATC facility.

- c. Identification and type of reporting aircraft, destination, name and home base of pilot.
- d. Identification and type of other aircraft. If known, include aircraft departure or arrival point and name and home base of pilot.
- e. Type of flight plans and station altimeter setting used.
- f. Detailed weather conditions at altitude or flight level.
- g. Approximate courses of aircraft involved; indicate if either aircraft were climbing or descending.

The following three items are also reported for NMAC:

- a. Reported separation in distance at first sighting, proximity at closest point horizontally and vertically, and length of time in sight prior to evasive action.
- b. Degree of evasive action taken, if any (by either aircraft, if possible).
- c. Injuries, if any.

An agency SAFECOM Report, with NMAC documentation, should be sent to identified agency submission points. Concurrently with standard agency incident/hazard reporting procedures, the State, Area or Regional Aviation Manager should process instances of airspace conflicts through the local FAA FSDO, with a courtesy copy to the FAA Regional Headquarters Quality Assurance Office.

If an NTAP (defined by ARTCC as a "radar documentation of flight") is required, the Aviation Safety Manager will need to submit a Freedom of Information Act (FOIA) request to the FAA Regional Headquarters Quality Assurance Office. The request must be made as soon as possible after the incident as the NTAP information is perishable.

The Aviation Safety Manager should submit the communication as a formal report, requesting that the FAA conduct an investigation. At the time of the report, make it known that follow-up and feedback is desired on the progress and eventual outcome of the FAA's investigation.

C. FAA Investigation

1. The FAA office responsible for the investigation and reporting of NMACs and Pilot Deviations will be the FSDO in whose area the incident occurred.
2. FAAO 8020.11 defines FAA investigation responsibilities. The FSDO investigator will categorize NMAC cases as one of the following:
 - a. Critical - a situation in which collision avoidance was due to chance rather than a pilot's actions. Less than 100 feet of aircraft separation is considered critical.
 - b. Potential - a situation that would probably have resulted in a collision if no action had been taken by either pilot. Less than 500 feet of aircraft separation is usually required in this case.
 - c. No Hazard - a situation in which direction and altitude have made a Midair collision improbable, regardless of evasive actions (FAAO 8020.11).
3. The FAA, in response to its investigation, may choose to interview the pilot, crew members, on scene personnel, dispatcher, etc. Documentation of the incident is essential to the investigation.

D. Follow Through

The need for follow through on all airspace issues is critical to both investigation and resolution of past occurrences and the prevention and avoidance of future situations.

1. If military aircraft were involved, contact the military airspace scheduling activity and inform them of actions taken with the ARTCC and FSDO. Contact should also be made with the appropriate MILREP at FAA Regional Office Headquarters.
2. If warranted, contact the National Aviation Safety Manager and Airspace Coordinators and provide a copy of the SAFECOM.
3. It is important that these issues be resolved in the interest of preventing future occurrences. For that reason the Aviation Manager should periodically check with the FSDO to determine the status (i.e., continuation, closure) of the investigation.

FIGURE 8-4 Airspace Conflict Checklist

AIRSPACE CONFLICTS ACTION CHECKLIST (ALWAYS FOLLOW AGENCY PROCEDURES)
SUGGESTED STEPS TO BE TAKEN IF:
THERE IS AN INTRUSION WITHIN A TFR
<input type="checkbox"/> Have contact provide as much information as possible (Use Aircraft Observation Report) for more information.
<input type="checkbox"/> Contact local ARTCC and report intrusion to Area Manager immediately. Fax Aircraft Observation Report or Intrusion Report to FAA.
<input type="checkbox"/> If DoD aircraft are involved, contact the following: If a MTR is located within the TFR: Contact the Scheduling Activity listed in the AP1/B (or use CAHIS/IAMS for phone number) If a MOU/SUA is located within the TFR: Contact the Scheduling Authority (Consult Sectional for identification of Scheduling Authority—many times it is the local ARTCC) If you do not have access to an AP1/B, CAHIS/IAMS/CAN or a Sectional, contact your local ARTCC for assistance in identifying the scheduling office.
<input type="checkbox"/> Explain the situation to both the FAA and, if necessary, DoD. Provide NOTAM information for TFR. Ask if any further flights are scheduled within the area. Discuss safety issues and renew efforts to deconflict airspace. Document all conversations.
<input type="checkbox"/> If safety is compromised, shut down operations until airspace is safe to work within. Do NOT use intimidation or risky flying to try to encourage aircraft to leave the area. Pull out of the area if safety is compromised.
<input type="checkbox"/> Obtain documentation and file SAFECOMs.
THERE IS A NEAR MID AIR COLLISION (NMAC) INVOLVING:
NOTE: FOR ALL NMACs REFER PILOT TO FAA IF THEY WISH TO FILE A NMAC REPORT.
<u>AGENCY AIRCRAFT AND AGENCY AIRCRAFT</u>
<input type="checkbox"/> Shut down operations if safety is compromised.
<input type="checkbox"/> Obtain documentation and file SAFECOM. Provide additional witness reports, radio logs, etc., if needed.
<input type="checkbox"/> Discuss airspace procedures, TFRs, etc., during pilots' briefings (and debriefings). Be sure that TFR information is shared with local agencies and other cooperating agencies involved in incident.
<u>AGENCY AIRCRAFT AND DOD AIRCRAFT</u>
<input type="checkbox"/> Obtain as much information as possible.
<input type="checkbox"/> Contact Local ARTCC and report incident to Area Manager. Fax documentation to FAA. Discuss contacting schedulers for MTRs, SUAs and MOAs.
<input type="checkbox"/> Contact Scheduling Activities (MTRs/SRs) and Scheduling Authorities (SUAs/MOAs) and provide information about intrusion. Inquire about scheduling activity. Discuss deconfliction request and TFR. Consider also contacting Air Force regarding local LATNs.
<input type="checkbox"/> File SAFECOM through agency procedures.
<input type="checkbox"/> Notify MILRep at FAA Regional Headquarters. MILReps will investigate all DoD related TFR intrusions or Near Mid Air Collisions. Provide complete documentation.
<input type="checkbox"/> Courtesy copy to FAA FSDO. FSDO will refer investigation to DoD.
<u>AGENCY AIRCRAFT AND GENERAL AVIATION AIRCRAFT</u>
<input type="checkbox"/> Obtain as much information as possible.
<input type="checkbox"/> Contact ARTCC (Area Manager) with information. Ask if the FAA can identify the aircraft on their radar scopes.
<input type="checkbox"/> File SAFECOM through agency procedures.
<input type="checkbox"/> Provide information to FAA FSDA. FSDO will assign investigator to follow through.
<input type="checkbox"/> Check local airports to see if aircraft can be identified. Do not "educate" the pilot--the FAA will handle that.
<u>AGENCY AIRCRAFT AND BIRDS OR WILDLIFE</u>
<input type="checkbox"/> File SAFECOM
<input type="checkbox"/> See Chapter 4--and file Bird report with FAA.

VI. NASA Voluntary Aviation Safety Reporting

The FAA has established a voluntary Aviation Safety Reporting Program designed to stimulate the free and unrestricted flow of information concerning deficiencies and discrepancies in the aviation system. This program utilizes the National Aeronautics and Space Administration (NASA) to act as an independent third party to receive and analyze reports submitted under the program. This program is described in Advisory Circular AC 00-46, Aviation Safety Reporting Program. This is a positive program intended to ensure the safest possible system by identifying and correcting unsafe conditions before they lead to accidents. The primary objective of the program is to obtain information to evaluate and enhance the safety and efficiency of the present system.

This cooperative safety reporting program invites pilots, controllers, flight attendants, maintenance personnel, other users of the airspace system, or any other person, to file written reports of actual or potential discrepancies and deficiencies involving the safety of aviation operations.

