

CHAPTER 169 INVESTIGATE A NEAR MID-AIR COLLISION

Section 1 Background

1. WPMS ACTIVITY CODE: 1720

3. OBJECTIVE. The objective of this task is to perform a Near Mid-Air Collision (NMAC) investigation according to national and district office standards. Successful completion of this task may or may not result in a factual report that establishes the facts, conditions, and circumstances surrounding the NMAC. Completion of this task may also result in an enforcement action or the counseling of an airman.

5. GENERAL.

A. Definition. A "Near Mid-Air Collision" is an incident associated with the operation of an aircraft in which a possibility of collision occurs as a result of proximity of less than 500 feet to another aircraft or where a report is received from a pilot or other flight crewmember stating that a collision hazard existed between two or more aircraft.

B. Responsibilities. The district office responsible for the NMAC investigation and report shall be:

(1) For air carrier aircraft, the Air Carrier District Office (ACDO) or Flight Standards District Office (FSDO) in whose area the incident occurred when an air carrier aircraft is involved.

(2) For other cases, the FSDO in whose area the incident occurred.

C. FAA Investigator-In-Charge (IIC). The assigned FAA IIC may request participation or documentation by other FAA divisions when deemed necessary.

(1) The FAA IIC will conduct the NMAC investigation, complete FAA Form 8020-15, and forward the final reports as described in Section 2, paragraph 5H of this chapter.

(2) The FAA IIC may need expertise by other offices (e.g., Medical, Security, etc.).

(3) The FAA IIC will determine the amount of participation needed by other offices to obtain all relevant facts concerning the occurrence.

(4) All participants called in will contribute to the report.

7. NMAC INVESTIGATIONS. Investigations should be completed within 90 days. If a NMAC report is withdrawn by the originator of the preliminary report or the nmac cannot be substantiated because of the inability to contact the originator, use FAA Form 8020-15 and provide a narrative statement to that effect in box H (CONCLUSIONS). The FAA IIC can usually conduct a NMAC investigation using the office telephone. When specific airman or aircraft data is required, it may be obtained from microfiche, ASAS, or a reputable and trusted operator (e.g., A & P, chief pilot, etc.).

A. Initial Notification. The FSDO receives telephone notification of the NMAC from an Air Traffic field facility or the Regional Operations Center (ROC). If written documentation is required from the AT facility, the FAA IIC may request that the AT facility provide a completed FAA Form 3556, NMAC Preliminary Report.

B. Other Notification. When the FAA IIC receives notification of a possible NMAC through direct contact with a flight crewmember, or the FAA IIC shall be responsible for notifying the nearest AT facility. The AT facility will then arrange for transmitting the operational priority message required. Investigation of the report shall be completed in accordance with the procedures in Section 2 of this chapter.

C. FAA Forms.

(1) FAA Form 3556, NMAC Preliminary Report, may be received at a FSDO as a result of several types of NMAC reporting. It may have been initiated by an AT facility after contact by a pilot or crewmember, or it may be used to transmit a Hazardous Air Traffic Report (HATR) or similar NMAC report received from the military.

(2) Investigation of NMAC Incidents, FAA Form 8020-15, should cover all factors involved in the incident. Include as an attachment to FAA Form 8020-15 copies of all related reports received from the AT facility.

(3) The investigation shall be coordinated with the AT facilities involved. Their findings and recommendations shall be considered in the investigation.

D. Witness Statements. When taking witness statements over the telephone use FAA Form 1360-33, Record of Visit, Conference, or Telephone.

E. Pilot Deviations. If the incident involves a pilot deviation and/or operational error, request that the reporting AT facility make a certified true copy of all pertinent AT communication tapes, flight progress strips, and radar printouts, if appropriate. These tapes should be sent to the district office as soon as possible so that the FAA IIC can utilize them for the investigation. These tapes will become a part of the final report.

F. NASA Reports. The pilot involved may have filed an Aviation Safety Reporting System (NASA) report regarding the NMAC. This may lead to a situation where the pilot involved may or may not want to make a personal statement about the incident, or the pilot may volunteer that a NASA report was filed. In either case, the FAA IIC should indicate in section H (CONCLUSIONS) if the pilot declined to make a personal statement. The FAA IIC should not request nor attempt to obtain this information from NASA. (Reference FAR § 91.57.)

G. Categories. The facts of an incident categorize it as either "Critical," "Potential," or "No Hazard." In situations defined as critical or potential, every effort should be employed to establish the identity of the aircraft involved before closing the file.

(1) Critical: A situation where collision avoidance was because of chance rather than an act on the part of the pilot. Less than 100 feet of aircraft separation would be considered critical.

