

Aviation Safety Hazard Report

Date: [Insert Date]

Report Number: [Insert Report Number]

Reporter Information

Name: [Insert Name]

Position: [Insert Position]

Contact Information: [Insert Email and Phone Number]

Hazard Information

Location of Hazard: [Insert Location]

Date/Time of Occurrence: [Insert Date/Time]

Description of Hazard: [Insert Description]

Potential Impact

[Insert Details on Potential Impact on Safety]

Recommendations

[Insert Recommendations for Mitigation]

Follow-Up Actions

[Insert Any Follow-Up Actions Taken]

Signature

[Insert Reporter Signature]