The operations covered by the program include departure, en route, approach, and landing operations and procedures, Air Traffic Control procedures and equipment, crew and Air Traffic Control communications, aircraft cabin operations, aircraft movement on the airport, Near Midair Collisions, aircraft maintenance and record keeping, and airport conditions or services.

The report should give the date, time, location, persons and aircraft involved (if applicable), nature of the event, and all pertinent details.

To ensure receipt of this information, the program provides for the waiver of certain disciplinary actions against persons, including pilots and air traffic controllers, who file timely written reports concerning potentially unsafe incidents. To be considered timely, reports must be delivered or postmarked within 10 days of the incident unless that period is extended for good cause. Reports should be submitted on NASA ARC Forms 277B, which are available free of charge, postage prepaid, at FAA Flight Standards District Offices and Flight Service Stations, and from NASA, ASRS, PO Box 189, Moffet Field, CA 94035. Further information is available at <http://asrs.arc.nasa.gov>.

VII. NASA and FAA Forms

The following pages consist of these NASA and FAA forms:

- A. Form NASA ARC 277B (January 1994)
- B. FAA Form 8020-17 - Preliminary Pilot Deviation Report
- C. FAA Form 8020-21 - Preliminary Near Midair Collision Report
- D. FAA Form 8020-15 - Investigation of Near Midair Collision Incident

FIGURE 8-5 Form NASA ARC 277B (January 1994), Page 1

DO NOT REPORT AIRCRAFT ACCIDENTS AND CRIMINAL ACTIVITIES ON THIS FORM.
 ACCIDENTS AND CRIMINAL ACTIVITIES ARE NOT INCLUDED IN THE ASRS PROGRAM AND SHOULD NOT BE SUBMITTED TO NASA.
 ALL IDENTITIES CONTAINED IN THIS REPORT WILL BE REMOVED TO ASSURE COMPLETE REPORTER ANONYMITY.

(SPACE BELOW RESERVED FOR ASRS 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 Area _____ No. _____ Hours _____
 WORK Area _____ No. _____ Hours _____

NAME _____ TYPE OF EVENT/SITUATION _____
 ADDRESS/PO BOX _____
 CITY _____ STATE _____ ZIP _____ DATE OF OCCURRENCE _____
 LOCAL TIME (24 hr. clock) _____

PLEASE FILL IN APPROPRIATE SPACES AND CHECK ALL ITEMS WHICH APPLY TO THIS EVENT OR SITUATION.

REPORTER	FLYING TIME	CERTIFICATES/RATINGS	ATC EXPERIENCE
<input type="checkbox"/> Captain <input type="checkbox"/> First Officer <input type="checkbox"/> pilot flying <input type="checkbox"/> pilot not flying <input type="checkbox"/> Other Crewmember <input type="checkbox"/> _____	total _____ hrs. last 90 days _____ hrs. time in type _____ hrs.	<input type="checkbox"/> student <input type="checkbox"/> commercial <input type="checkbox"/> instrument <input type="checkbox"/> multiengine <input type="checkbox"/> private <input type="checkbox"/> ATP <input type="checkbox"/> CFI <input type="checkbox"/> F/E	<input type="checkbox"/> FPL <input type="checkbox"/> Developmental radar _____ yrs. non-radar _____ yrs. supervisory _____ yrs. military _____ yrs.
AIRSPACE	WEATHER	LIGHT/VISIBILITY	ATC/ADVISORY SERV.
<input type="checkbox"/> Class A (PCA) <input type="checkbox"/> Class B (TCA) <input type="checkbox"/> Class C (ARSA) <input type="checkbox"/> Class D (Control Zone/ATA) <input type="checkbox"/> Class E (General Controlled) <input type="checkbox"/> Class G (Uncontrolled)	<input type="checkbox"/> Special Use Airspace <input type="checkbox"/> airway/route _____ <input type="checkbox"/> unknown/other _____	<input type="checkbox"/> VMC <input type="checkbox"/> IMC <input type="checkbox"/> mixed <input type="checkbox"/> marginal <input type="checkbox"/> rain <input type="checkbox"/> fog	<input type="checkbox"/> ice <input type="checkbox"/> snow <input type="checkbox"/> turbulence <input type="checkbox"/> tstorm <input type="checkbox"/> windshear <input type="checkbox"/> _____
		<input type="checkbox"/> daylight <input type="checkbox"/> dawn ceiling _____ feet visibility _____ miles RVR _____ feet	<input type="checkbox"/> night <input type="checkbox"/> dusk <input type="checkbox"/> local <input type="checkbox"/> center <input type="checkbox"/> ground <input type="checkbox"/> FSS <input type="checkbox"/> apch <input type="checkbox"/> UNICOM <input type="checkbox"/> dep <input type="checkbox"/> CTAF Name of ATC Facility: _____
AIRCRAFT 1		AIRCRAFT 2	
Type of Aircraft (Make/Model)	<input type="checkbox"/> EFIS <input type="checkbox"/> FMS/FMC	Type of Aircraft (Other Aircraft)	<input type="checkbox"/> EFIS <input type="checkbox"/> FMS/FMC
Operator	<input type="checkbox"/> air carrier <input type="checkbox"/> commuter <input type="checkbox"/> military <input type="checkbox"/> private <input type="checkbox"/> corporate <input type="checkbox"/> other _____	<input type="checkbox"/> air carrier <input type="checkbox"/> commuter <input type="checkbox"/> military <input type="checkbox"/> private <input type="checkbox"/> corporate <input type="checkbox"/> other _____	
Mission	<input type="checkbox"/> passenger <input type="checkbox"/> cargo <input type="checkbox"/> training <input type="checkbox"/> pleasure <input type="checkbox"/> business <input type="checkbox"/> unk/other _____	<input type="checkbox"/> passenger <input type="checkbox"/> cargo <input type="checkbox"/> training <input type="checkbox"/> pleasure <input type="checkbox"/> business <input type="checkbox"/> unk/other _____	
Flight plan	<input type="checkbox"/> VFR <input type="checkbox"/> IFR <input type="checkbox"/> SVFR <input type="checkbox"/> DVFR <input type="checkbox"/> none <input type="checkbox"/> unknown	<input type="checkbox"/> VFR <input type="checkbox"/> IFR <input type="checkbox"/> SVFR <input type="checkbox"/> DVFR <input type="checkbox"/> none <input type="checkbox"/> unknown	
Flight phases at time of occurrence	<input type="checkbox"/> taxi <input type="checkbox"/> takeoff <input type="checkbox"/> climb <input type="checkbox"/> cruise <input type="checkbox"/> descent <input type="checkbox"/> approach <input type="checkbox"/> landing <input type="checkbox"/> missed apch/GAR <input type="checkbox"/> other _____	<input type="checkbox"/> taxi <input type="checkbox"/> takeoff <input type="checkbox"/> climb <input type="checkbox"/> cruise <input type="checkbox"/> descent <input type="checkbox"/> approach <input type="checkbox"/> landing <input type="checkbox"/> missed apch/GAR <input type="checkbox"/> other _____	
Control status	<input type="checkbox"/> visual apch <input type="checkbox"/> controlled <input type="checkbox"/> no radio <input type="checkbox"/> on vector <input type="checkbox"/> none <input type="checkbox"/> radar advisories <input type="checkbox"/> on SID/STAR <input type="checkbox"/> unknown	<input type="checkbox"/> visual apch <input type="checkbox"/> controlled <input type="checkbox"/> no radio <input type="checkbox"/> on vector <input type="checkbox"/> none <input type="checkbox"/> radar advisories <input type="checkbox"/> on SID/STAR <input type="checkbox"/> unknown	

If more than two aircraft were involved, please describe the additional aircraft in the "Describe Event/Situation" section.