(2) Potential: An incident which would probably have resulted in a collision if no action had been taken by either pilot. Proximity of 100 to 500 feet would usually be required in this case.

(3) No Hazard: When direction and altitude would have made a mid-air collision improbable regardless of evasive action taken.

H. Investigation Of Incidents Involving Military Aircraft. NMAC's involving military aircraft shall be investigated in by the FSDO in whose area it occurred, when:

(1) Obvious public safety is involved.

(2) The incident indicates possible violation of the FAR.

(3) The investigation and reporting of incidents shall follow the same guidelines as for civil incident investigations.

I. Analysis Considerations. During the documentation and investigation process certain evidence will require more detailed examination. The FAA IIC is continually evaluating evidence as a possible contributing factor or incident cause. The FAA IIC will utilize the procedure listed in related task #168, Section 1, paragraph 13 M, as a basis for forming an analysis.

9. UPGRADING A NMAC TO AN INCIDENT. If at any time during the investigation, facts are revealed which would indicate that the NMAC should be upgraded to an incident, the FAA IIC shall notify AVN-120, and the NTSB, if required, and the appropriate air traffic facility, following procedures in Related Task #167, Investigate an Incident.

Section 2 Procedures

1. PREREQUISITES AND COORDINATION REQUIREMENTS.

A. Prerequisites. This task requires knowledge of any related FAR and FAA policies and qualification as an Aviation Safety Inspector (Operations).

B. Coordination. This task requires coordination with the district office clerical personnel, operations and airworthiness unit supervisors, the Regional Operations Center (ROC), and the appropriate Air Traffic Facility. This task may also require coordination with the Accident Prevention Program Manager (APPM) or the Safety Analysis Division, ASF-200; the appropriate National Transportation Safety Board (NTSB) Field Office; National Safety Data Branch, AVN-120; Regional Office of Public Affairs; Regional Counsel; operator's representative; or the Military Safety Center.

3. REFERENCES, FORMS, AND JOB AIDS.

A. References.

- Any affected FAR
- NTSB Part 830
- Airman Information Manual
- National and office policy specific to accident/ incident investigation
- Order 1200.23, Public Availability of Information
- Order 2150.3, Compliance and Enforcement
- Order 7110.65, Air Traffic Control
- Order 8020.11, Aircraft Accident and Incident Notification, Investigation, and Reporting (most current edition)
- Order 8700.1, General Aviation Operations Inspector's Handbook
- Any office duty book/procedures

B. Forms.

- FAA Form 1360-33, Record of Visit, Conference, or Telephone Call
- FAA Form 3556, Near Mid-Air Collision Preliminary Report
- FAA Form 8020-15, Investigation of Near Mid-Air Collision Incident

C. Job Aids.

- Sample letters and figures
- Special emphasis forms as required by GENOTS, Notices, or National Policy
- Duty book

5. PROCEDURES.

A. Initial Notification. (See Related Task #166, Perform Telephone Standby.) Record initial NMAC information using Accident/Incident Report Job Aid, Figure 169-1 or 169-2.

(1) If notification is made by an Air Traffic (AT) Facility, verify that the AT facility has initiated:

(a) An FAA Form 3556 (Figure 169-3)

(b) The appropriate notification procedures

(2) Request from the reporting AT Facility the following:

(a) Flight progress strips

(b) ATC tapes

(c) Radar printouts

(d) Weather information

(3) If the AT facility has not initiated an FAA Form 3556, request that the form be submitted.

(4) If notification is made by a source other than an AT facility, notify the following:

(a) The responsible AT Facility, preferably a Flight Service Station and verify that the appropriate notification procedures will be initiated.

(b) The district office manager or the appropriate office representative, in accordance with district office policies, that a near mid-air collision (NMAC) has occurred.

(c) The Regional Operations Center (ROC), if required.

(d) National Transportation Safety Board (NTSB), if required.

(e) Contact the responsible AT facility and request that certified true copies of the following be submitted:

- (i) Flight progress strips.
- (ii) ATC tapes.
- (iii) Radar printouts.
- (iv) Weather information.

(5) If the incident involves an operational error and/or deviation, determine if the AT facility is going to submit an FAA Form 8020-11. (Figure 169-4)

(a) If the AT facility indicates that an FAA Form 8020-11 will not be submitted, terminate the task.

(b) If the AT facility indicates that an FAA Form 8020-11 will be submitted, make required notifications.

(6) Review reports.

B. WPMS. Open WPMS file.

C. Review AT Facility Reports. Upon receipt of the requested forms and reports:

- (1) Review for statistical data:
 - (a) Location of occurrence
 - (b) Time of occurrence
 - (c) Weather conditions at time of occurrence
 - (d) The reported separation distance.

