



NATIONAL SAFETY and STANDARDS INVESTIGATION REPORTING FORM

THE INFORMATION SUBMITTED ON THIS FORM WILL BE USED BY AMFA IN PURSUIT OF THE ORGANIZATION'S OBJECTIVE TO PROMOTE THE SAFETY OF THE AIR TRANSPORTATION INDUSTRY THROUGH THE VIGILANCE IN THE APPLICATION OF MAINTENANCE STANDARDS. THE REPORT WILL BE TREATED AS CONFIDENTIAL AND DE-IDENTIFIED AS TO THE SOURCE OF ANY INFORMATION PROVIDED.

PLEASE COMPLETE THIS CONFIDENTIAL FORM AND SEND TO AMFA AT:
1725 I STREET, NW, SUITE 300, WASHINGTON, DC or FAX TO: (202) 822-8887

Local _____ Name _____ Employee# _____
Location/Station _____ A/C # _____ Fleet # _____
Date/Time: _____ A/C Type: _____ Contact #: _____

References (FAA Reg, G.N.M.M., AOP, UAL Reg., IPC, OSHA, etc.) _____
ATA Code _____
Log Book No. _____ Non-Routine No. _____

Please provide a written DESCRIPTION of the event –
(Use back or attach any additional information as needed – non-Company confidential)

1. Did the discrepancy involve components, systems, airframe, powerplants or equipment on which maintenance had been previously performed? YES NO
2. Was the prior work performed by an outside vendor (OSV)? YES NO
If performed by an OSV, please provide the vendor name _____.
3. Was the prior work performed in connection with a scheduled maintenance check? YES NO
If so, what type of check? _____
How recently had the prior work/check been performed? _____ (please answer in days).
- 4) Was the discrepancy directly related to the previously performed maintenance being accomplished improperly? YES NO If so, please explain above.
- 5) Was the discrepancy the result of a failure to perform required work? YES NO
If so, please explain above.

FOR INTERNAL USE ONLY: Sent to: Local National

REPORT NO. _____ Date Received _____ No. _____