LOCATION	CONFLICTS
Altitude _____ <input type="checkbox"/> MSL <input type="checkbox"/> AGL	Estimated miss distance in feet: horiz _____ vert _____
Distance and radial from airport, NAVAID, or other fix _____	Was evasive action taken? <input type="checkbox"/> Yes <input type="checkbox"/> No
Nearest City/State _____	Was TCAS a factor? <input type="checkbox"/> TA <input type="checkbox"/> RA <input type="checkbox"/> No
	Did GPWS activate? <input type="checkbox"/> Yes <input type="checkbox"/> No

FIGURE 8-7 FAA Form 8020-17 - Page 1

PRELIMINARY PILOT DEVIATION REPORT			Incident Report Number																																							
P			<table border="1" style="width:100%; height: 20px;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>																																							
<p>Complete and distribute according to instructions on page 3. Complete items 1 to 9 and 27 to 33 for all deviations; if surface deviation, also complete items 10 to 14; if air deviation, also complete items 15 to 26. Complete the form by hand or typewriter.</p>																																										
<p>1. Date, Time, and Location of Deviation</p> <p>A. Date (Coordinated Universal Time-UTC)</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> <tr> <td>M</td><td>M</td><td>D</td><td>D</td><td>Y</td><td>Y</td><td></td><td></td> </tr> </table> <p>B. UTC Time</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> <p>C. Local Time</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> <p>D. Nearest City or Town and State _____</p>									M	M	D	D	Y	Y											<p>2. Pilot Information (complete or mark box) <input type="checkbox"/> All Information Unknown</p> <p>A. Name and Address</p> <p style="text-align: center;">Name (first, middle, last)</p> <hr/> <p style="text-align: center;">Address</p> <hr/> <p style="text-align: center;">City State or Country Zip</p> <hr/> <p>B. Daytime Telephone Number</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> <p>C. Pilot Certificate No. (or enter "MILITARY")</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>																	<p>3. Deviation First Detected by (mark one):</p> <p>A. <input type="checkbox"/> Error Detection Program (EDP)</p> <p>B. <input type="checkbox"/> Radar Observation (excludes EDP)</p> <p>C. <input type="checkbox"/> Visual Observation (tower)</p> <p>D. <input type="checkbox"/> AFSS or FSS</p> <p>E. <input type="checkbox"/> Public, Including Pilots</p> <p>F. Other, Specify _____</p> <hr/> <hr/> <hr/>
M	M	D	D	Y	Y																																					
<p>4. Aircraft Information (complete or mark box): <input type="checkbox"/> All Information Unknown</p> <p>A. Registration (N) No.</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> <p>B. Flight No. or Call Sign (if applicable) _____</p> <p>C. Make _____</p> <p>D. Model _____</p>									<p>5. Type of Operation at Time of Deviation (mark one):</p> <p>A. <input type="checkbox"/> U.S. Air Carrier (14 CFR 121 or 125) F. <input type="checkbox"/> Public (governmental)</p> <p>B. <input type="checkbox"/> Foreign Air Carrier (14 CFR 129) G. <input type="checkbox"/> U.S. Military, (Specify Service) _____</p> <p>C. <input type="checkbox"/> Commuter (14 CFR 135)</p> <p>D. <input type="checkbox"/> Air Taxi (14 CFR 135) H. <input type="checkbox"/> Unknown</p> <p>E. <input type="checkbox"/> General Aviation (14 CFR 91) I. <input type="checkbox"/> Other, Specify _____</p>																																	
<p>6. Type of Flight Rules at Time of Deviation (mark one):</p> <p>A. <input type="checkbox"/> Instrument Flight Rules (IFR)</p> <p>B. <input type="checkbox"/> Visual Flight Rules (VFR)</p> <p>C. <input type="checkbox"/> Special VFR</p> <p>D. <input type="checkbox"/> Defense VFR</p> <p>E. <input type="checkbox"/> Unknown</p>	<p>7. Phase(s) of Flight When Deviation Occurred (mark appropriate boxes):</p> <p>A. <input type="checkbox"/> Taxi E. <input type="checkbox"/> Turning or Maneuvering I. <input type="checkbox"/> Unknown</p> <p>B. <input type="checkbox"/> Takeoff F. <input type="checkbox"/> Descent J. <input type="checkbox"/> Other, Specify: _____</p> <p>C. <input type="checkbox"/> Climb G. <input type="checkbox"/> Approach</p> <p>D. <input type="checkbox"/> Level Flight or Cruise H. <input type="checkbox"/> Landing</p>																																									
<p>8. Number of Aircraft Involved (provide data on any aircraft not listed in item 4):</p> <p>A. <input type="checkbox"/> One Aircraft N No. _____ Flight No. or Call Sign (if applicable) _____ Make _____ Model _____</p> <p>B. <input type="checkbox"/> Two F. <table style="width: 100%; text-align: center;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table> _____</p> <p>C. <input type="checkbox"/> Three G. <table style="width: 100%; text-align: center;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table> _____</p> <p>D. <input type="checkbox"/> Four or More H. <table style="width: 100%; text-align: center;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table> _____</p> <p>E. <input type="checkbox"/> Unknown I. <table style="width: 100%; text-align: center;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table> _____</p>																						<p>9. Type of Deviation(s) (mark appropriate boxes):</p> <p>A. <input type="checkbox"/> Surface (complete items 10 to 14 and 27 to 33)</p> <p>B. <input type="checkbox"/> Air (complete Items 15 to 33)</p>																				
<p>10. Type of Control at Surface Deviation Location (mark one):</p> <p>A. <input type="checkbox"/> Operating Control Tower</p> <p>B. <input type="checkbox"/> Nonoperating Control Tower</p> <p>C. <input type="checkbox"/> None, Nontowered Public Airport</p> <p>D. <input type="checkbox"/> None, Private Airport</p> <p>E. <input type="checkbox"/> Unknown</p>	<p>11. Airport ID at Surface Deviation Location:</p> <table style="width: 100%; text-align: center;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>					<p>12. Surface Deviation Type(s) (mark appropriate boxes):</p> <p>A. <input type="checkbox"/> Takeoff Without Clearance</p> <p>B. <input type="checkbox"/> Takeoff on Wrong Runway or Taxiway</p> <p>C. <input type="checkbox"/> Landed Without Clearance</p> <p>D. <input type="checkbox"/> Landed or Takeoff Below Weather Minimums</p> <p>E. <input type="checkbox"/> Landed on Wrong Runway, Taxiway, or Airport</p> <p>F. <input type="checkbox"/> Entered Runway or Taxiway Without Clearance</p> <p>G. <input type="checkbox"/> Careless or Reckless Aircraft Operation</p> <p>H. <input type="checkbox"/> Did Not Close Flight Plan</p> <p>I. <input type="checkbox"/> Other, Specify _____</p>																																				
<p>13. Loss of Separation With (mark appropriate boxes):</p> <p>A. <input type="checkbox"/> Ground Vehicle</p> <p>B. <input type="checkbox"/> Personne</p> <p>C. <input type="checkbox"/> Another Aircraft, on Ground</p> <p>D. <input type="checkbox"/> Another Aircraft, in Air</p> <p>E. <input type="checkbox"/> Obstruction</p> <p>F. <input type="checkbox"/> Not Applicable</p> <p>G. <input type="checkbox"/> Unknown</p>	<p>14. Closest Proximity Was (mark one):</p> <p>A. <input type="checkbox"/> Under 100 Feet</p> <p>B. <input type="checkbox"/> 100-499 Feet</p> <p>C. <input type="checkbox"/> 500-1,000 Feet</p> <p>D. <input type="checkbox"/> Over 1,000 Feet</p> <p>E. <input type="checkbox"/> Not Applicable</p> <p>F. <input type="checkbox"/> Unknown</p>	<p><i>If Surface Deviation Only Skip to Item 27</i></p>	<p>15. Location in Traffic Pattern During Deviation (mark one):</p> <p>A. <input type="checkbox"/> Upwind</p> <p>B. <input type="checkbox"/> Crosswind</p> <p>C. <input type="checkbox"/> Entry or Downwind Leg</p> <p>D. <input type="checkbox"/> Base Leg</p> <p>E. <input type="checkbox"/> Final Approach</p> <p>F. <input type="checkbox"/> Departure Leg or Exit</p> <p>G. <input type="checkbox"/> Not in Traffic Pattern</p> <p>H. <input type="checkbox"/> Unknown</p> <p>I. <input type="checkbox"/> Other, Specify _____</p>																																							