(2) Determine the N-number of each aircraft involved using the information provided by the reporting AT facility and witness, flight crewmember, and passenger statements.

(a) If unable to identify all of the N-number's of the aircraft involved:

- (i) Notify unit supervisor.
- (ii) Terminate the task.

(b) If one or more of the N-number's can be identified, determine involved parties of each of the aircraft at the time of the occurrence.

D. Determine the Involved Parties. Using the identified N-number's and district office policy, contact Oklahoma City to determine the owners of each involved aircraft.

(1) If a privately owned aircraft, contact the owner for identification of pilot at the time of NMAC.

(2) If commercial aircraft contact chief pilot or director of flight operations for names of the flight crewmembers.

(3) Consideration shall be given to company operation procedures.

E. Contact the Involved Parties and Witnesses.

(1) Contact each of the owners and/or pilots for a statement regarding the NMAC. Record all pertinent information concerning the witness, including the witness' name, address, and a telephone number for future contact. Document the date and time of the occurrence and request a written statement, if required and the witness is willing.

(2) Obtain crewmember statements.

(3) Obtain passenger statements.

(4) Obtain any witness statements.

(5) Obtain other information.

(6) Obtain supporting data (e.g., aircraft, pilot, weather, etc.)

(7) If AT personnel or facilities are involved, request comments.

(8) If a violation of the FAR is suspected, follow the procedures in Chapter 182, Conduct a Violation Investigation.

(9) Determine category of NMAC.

F. Determine Category of NMAC. Determine the category of the NMAC using the information provided by the involved pilots, any witnesses, the documentation from the reporting AT facility, and the following:

(1) the separation distance between the aircraft;

(2) the evasive maneuvers used to avoid a mid-air collision; and

(3) the weather conditions at the time of the incident.

(4) If the NMAC is determined to be a No Hazard:

(a) notify the reporting facility as to the determination and the reasons why it was determined a No Hazard; and

(b) terminate the task.

(5) If the NMAC is determined to be Critical or Potential, complete FAA Form 8020-15. (Figure 169-5)

G. Complete FAA Form 8020-15.

(1) Complete FAA Form 8020-15 by filling in the appropriate blocks and attaching copies of all supporting documentation.

(a) State whether the incident occurred in an area of radar coverage and whether a transponder was installed. If the transponder was operating, give the mode and code that was being used.

(b) When altimeter system error is suspected, a detailed report shall be made concerning all factors which may have had a bearing on the occurrence (e.g., altimeter type, indicated altitude, airspeed, free air temperature, correction factor, and a logbook review of

altimetry complaints, etc.) Necessary action shall be taken to have the altimeter, transponders, and state systems checked.

(c) When applicable, indicate in section B.2 of FAA Form 8020-15, Investigation of Near Mid-Air Collision Incident, if the incident occurred in "Special Use Airspace," "Uncontrolled Airspace," or in an "Other" operational area. Specify the type of Special Use Airspace as defined in Order 7110.65, Appendix 4, and in the Airman's Information Manual (Pilot/ Controller Glossary), or the "Other" operational area (e.g., Military Training Route), in the appropriate data block of section B.2 of the report form.

(2) Sign and date the completed form.

(3) Upon completion, make the appropriate number of copies for distribution.

H. Report Distribution.

(1) Forward the original signed and dated FAA Form 8020-15 to AAI-200.

(2) Forward one copy to ASV-100.

(3) Forward one copy to the regional office.

(4) Place a copy in the appropriate district office file.

I. PTRS. Close PTRS file.

7. TASK OUTCOMES. The completion of this task will result in a completed FAA Form 8020-15.

9. FUTURE ACTIVITIES.

A. Provide information to the APPM

B. Possible violation investigation.

C. Testify at hearing

D. Disposal of investigative records

E. Counselling of an airman.

FIGURE 169-1 ACCIDENT/ONCIDENT REPORT JOB AID

| | | |
|------------------------------------|----|---|
| ACCIDENT _____ INCIDENT _____ | | |
| Location of Event _____ Date _____ | | |
| NTSB File # _____ | | |
| Aircraft Make/Model/Ident# _____ | | |
| YES | NO | GENERAL |
| | | 1. Air Carrier/Airport Security standards or operations involved? |
| | | 2. Airport certification safety standards or operations involved? |
| | | 3. Performance of FAA facilities or functions involved? |
| | | 4. Federal Aviation Regulations adequate? |
| | | 5. Corrective action regarding items 1, 2, 3, and/or 4 if applicable. |
| | | 6. Violation of FAR Sections: Type of Enforcement Action: ___ Administrative ___ Will be submitted ___ Legal ___ Submitted |
| | | 7. Airworthiness of FAA certificated aircraft involved? Corrective Action: |
| | | 8. Competency of FAA certificated airman/facility involved ___ Air Agency ___ Air taxi ___ Commercial operator ___ Air carrier ___ Airport ___ Airman Corrective Action: |

