

	<h2 style="margin: 0;">Occurrence Report</h2>	Consecutive No: ____/____
		Issue: __. __
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DOA No EASA.21J.360		

Design Holder Contact Data:	XtremeAir GmbH Harzstrasse 2 D-39444 Hecklingen	E-Mail: Fax: Phone:	airworthiness@xtremeair.de + 49 39267 60999 49 + 49 39267 60999 0
Electronic Report Form refer to:	www.xtremeair.com		
With Attention to:	Head of Design Organisation Head of Airworthiness		

1. General Information

Reporting Organisation:		Reporting Date:	
Contact Person:		Phone & E-Mail:	
Occurrence Title:		Occurrence Finding Date:	
ATA-Chapter:		Occurrence Location in A/C:	

Other Parties already informed: None EASA NAA CAMO ...

Occurrence Caused: No Damage/Injury Damage to Aircraft Damage to Property Personal Injury

2. Aircraft Information

Aircraft Type:		Aircraft S/N:	
Operator/ Owner:		Aircraft Registration:	
Aircraft Flight Hours:		Aircraft total Cycles:	

3. Engine, Propeller and Component Information (as relevant)

Information related to: Engine Propeller Component

Parts Catalogue (IPC) Reference:		Serial Number:	
Part Number and Name:		TCDS or ETSO Reference:	
Manufacturing Date:		Time since Overhaul (TSO):	
Time since New (TSN):			

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4. Occurrence Summary

Detection Phase:	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Parking	<input type="checkbox"/> En-Route	<input type="checkbox"/> Aerobatic
	<input type="checkbox"/> Scheduled	<input type="checkbox"/> Taxi	<input type="checkbox"/> Descent	<input type="checkbox"/> Hovering
	<input type="checkbox"/> Non-Scheduled	<input type="checkbox"/> Take-off	<input type="checkbox"/> Approach	<input type="checkbox"/> Manoeuvring
	<input type="checkbox"/> Operation	<input type="checkbox"/> Climb	<input type="checkbox"/> Landing	<input type="checkbox"/> Unknown
				<input type="checkbox"/> ...
Probable Cause(s):	<input type="checkbox"/> Design	<input type="checkbox"/> Repair	<input type="checkbox"/> Unapproved Part	<input type="checkbox"/> Not Determined
	<input type="checkbox"/> Production	<input type="checkbox"/> Fatigue	<input type="checkbox"/> Human Factors	<input type="checkbox"/> ...
	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Corrosion		
	<input type="checkbox"/> Operational			

5. Occurrence Details

Failure, Mal-function, Defect Description:
(incl. Photos, Sketches, etc.)

Suggestion:
(if any)

Aircraft still in Operation: Yes No Restricted

Present Position of the Aircraft:

Attachments to Occurrence Report: Yes No

References:

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