FIGURE 8-8 FAA Form 8020-17 - Page 2

<p>16. Aircraft Altitude When Deviation Detected:</p> <p>A. <input type="text"/> , <input type="text"/> Feet msl</p> <p>B. <input type="checkbox"/> Unknown</p>	<p>17. Transponder (mark one):</p> <p>A. <input type="checkbox"/> Operating, With Altitude Reporting</p> <p>B. <input type="checkbox"/> Operating, without Altitude Reporting</p> <p>C. <input type="checkbox"/> Not Functioning (broken or off)</p> <p>D. <input type="checkbox"/> No Transponder</p> <p>E. <input type="checkbox"/> Unknown</p>	<p>18. Was the Aircraft Equipped with TCAS?:</p> <p>A. (1) <input type="checkbox"/> Yes (2) <input type="checkbox"/> No (3) <input type="checkbox"/> Unknown</p> <p>B. If Yes, Was TCAS Operating During Deviation? (1) <input type="checkbox"/> Yes (2) <input type="checkbox"/> No (3) <input type="checkbox"/> Unknown</p> <p>C. If Yes, Was TCAS Involved in Deviation? (1) <input type="checkbox"/> Yes (2) <input type="checkbox"/> No (3) <input type="checkbox"/> Unknown</p> <p>D. If Yes, Describe Involvement: _____</p>
<p>19. Fix or Facility Nearest Deviation (complete one):</p> <p>A. <input type="text"/> VOR, TACAN, or NDB ID</p> <p>B. <input type="text"/> Airport ID</p> <p>C. <input type="text"/> Airway Intersection ID</p> <p>D. <input type="checkbox"/> Oceanic Airspace or Area Navigation (GPS, Loran, etc.)</p>	<p>20. Deviation Location in Respect to Item 19 (complete A&B or C&D):</p> <p>A. <input type="text"/> Miles (nautical)</p> <p>B. <input type="text"/> Degrees (magnetic) For Oceanic Airspace and Area Navigation Only:</p> <p>C. <input type="text"/> ' <input type="text"/> ' Latitude</p> <p>D. <input type="text"/> ' <input type="text"/> ' Longitude</p>	<p>21. Operational Control Area of Aircraft (mark a maximum of three):</p> <p>A. <input type="checkbox"/> Class A Airspace</p> <p>B. <input type="checkbox"/> Class B Airspace</p> <p>C. <input type="checkbox"/> Class C Airspace</p> <p>D. <input type="checkbox"/> Class D Airspace</p> <p>E. <input type="checkbox"/> Class E Airspace</p> <p>F. <input type="checkbox"/> Class G Airspace</p> <p>G. <input type="checkbox"/> Special Use Airspace, Specify _____</p> <p>H. <input type="checkbox"/> Within Terminal Radar Service Area</p> <p>I. <input type="checkbox"/> Towered Airport</p> <p>J. <input type="checkbox"/> Non towered Airport</p> <p>K. <input type="checkbox"/> Unknown</p> <p>L. <input type="checkbox"/> Other, Specify _____</p>
<p>22. Location ID of Facility(ies) Providing Air Traffic Service During Deviation (complete appropriate boxes)</p> <p>A. <input type="text"/> ARTCC</p> <p>B. <input type="text"/> TRACON</p> <p>C. <input type="text"/> RAPCON, RATCT, or ARAC</p> <p>D. <input type="text"/> ATCT</p> <p>E. <input type="text"/> AFSS or FSS</p> <p>F. <input type="checkbox"/> None</p> <p>G. <input type="checkbox"/> Unknown</p> <p>H. <input type="checkbox"/> Other, Specify _____</p>		
<p>23. Preliminary Information Indicates the Air Deviation Type Was (mark appropriate boxes):</p> <p>A. <input type="checkbox"/> ATC Altitude Clearance Deviation</p> <p>B. <input type="checkbox"/> ATC Course Clearance Deviation</p> <p>C. <input type="checkbox"/> Airspeed Clearance Violation</p> <p>D. <input type="checkbox"/> Airspace Clearance Violation</p> <p>E. <input type="checkbox"/> Flying VFR when IFR Required</p> <p>F. <input type="checkbox"/> Pilot Unqualified for Aircraft or Conditions</p> <p>G. <input type="checkbox"/> Required Aircraft Equipment Not Operating</p> <p>H. <input type="checkbox"/> Careless or Reckless Aircraft Operation</p> <p>I. <input type="checkbox"/> Unauthorized Low level Flying</p> <p>J. <input type="checkbox"/> Missed Compulsory Reporting Point</p> <p>K. <input type="checkbox"/> Noncompliance with Other Regulations (specify FAR numbers (2): (1) <input type="text"/> . <input type="text"/> (<input type="text"/>) (2) <input type="text"/> . <input type="text"/> (<input type="text"/>)</p>		
<p>24. Preliminary Information Indicates the Airspace Violation Was of (mark one):</p> <p>A. <input type="checkbox"/> Class A Airspace</p> <p>B. <input type="checkbox"/> Class B Airspace</p> <p>C. <input type="checkbox"/> Class C Airspace</p> <p>D. <input type="checkbox"/> Class D Airspace</p> <p>E. <input type="checkbox"/> Class E Airspace</p> <p>F. <input type="checkbox"/> Special Use Airspace, Specify _____</p> <p>G. <input type="checkbox"/> None</p> <p>H. <input type="checkbox"/> Unknown</p> <p>I. <input type="checkbox"/> Other, Specify _____</p>		
<p>25. If ATC Altitude or Course Clearance Deviation, Maximum Deviation Was:</p> <p><input type="checkbox"/> No Clearance Deviation</p> <p>A. <input type="text"/> , <input type="text"/> Feet, Vertical or <input type="checkbox"/> Unknown</p> <p>B. <input type="text"/> , <input type="text"/> Feet, Horizontal</p> <p>or <input type="text"/> , <input type="text"/> Miles (nautical), Horizontal or <input type="checkbox"/> Unknown</p>	<p>26. If There Was Loss of Separation, Closest Proximity Was:</p> <p><input type="checkbox"/> No Loss of Separation</p> <p>A. <input type="text"/> , <input type="text"/> Feet, Vertical or <input type="checkbox"/> Unknown</p> <p>B. <input type="text"/> , <input type="text"/> Feet, Horizontal or <input type="checkbox"/> Unknown</p> <p>or <input type="text"/> , <input type="text"/> Miles (nautical), Horizontal or <input type="checkbox"/> Unknown</p> <p>C. <input type="text"/> Minutes Longitudinal or <input type="checkbox"/> Unknown</p>	
<p>27. Other Reports Filed or To Be Filed (mark appropriate boxes and complete):</p> <p>A. <input type="checkbox"/> Incident Report (FAA Form 8020-1 1), Specify No(s). _____</p> <p>B. <input type="checkbox"/> Preliminary Near Midair Collision Report (FAA Form 8020-2 1), Specify No(s). _____</p> <p>C. <input type="checkbox"/> Preliminary Operational Error/Deviation Report (FAA Form 7210-2), Specify No(s). _____</p> <p>D. <input type="checkbox"/> Other (including TCAS), Specify _____</p> <p>E. <input type="checkbox"/> None</p>		
<p>28. Brief Description of Deviation and Comments:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>		

