

## The Hashemite Kingdome of Jordan Civil Aviation Regulatory Commission

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PRELIMINARY PILOT DEVIATION				Incident Report Number						
REPORT										
Complete items 1 to 9 & 27 to 31 for all deviations; if surface deviation, also complete items 10 to 14; if air deviation, also complete items 15 to 25. Complete the form by hand or typewriter.								SO .		
Deviation:  a. Date UTC (Coordinated Universal Time)  b. UTC Time  c. Local Time  d. Nearest City or Town & State	2) Pilot information ( complete or mark box):  All information Unknown  a. Name & Address:  Name (first, middle, last)  Address:  City Country Zip  b. Daytime Telephone Number:  c. Pilot Certificate No.: (or enter			3) Deviation First Detected by:  □ Error Detection Program (EDB)  □ Radar Observation (Exclude EDP)  □ Visual Observation (tower)  □ Public, including pilots  □ Other (specify):						
	enter									
4) Aircraft information (complete or mark box): 5			of Operat	ion at T	ime of D	eviation:				
☐ All information Unknown	□ Jordani	ian Air Ca	ırrier							
Registration No.:	☐ Foreign Air Carrier									
	Commuter									
Flight No. or call-sign (if applicable):			☐ Air Taxi							
Make:	☐ General Aviation									
Model:	☐ Public (Governmental ☐ Military (specify service)									
	☐ Unknown									
			☐ Other (specify)							
6) Type of Flight Rules at Time of 7) Phase(s) of Flight When Devia Deviation:				ion Occ	urred:					
☐ Instrument Flight Rules (IFR)	□ Taxi	g .								
☐ Visual Flight Rules (VFR)	☐ Takeoff ☐ Landing									
☐ Special VFR	☐ Turning or Maneuvering ☐ Unknown									
□ Unknown	☐ Climb ☐ Descent		)nknown Other (spec	cify)			·			

PRELIMINARY PILOT DEVIATION REPORT				Incident Report Number										
(Continued)			_											
8) Number of Aircraft involved (provide data on any aircraft not listed in 4):					in item		Type of ppropriate		tion(s)	(mark				
☐ One Aircraft No. Flight No. or Call-sign Make					Model		rface (com	plete iter	ns 10 to 1	14 & 27				
□ Two							33)							
☐ Three						⊔ An	r (complete	items 15	to 33)					
☐ Four or more														
□ Unknown														
10) Type of Control at Surface Deviation Location:	ID a	Airport at Surface ation	12) Surface Deviatio  ☐ Takeoff without cl	☐ Careless or reckless aircraft										
☐ Ground Control		ation	☐ Takeoff on wrong	operation ay										
☐ Tower Control			☐ Landed without cl			☐ Careless or reckless airport operation								
□ Unknown			☐ Landed or takeoff	below we	eather	1	Operation □ Did not o		ht nlan					
			minima 				☐ Other (s	_	_					
			☐ Landed on wrong airport	taxiway o	or -									
			☐ Entered runway of clearance	r taxiway	without									
13) Loss of separation w	ith:	14) Closes	st proximity was:				Location i	n traffic	pattern	during				
☐ Ground vehicle ☐ Under 100 feet			100 feet			Deviation:								
☐ Personnel	rsonnel 🗆 100-499 feet													
☐ Another aircraft	on	on 499- 1.000 feet				□ cross wind								
ground		□ Over 1	.000feet			☐ Base leg								
☐ Another aircraft on ai	ir	□ Not Ap	pplicable		If Surface		☐ Final approach							
☐ Obstruction ☐ Unkno			wn	Deviation Only Skip To					☐ Entry or Downwind ☐ Departure leg or exit					
☐ Not applicable	•			Ite	m 26									
□ Unknown														
							J <b>nknown</b>							
							Other (speci	fy)						
				<u> </u>										
16) Aircraft altitude who	en	17) Trans	sponder:	18) a	. Was the	e Aircra	aft equippe	d with T	CAS?					
deviation detected: ☐ Operating with altitude		le	☐ Yes ☐ No ☐ Unknown b. If yes, was TCAS operating during deviation											
, feet MSL reporting		b												
☐ Unknown		☐ Opera	ating without altitud	le	□ Yes		No E	Unkno	wn					
_ C.IIIIIO II II			nctioning (broken or off	)   0	. If yes, v	vas TC	AS involved	l in devia	ation?					
		□ No Transponder			☐ Yes									
						es, describe involvement.								
				_										
				_										

PRELIMINARY PILOT DEVIATION REPORT				Incid	lent Re	port Nun	nber		
(Continued)									
19) Distance & degrees to nearest Fixed or facility to deviation:			20) Ope	erationa	al contro	ol area o	f aircraf	t:	
			☐ Class A airspace						
			☐ Class B airspace						
21) Location ID Facility (ies	) providing air traffic serv	vices	☐ Class C airspace						
during deviation			☐ Class G airspace						
22) Preliminary information	indicates the Air Deviatio	on type was:							
☐ ATC altitude clearance deviation ☐ Required aircr				pment r	ot opera	ating			
☐ ATC course clearance de	viation	☐ Careless or rec	ckless aircraft operation						
☐ Airspeed clearance violat	ion	☐ Unauthorized l	ow level	flying					
☐ Flying VFR when IFR re	quired	☐ Missed Compu	lsory Re	porting	g Point				
☐ Pilot unqualified for airci	raft or condition	☐ Noncompliance	with ot	her reg	ulation (	specify	JCAR 1	number	(s):
23) Preliminary information indicates the	24) If ATC altitude or co deviation, maximum			If there was loss of separation, closest proximity was:					
Airspace Deviation type was:	☐ No clearance deviation			o clearance deviation					
☐ Class A airspace	☐ Vertical feet	or 🗆 Unknown	□V€	ertical feet or □ Unknown					l
☐ Class B airspace	☐ Horizontalfe	et or miles	☐ Horizontal feet or miles or ☐ Unknown					3	
☐ Class C airspace	or □ Unknown		or	· 🗆 Uni	known				
☐ Class G airspace									
26) Brief description of devi	ation and comments:								

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(Continued)									
27) Attachments (specify		)	□N	o attach	ment				
28) Reporting office:	ividual completing Form								
☐ Location	Name:								
☐ Telephone Number:	Signature:								
	Date:								
30) Facility Manager approving Form	31) Report distri	buted to	•						
Name:	a								
Signature:	b								
Date:	d								
Date.	e								

CARC / AAID Form 31-5