FIGURE 8-10 FAA Form 8020-21 - Page 1

PRELIMINARY NEAR MIDAIR COLLISION REPORT		Incident Report Number																																																																														
<p style="text-align: center; font-size: 2em; margin: 0;">N</p>		<table border="1" style="width:100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> </table>																																																																														
<p>Complete and distribute according to instructions on page 3. Complete all items. "Rptg" refers to the aircraft that reports the near midair collision (NMAC) first; "Other" refers to the other aircraft. Complete the form by hand or typewriter.</p>																																																																																
<p>1. Date, Time, and Location of NMAC: Date (Coordinated Universal Time-UTC)</p> <p>A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>UTC Time <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Local Time <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>B. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>D. Nearest City or Town and State <input type="text"/></p>	<p>2. Fix or Facility Nearest NMAC (complete one):</p> <p>A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> VOR, TACAN, or NDB ID</p> <p>B. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Airport ID</p> <p>C. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Airway Intersection ID</p> <p>D. <input type="checkbox"/> Oceanic Airspace or Area Navigation (GPS, Loran, etc.)</p>	<p>3. NMAC Location in Respect to Item 2 (complete A&B or C&D)</p> <p>A. <input type="text"/> <input type="text"/> <input type="text"/> Miles (nautical)</p> <p>B. <input type="text"/> <input type="text"/> <input type="text"/> Degrees (magnetic)</p> <p>For Oceanic Airspace or Area Navigation</p> <p>C. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Latitude</p> <p>D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Longitude</p>																																																																														
<p>4. Reporting Aircraft ("Rptg") Information:</p> <p>A. Pilot Name and Address</p> <p>Name (first, middle, last) <input type="text"/></p> <p>Address <input type="text"/></p> <p>City <input type="text"/> State or Country <input type="text"/> ZIP <input type="text"/></p> <p>B. Pilot Home Base <input type="text"/></p> <p>C. Pilot Daytime Telephone No. <input type="text"/> - <input type="text"/> - <input type="text"/></p> <p>D. Pilot Certificate No. (or enter "MILITARY") <input type="text"/></p> <p>E. Aircraft Registration (N) No. <input type="text"/></p> <p>F. Flight No. or Call Sign (if applicable) <input type="text"/></p> <p>G. Aircraft Make <input type="text"/></p> <p>H. Aircraft Model <input type="text"/></p>	<p>5. Other Aircraft ("Other") Information (complete or mark Box): <input type="checkbox"/> All Information Unknown</p> <p>A. Pilot Name and Address</p> <p>Name (first, middle, last) <input type="text"/></p> <p>Address <input type="text"/></p> <p>City <input type="text"/> State or Country <input type="text"/> ZIP <input type="text"/></p> <p>B. Pilot Home Base <input type="text"/></p> <p>C. Pilot Daytime Telephone No. <input type="text"/> - <input type="text"/> - <input type="text"/></p> <p>D. Pilot Certificate No. (or enter "MILITARY") <input type="text"/></p> <p>E. Aircraft Registration (N) No. <input type="text"/></p> <p>F. Flight No. or Call Sign (if applicable) <input type="text"/></p> <p>G. Aircraft Make <input type="text"/></p> <p>H. Aircraft Model <input type="text"/></p> <p>I. Did Pilot Report NMAC? (1) <input type="checkbox"/> Yes (2) <input type="checkbox"/> No (3) <input type="checkbox"/> Unknown</p>																																																																															
<p>6. Type of Operation during NMAC (mark one per aircraft):</p> <table style="width:100%;"> <tr> <th style="text-align: left;">Rptg</th> <th style="text-align: left;">Other</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>U.S. Air Carrier (14 CFR 121 or 125)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Foreign Air Carrier (14 CFR 129)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Commuter (14 CFR 135)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Air Taxi (14 CFR 135)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>General Aviation (14 CFR 91)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Public (governmental)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>U.S. Military, Specify Service <input type="text"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other, Specify <input type="text"/></td> </tr> </table>	Rptg	Other		<input type="checkbox"/>	<input type="checkbox"/>	U.S. Air Carrier (14 CFR 121 or 125)	<input type="checkbox"/>	<input type="checkbox"/>	Foreign Air Carrier (14 CFR 129)	<input type="checkbox"/>	<input type="checkbox"/>	Commuter (14 CFR 135)	<input type="checkbox"/>	<input type="checkbox"/>	Air Taxi (14 CFR 135)	<input type="checkbox"/>	<input type="checkbox"/>	General Aviation (14 CFR 91)	<input type="checkbox"/>	<input type="checkbox"/>	Public (governmental)	<input type="checkbox"/>	<input type="checkbox"/>	U.S. Military, Specify Service <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify <input type="text"/>	<p>7. Type of Flight Rules During NMAC (mark one per aircraft):</p> <table style="width:100%;"> <tr> <th style="text-align: left;">Rptg</th> <th style="text-align: left;">Other</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Instrument Flight Rules (IFR)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Visual Flight Rules (VFR)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Special VFR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Defense VFR</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Unknown</td> </tr> </table>	Rptg	Other		<input type="checkbox"/>	<input type="checkbox"/>	Instrument Flight Rules (IFR)	<input type="checkbox"/>	<input type="checkbox"/>	Visual Flight Rules (VFR)	<input type="checkbox"/>	<input type="checkbox"/>	Special VFR	<input type="checkbox"/>	<input type="checkbox"/>	Defense VFR	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<p>8. Phases of Flight During NMAC (mark appropriate boxes):</p> <table style="width:100%;"> <tr> <th style="text-align: left;">Rptg</th> <th style="text-align: left;">Other</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Takeoff</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Climb</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Level Flight or Cruise</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Turning or</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Descent</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Approach</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Landing</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other, Specify <input type="text"/></td> </tr> </table>	Rptg	Other		<input type="checkbox"/>	<input type="checkbox"/>	Takeoff	<input type="checkbox"/>	<input type="checkbox"/>	Climb	<input type="checkbox"/>	<input type="checkbox"/>	Level Flight or Cruise	<input type="checkbox"/>	<input type="checkbox"/>	Turning or	<input type="checkbox"/>	<input type="checkbox"/>	Descent	<input type="checkbox"/>	<input type="checkbox"/>	Approach	<input type="checkbox"/>	<input type="checkbox"/>	Landing	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify <input type="text"/>
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<input type="checkbox"/>	<input type="checkbox"/>	Unknown																																																																														
<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify <input type="text"/>																																																																														
<p>9. Location in Traffic Pattern During NMAC (mark one per aircraft):</p> <table style="width:100%;"> <tr> <th style="text-align: left;">Rptg</th> <th style="text-align: left;">Other</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Upwind Leg</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Crosswind Leg</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Downwind Leg</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Base Leg</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Final Approach</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Departure Leg or Exit</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Not in Traffic Pattern</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Other, Specify <input type="text"/></td> </tr> </table>	Rptg	Other		<input type="checkbox"/>	<input type="checkbox"/>	Upwind Leg	<input type="checkbox"/>	<input type="checkbox"/>	Crosswind Leg	<input type="checkbox"/>	<input type="checkbox"/>	Downwind Leg	<input type="checkbox"/>	<input type="checkbox"/>	Base Leg	<input type="checkbox"/>	<input type="checkbox"/>	Final Approach	<input type="checkbox"/>	<input type="checkbox"/>	Departure Leg or Exit	<input type="checkbox"/>	<input type="checkbox"/>	Not in Traffic Pattern	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify <input type="text"/>	<p>10. Aircraft Altitude During NMAC:</p> <p>A. Rptg <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Feet msl or <input type="checkbox"/> Unknown</p> <p>B. Other <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Feet msl or <input type="checkbox"/> Unknown</p> <p>11. Approximate Aircraft Heading Before NMAC:</p> <p>A. Rptg <input type="text"/> <input type="text"/> <input type="text"/> Degrees (magnetic) or <input type="checkbox"/> Unknown</p> <p>B. Other <input type="text"/> <input type="text"/> <input type="text"/> Degrees (magnetic) or <input type="checkbox"/> Unknown</p>	<p>12. Transponder (mark one per aircraft):</p> <table style="width:100%;"> <tr> <th style="text-align: left;">Rptg</th> <th style="text-align: left;">Other</th> <th></th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Operating, With Altitude Reporting</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Operating, Without Reporting</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Not Functioning (broken or off)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>No Transponder</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Unknown</td> </tr> </table>	Rptg	Other		<input type="checkbox"/>	<input type="checkbox"/>	Operating, With Altitude Reporting	<input type="checkbox"/>	<input type="checkbox"/>	Operating, Without Reporting	<input type="checkbox"/>	<input type="checkbox"/>	Not Functioning (broken or off)	<input type="checkbox"/>	<input type="checkbox"/>	No Transponder	<input type="checkbox"/>	<input type="checkbox"/>	Unknown																														
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<input type="checkbox"/>	<input type="checkbox"/>	No Transponder																																																																														
<input type="checkbox"/>	<input type="checkbox"/>	Unknown																																																																														

FIGURE 8-12 FAA Form 8020-21 - Page 3

PRELIMINARY NEAR MIDAIR COLLISION REPORT (Continued)		Incident Report Number					
22. Attachments (specify, e.g., pilot statement or flight progress strip, or mark box): <input type="checkbox"/> No Attachments		N					
23. Reporting Facility: A. <input type="text" value="A"/> FAA Region B. <input type="text"/> Location ID C. <input type="text"/> - <input type="text"/> - <input type="text"/> Telephone No.	24. Name of Individual Completing Form: Type or Print _____						
25. Facility Manger Approving Form: A. Signature _____ B. Name (Type or Print) _____ C. Date <input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y	26. Report Distributed to: A. FAA Region <input type="text" value="A"/> Flight Standards ID <input type="text"/> B. Others, Specify _____						
INSTRUCTIONS							
I. General							
<p>The incident report number and Items 1, 2, 3, 4E and/or F, 4G, 5E and/or F, 5G, 7, 10, and 21 of FAA Form 8020-21 must be completed and the information transmitted or arrangements made to transmit it in numerical order within 12 hours of the NMAC notification by: (1) telephone, facsimile, or in accordance with a regional agreement to the FSDO with jurisdiction over the area in which the pilot deviation occurred, and (2) by National Airspace Data Interchange Network (NADIN) message using immediate (DD) precedence to FAA Headquarters and others. If the NMAC is significant, the above information should be communicated immediately by telephone to FAA Headquarters. The remainder of the form must be completed and mailed by first class mail within 10 calendar days of the notification of a NMAC. The definition of a NMAC and instructions on distribution of FAA 8020-21 are in FAA Order 8020.11, "Aircraft Accident and Incident Notification, Investigation, and Reporting."</p> <p>If both aircraft involved in the NMAC report the event, designate the first reporting aircraft as "Rptg" and the second as "Other." If more than two aircraft are involved (except for formations when one form should be completed for the entire formation), complete an additional form(s) and assign the form(s) the same incident report number as the primary form. Report the number of forms and which form is primary in Item 21.</p> <p>Complete all items. If the categories given are inadequate, complete "Other, Specify." If data for both the reporting and other aircraft appear under "Other, Specify," provide the reporting aircraft data first, followed by the other aircraft data. Provide comments in Item 21, not in the margins. Sign and date the form (Item 25) before distribution.</p>							
II. Incident Report Number							
<p>Each facility completing FAA Form 8020-21 is responsible for assigning a unique 12-character number to each reported NMAC. The first character is N, for NMAC. The second and third characters are the abbreviation of the FAA region in which the incident occurred.</p>							
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> AL - Alaskan CE - Central EA - Eastern GL - Great Lakes WP - Western-Pacific </td> <td style="width: 50%; vertical-align: top;"> NE - New England NM - Northwest Mountain SO - Southern SW - Southwest </td> </tr> </table>						AL - Alaskan CE - Central EA - Eastern GL - Great Lakes WP - Western-Pacific	NE - New England NM - Northwest Mountain SO - Southern SW - Southwest
AL - Alaskan CE - Central EA - Eastern GL - Great Lakes WP - Western-Pacific	NE - New England NM - Northwest Mountain SO - Southern SW - Southwest						
<p>The fourth character identifies the type of facility completing the form:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> C - ARTCC F - AFSS or FSS </td> <td style="width: 50%; vertical-align: top;"> R - TRACON T - ATCT Z - FSDO or Other </td> </tr> </table> <p>For combined TRACON and ATCT operations, use the character for the TRACON or ATCT notified of the NMAC.</p> <p>The fifth through seventh characters are the facility location identifier (see FAA Order 7350.6), e.g., ZNY, or FSDO ID, e.g., 025. The eighth and ninth characters are the calendar year in which the incident occurred, e.g., 95 for 1995.</p> <p>The last three characters are the sequential incident report number for the year, by reporting facility and type of incident (e.g., NMAC's would be numbered 001 to 999 in 1995 at a given facility).</p>						C - ARTCC F - AFSS or FSS	R - TRACON T - ATCT Z - FSDO or Other
C - ARTCC F - AFSS or FSS	R - TRACON T - ATCT Z - FSDO or Other						
III. Abbreviations							
<p>The following abbreviations are used:</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> AFSS ARAC ARTCC ATCT CFR FSDO FSS GPS HATR msl NDB RAPCON RATCF TACAN TCAS TRACON VOR </td> <td style="width: 50%; vertical-align: top;"> - Automated Flight Service Station - Army Radar Approach Control - Air Route Traffic Control Center - Air Traffic Control Tower - Code of Federal Regulations - Flight Standards District Office - Flight Service Station - Global Positioning System - Hazardous Air Traffic Report - Mean Sea Level - Nondirectional Beacon - Radar Approach Control - Radar Air Traffic control Facility - Tactical Air Navigation - Traffic Alert and Collision Avoidance System - Terminal Radar Approach Control - Very High Frequency Omnidirectional Range Station </td> </tr> </table>						AFSS ARAC ARTCC ATCT CFR FSDO FSS GPS HATR msl NDB RAPCON RATCF TACAN TCAS TRACON VOR	- Automated Flight Service Station - Army Radar Approach Control - Air Route Traffic Control Center - Air Traffic Control Tower - Code of Federal Regulations - Flight Standards District Office - Flight Service Station - Global Positioning System - Hazardous Air Traffic Report - Mean Sea Level - Nondirectional Beacon - Radar Approach Control - Radar Air Traffic control Facility - Tactical Air Navigation - Traffic Alert and Collision Avoidance System - Terminal Radar Approach Control - Very High Frequency Omnidirectional Range Station
AFSS ARAC ARTCC ATCT CFR FSDO FSS GPS HATR msl NDB RAPCON RATCF TACAN TCAS TRACON VOR	- Automated Flight Service Station - Army Radar Approach Control - Air Route Traffic Control Center - Air Traffic Control Tower - Code of Federal Regulations - Flight Standards District Office - Flight Service Station - Global Positioning System - Hazardous Air Traffic Report - Mean Sea Level - Nondirectional Beacon - Radar Approach Control - Radar Air Traffic control Facility - Tactical Air Navigation - Traffic Alert and Collision Avoidance System - Terminal Radar Approach Control - Very High Frequency Omnidirectional Range Station						

FIGURE 8-13 FAA Form 8020-15 - Page 1

INVESTIGATION OF NEAR MIDAIR COLLISION REPORT		Incident Report Number																																																
N																																																		
<p>Complete and distribute within 90 days of a reported near midair collision (NMAC) according to instructions on page 3. Complete all items. "Rptg" refers to the aircraft that reports the NMAC first; "Other" refers to the other aircraft. Use the same incident report number as on the corresponding FAA Form 8020-21, "Preliminary Near Midair Collision Report." Any corrections to FAA Form 8020-21 should be reported in Item 22 of this form. Complete the form by hand or typewriter.</p>																																																		
<p>1. Date, Time, and Location of NMAC:</p> <p>A. Date (Coordinated Universal Time - UTC) </p> <p>B. UTC Time </p> <p>C. Local Time </p> <p>D. Nearest City or Town and State _____ _____</p>	<p>2. Reporting Aircraft ("Rptg") Information:</p> <p>A. Pilot Name _____ <small>First, middle, last</small></p> <p>B. Pilot Total Flight Time _____ hrs.</p> <p>C. Pilot Time in Make and Model _____ hrs.</p> <p>D. Operator Name and Address _____ <small>Full Name</small> _____ <small>Address</small> _____ <small>City State or Country ZIP</small></p>	<p>3. Other Aircraft ("Other") Information (complete or mark box): <input type="checkbox"/> All information unknown</p> <p>A. Pilot Name _____ <small>First, middle, last</small></p> <p>B. Pilot Total Flight Time _____ hrs.</p> <p>C. Pilot Time in Make and Model _____ hrs.</p> <p>D. Operator Name and Address _____ <small>Full Name</small> _____ <small>Address</small> _____ <small>City State ZIP</small></p>																																																
<p>4. Aircraft Information:</p> <p>A. Registration (N) No. Rptg _____ Other _____</p> <p>B. Flight No. or Call Sign (if applicable) Rptg _____ Other _____</p> <p>C. Make Rptg _____ Other _____</p> <p>D. Model Rptg _____ Other _____</p>	<p>E. Aircraft Type (mark one per aircraft):</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%; border: none;">Rptg Other</td> <td style="width: 50%; border: none;"></td> </tr> <tr> <td style="border: none;">(1) <input type="checkbox"/> <input type="checkbox"/> Single Engine Land</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">(2) <input type="checkbox"/> <input type="checkbox"/> Multiengine Land</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">(3) <input type="checkbox"/> <input type="checkbox"/> Single Engine Sea</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">(4) <input type="checkbox"/> <input type="checkbox"/> Multiengine Sea</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">(5) <input type="checkbox"/> <input type="checkbox"/> Rotorcraft</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">(6) <input type="checkbox"/> <input type="checkbox"/> Other, Specify _____</td> <td style="border: none;"></td> </tr> </table>	Rptg Other		(1) <input type="checkbox"/> <input type="checkbox"/> Single Engine Land		(2) <input type="checkbox"/> <input type="checkbox"/> Multiengine Land		(3) <input type="checkbox"/> <input type="checkbox"/> Single Engine Sea		(4) <input type="checkbox"/> <input type="checkbox"/> Multiengine Sea		(5) <input type="checkbox"/> <input type="checkbox"/> Rotorcraft		(6) <input type="checkbox"/> <input type="checkbox"/> Other, Specify _____		<p>5. Pilots' Certificates (mark appropriate box):</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%; border: none;">Rptg Other</td> <td style="width: 50%; border: none;"></td> </tr> <tr> <td style="border: none;">A. <input type="checkbox"/> <input type="checkbox"/> Student</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">B. <input type="checkbox"/> <input type="checkbox"/> Recreational</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">C. <input type="checkbox"/> <input type="checkbox"/> Private</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">D. <input type="checkbox"/> <input type="checkbox"/> Commercial</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">E. <input type="checkbox"/> <input type="checkbox"/> Airline Transport</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">F. <input type="checkbox"/> <input type="checkbox"/> Flight Instructor</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">G. <input type="checkbox"/> <input type="checkbox"/> Military</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">H. <input type="checkbox"/> <input type="checkbox"/> Foreign Pilot</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">I. <input type="checkbox"/> <input type="checkbox"/> None</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">J. <input type="checkbox"/> <input type="checkbox"/> Unknown</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">K. <input type="checkbox"/> <input type="checkbox"/> Other, Specify _____</td> <td style="border: none;"></td> </tr> </table>	Rptg Other		A. <input type="checkbox"/> <input type="checkbox"/> Student		B. <input type="checkbox"/> <input type="checkbox"/> Recreational		C. <input type="checkbox"/> <input type="checkbox"/> Private		D. <input type="checkbox"/> <input type="checkbox"/> Commercial		E. <input type="checkbox"/> <input type="checkbox"/> Airline Transport		F. <input type="checkbox"/> <input type="checkbox"/> Flight Instructor		G. <input type="checkbox"/> <input type="checkbox"/> Military		H. <input type="checkbox"/> <input type="checkbox"/> Foreign Pilot		I. <input type="checkbox"/> <input type="checkbox"/> None		J. <input type="checkbox"/> <input type="checkbox"/> Unknown		K. <input type="checkbox"/> <input type="checkbox"/> Other, Specify _____											
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<p>9. Weather During NMAC (mark one):</p> <p>A. <input type="checkbox"/> Visual Meteorological Conditions</p> <p>B. <input type="checkbox"/> Marginal VMC</p> <p>C. <input type="checkbox"/> Instrument Meteorological Conditions</p> <p>D. <input type="checkbox"/> Unknown</p> <p>E. <input type="checkbox"/> Other, Specify _____</p>	<p>10. Sky Cover at Flight Altitude During NMAC (mark one):</p> <p>A. <input type="checkbox"/> Clear</p> <p>B. <input type="checkbox"/> Scattered</p> <p>C. <input type="checkbox"/> Broken</p> <p>D. <input type="checkbox"/> Overcast</p> <p>E. <input type="checkbox"/> Unknown</p>	<p>11. Visibility at Flight Altitude During NMAC in _____ Nautical or _____ Statute Miles (mark one):</p> <p>A. <input type="checkbox"/> Less than 1 Mile</p> <p>B. <input type="checkbox"/> 1 to 3 Miles</p> <p>C. <input type="checkbox"/> More than 3, but less than 5 Miles</p> <p>D. <input type="checkbox"/> 5 or More Miles</p> <p>E. <input type="checkbox"/> Unknown</p>																																																

FIGURE 8-14 FAA Form 8020-15 - Page 2

<p>12. Indicated Airspeed Immediately Before NMAC:</p> <p style="text-align: right;">Unknown</p> <p>A. Rptg <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> knots <input type="checkbox"/></p> <p>B. Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> knots <input type="checkbox"/></p>	<p>13. Aircraft Orientation at Closest Proximity (mark appropriate boxes to indicate position of opposing aircraft as viewed by pilots):</p> <table style="width:100%; border: none;"> <tr> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg Pilot</td> <td style="width:10%; text-align: center;">Other Pilot</td> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg Pilot</td> <td style="width:10%; text-align: center;">Other Pilot</td> </tr> <tr> <td>A.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Above</td> <td>F.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Behind</td> </tr> <tr> <td>B.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Below</td> <td>G.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Head On</td> </tr> <tr> <td>C.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Right</td> <td>H.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Overtaking, Straight Behind</td> </tr> <tr> <td>D.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Left</td> <td>I.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Overtaking, Convergence Angle</td> </tr> <tr> <td>E.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>In Front</td> <td>J.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unknown</td> </tr> </table>		Rptg Pilot	Other Pilot		Rptg Pilot	Other Pilot	A.	<input type="checkbox"/>	<input type="checkbox"/>	Above	F.	<input type="checkbox"/>	<input type="checkbox"/>	Behind	B.	<input type="checkbox"/>	<input type="checkbox"/>	Below	G.	<input type="checkbox"/>	<input type="checkbox"/>	Head On	C.	<input type="checkbox"/>	<input type="checkbox"/>	Right	H.	<input type="checkbox"/>	<input type="checkbox"/>	Overtaking, Straight Behind	D.	<input type="checkbox"/>	<input type="checkbox"/>	Left	I.	<input type="checkbox"/>	<input type="checkbox"/>	Overtaking, Convergence Angle	E.	<input type="checkbox"/>	<input type="checkbox"/>	In Front	J.	<input type="checkbox"/>	<input type="checkbox"/>	Unknown																																																																																																															
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<p>14. Was There an Air Traffic Control (ATC) Operational Error or Deviation? (mark one):</p> <p>A. <input type="checkbox"/> Yes, Specify Report No(s). _____</p> <p style="margin-left: 20px;">_____</p> <p>B. <input type="checkbox"/> No</p> <p>C. <input type="checkbox"/> Unknown</p>	<p>15. Weather Contributed to NMAC (check appropriate boxes):</p> <table style="width:100%; border: none;"> <tr> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg</td> <td style="width:10%; text-align: center;">Other</td> <td style="width:80%;"></td> </tr> <tr> <td>A.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Pilot Received Inaccurate Weather Data</td> </tr> <tr> <td>B.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Avoidance of Weather</td> </tr> <tr> <td>C.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Flying Visual Flight Rules (VFR) in Instrument Conditions</td> </tr> <tr> <td>D.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td>E.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Other, Specify _____</td> </tr> <tr> <td>F.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>None of the Above, Weather Not a Factor</td> </tr> </table>		Rptg	Other		A.	<input type="checkbox"/>	<input type="checkbox"/>	Pilot Received Inaccurate Weather Data	B.	<input type="checkbox"/>	<input type="checkbox"/>	Avoidance of Weather	C.	<input type="checkbox"/>	<input type="checkbox"/>	Flying Visual Flight Rules (VFR) in Instrument Conditions	D.	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	E.	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify _____	F.	<input type="checkbox"/>	<input type="checkbox"/>	None of the Above, Weather Not a Factor																																																																																																																																	
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<p>16. Aircraft Equipment Malfunction(s) Contributed to NMAC (mark appropriate boxes):</p> <table style="width:100%; border: none;"> <tr> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg</td> <td style="width:10%; text-align: center;">Other</td> <td style="width:80%;"></td> </tr> <tr> <td>A.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Communication</td> </tr> <tr> <td>B.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Transponder</td> </tr> <tr> <td>C.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Navigation, Excluding Autopilot</td> </tr> <tr> <td>D.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Autopilot</td> </tr> <tr> <td>E.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Altimeter</td> </tr> <tr> <td>F.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td>G.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Other, Specify _____</td> </tr> <tr> <td>H.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>None of the Above, Equipment Malfunction Not a Factor</td> </tr> </table>		Rptg	Other		A.	<input type="checkbox"/>	<input type="checkbox"/>	Communication	B.	<input type="checkbox"/>	<input type="checkbox"/>	Transponder	C.	<input type="checkbox"/>	<input type="checkbox"/>	Navigation, Excluding Autopilot	D.	<input type="checkbox"/>	<input type="checkbox"/>	Autopilot	E.	<input type="checkbox"/>	<input type="checkbox"/>	Altimeter	F.	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	G.	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify _____	H.	<input type="checkbox"/>	<input type="checkbox"/>	None of the Above, Equipment Malfunction Not a Factor	<p>17. Investigation Indicates the Pilot Lacked or Had Inadequate Knowledge or Experience With (mark appropriate boxes):</p> <table style="width:100%; border: none;"> <tr> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg</td> <td style="width:10%; text-align: center;">Other</td> <td style="width:80%;"></td> </tr> <tr> <td>A.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Aircraft</td> </tr> <tr> <td>B.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Avionics</td> </tr> <tr> <td>C.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>ATC Procedures</td> </tr> <tr> <td>D.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>ATC Terminology or Phraseology</td> </tr> <tr> <td>E.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>English Language</td> </tr> <tr> <td>F.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Preflight Planning</td> </tr> <tr> <td>G.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Crew Coordination</td> </tr> <tr> <td>H.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Weather</td> </tr> <tr> <td>I.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Airport</td> </tr> <tr> <td>J.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Current Charts and Approach Plates</td> </tr> <tr> <td>K.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td>L.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Other, Specify _____</td> </tr> <tr> <td>M.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>None of the Above</td> </tr> </table>		Rptg	Other		A.	<input type="checkbox"/>	<input type="checkbox"/>	Aircraft	B.	<input type="checkbox"/>	<input type="checkbox"/>	Avionics	C.	<input type="checkbox"/>	<input type="checkbox"/>	ATC Procedures	D.	<input type="checkbox"/>	<input type="checkbox"/>	ATC Terminology or Phraseology	E.	<input type="checkbox"/>	<input type="checkbox"/>	English Language	F.	<input type="checkbox"/>	<input type="checkbox"/>	Preflight Planning	G.	<input type="checkbox"/>	<input type="checkbox"/>	Crew Coordination	H.	<input type="checkbox"/>	<input type="checkbox"/>	Weather	I.	<input type="checkbox"/>	<input type="checkbox"/>	Airport	J.	<input type="checkbox"/>	<input type="checkbox"/>	Current Charts and Approach Plates	K.	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	L.	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify _____	M.	<input type="checkbox"/>	<input type="checkbox"/>	None of the Above	<p>18. Investigation Indicates the Pilot Was (mark appropriate boxes):</p> <table style="width:100%; border: none;"> <tr> <td style="width:10%;"></td> <td style="width:10%; text-align: center;">Rptg</td> <td style="width:10%; text-align: center;">Other</td> <td style="width:80%;"></td> </tr> <tr> <td>A.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Overworked</td> </tr> <tr> <td>B.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Distracted Specify _____</td> </tr> <tr> <td>C.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Fatigued</td> </tr> <tr> <td>D.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Actively Scanning</td> </tr> <tr> <td>E.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Not Actively Scanning</td> </tr> <tr> <td>F.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unable to Locate Traffic, Even With Traffic Advisory</td> </tr> <tr> <td>G.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Disoriented or Lost</td> </tr> <tr> <td>H.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Sick, Specify _____</td> </tr> <tr> <td>I.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Not Following ATC Instructions, Specify _____</td> </tr> <tr> <td>J.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Operating in Class A, B, C, or D Airspace Without Required Communication or Authorization</td> </tr> <tr> <td>K.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Operating with Transponder Off</td> </tr> <tr> <td>L.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Responding to TCAS Resolution Advisory</td> </tr> <tr> <td>M.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Unknown</td> </tr> <tr> <td>N.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Other, Specify _____</td> </tr> <tr> <td>O.</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>None of the Above</td> </tr> </table>		Rptg	Other		A.	<input type="checkbox"/>	<input type="checkbox"/>	Overworked	B.	<input type="checkbox"/>	<input type="checkbox"/>	Distracted Specify _____	C.	<input type="checkbox"/>	<input type="checkbox"/>	Fatigued	D.	<input type="checkbox"/>	<input type="checkbox"/>	Actively Scanning	E.	<input type="checkbox"/>	<input type="checkbox"/>	Not Actively Scanning	F.	<input type="checkbox"/>	<input type="checkbox"/>	Unable to Locate Traffic, Even With Traffic Advisory	G.	<input type="checkbox"/>	<input type="checkbox"/>	Disoriented or Lost	H.	<input type="checkbox"/>	<input type="checkbox"/>	Sick, Specify _____	I.	<input type="checkbox"/>	<input type="checkbox"/>	Not Following ATC Instructions, Specify _____	J.	<input type="checkbox"/>	<input type="checkbox"/>	Operating in Class A, B, C, or D Airspace Without Required Communication or Authorization	K.	<input type="checkbox"/>	<input type="checkbox"/>	Operating with Transponder Off	L.	<input type="checkbox"/>	<input type="checkbox"/>	Responding to TCAS Resolution Advisory	M.	<input type="checkbox"/>	<input type="checkbox"/>	Unknown	N.	<input type="checkbox"/>	<input type="checkbox"/>	Other, Specify _____	O.	<input type="checkbox"/>	<input type="checkbox"/>	None of the Above
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<p>22. Corrections and Additions to FAA Form 8020-21 (specify item number and new information or mark box): <input type="checkbox"/> FAA Form 8020-21 is complete and accurate.</p> <p>_____</p> <p>_____</p>																																																																																																																																																														