FIGURE 169-2 INCIDENT INFORMATION JOB AID

INSPECTOR RECEIVING NOTIFICATION: _____ DATE: _____

PRELIMINARY INFORMATION REPORT ASSIGNED TO: _____

Accident/Incident/Violations/Complaint/Other (Circle One) DATE: _____

NAME OF CALLER: _____ PHONE: () _____

Address: _____ Time: _____

NATURE OF OCCURRENCE _____

DATE OF OCCURRENCE _____ TIME _____ LOCATION _____

TYPE A/C _____ N# _____

DAMAGE: (Circle One) Destroyed/Substantial/Minor/None

ELT ACTIVATED: YES ___ NO ___ DEACTIVATED: YES ___ NO ___

A/C OWNER/OPERATOR _____ PHONE () _____

Address _____

PILOT _____ PHONE () _____

Address _____

CERT # _____ GRADE _____ RATINGS _____

BFR DATE _____ DOB _____ MEDICAL DATE _____ CLASS _____

TOTAL TIME _____ TIME IN TYPE _____ FLT PLAN VFR/IFR/NONE WX BRIEFING _____

PAX # _____ FATALITIES _____ INJURIES _____ SEAT BELTS _____

SHOULDER HARNESS USED _____

FIGURE 169-2 INCIDENT INFORMATION JOB AID con'd

TYPE OF FLIGHT: Pleasure/Business/Ag/Ferry/Training/135 OPS/ 121 OPS/133 OPS (Circle)

NOTIFICATION: (NAME/DATE/TIME)

FSS _____ **WP DUTY OFFICER** _____

AME _____ **REGIONAL OFFICE** _____

NTSB _____ **WASHINGTON DC** _____

| OFFICE RECORDS: | DATE | INITIALS |
|------------------------|-------------|-----------------|
|------------------------|-------------|-----------------|

| | | |
|-----------------------|-------|-------|
| WPMS COMPLETED | _____ | _____ |
|-----------------------|-------|-------|

| | | |
|-------------------------------|-------|-------|
| NTSB 6120.19 COMPLETED | _____ | _____ |
|-------------------------------|-------|-------|

| | | |
|-----------------------------|-------|-------|
| NTSB 6120.1 TO PILOT | _____ | _____ |
|-----------------------------|-------|-------|

| | | |
|-----------------------|-------|-------|
| AIRMAN RECORDS | _____ | _____ |
|-----------------------|-------|-------|

| | | |
|-------------------------|-------|-------|
| AIRCRAFT RECORDS | _____ | _____ |
|-------------------------|-------|-------|

| | | |
|------------------------|-------|-------|
| MEDICAL RECORDS | _____ | _____ |
|------------------------|-------|-------|

| | | |
|--|-------|-------|
| RECORDS OF VIOLATIONS/ACCIDENTS | _____ | _____ |
|--|-------|-------|

| | | |
|-------------------------------|-------|-------|
| WITNESS STATEMENTS (#) | _____ | _____ |
|-------------------------------|-------|-------|

| | | |
|------------------------|-------|-------|
| PICTURES (FROM) | _____ | _____ |
|------------------------|-------|-------|

| | | |
|---------------------|-------|-------|
| COPY TO APPM | _____ | _____ |
|---------------------|-------|-------|

FAR(s) VIOLATED _____

WPMS CODE _____ **WPMS #** _____

FIGURE 169-2 INCIDENT INFORMATION JOB AID con'd

DESCRIPTION (Use Additional Pages If Necessary):

FIGURE 169-3 FAA FORM 3556, NEAR MID-AIR COLLISION PRELIMINARY REPORT

| NEAR MIDAIR COLLISION PRELIMINARY REPORT | |
|--|---|
| REPORTING FACILITY LAX FSS | PHONE NO. 213-536-6542 |
| A. DATE AND TIME (GMT) OF INCIDENT 1/12/75 | B. LOCATION OF INCIDENT AND ALTITUDE OVER SLI VOR 3500 FT. |
| C. IDENTIFICATION AND TYPE OF REPORTING AIRCRAFT; AIRCREW DESTINATION; NAME AND HOME BASE OF PILOT N10208 C150 CRQ. GARY BROWN GUNNELL AVIATION SMO. | |
| D. IDENTIFICATION AND TYPE OF OTHER AIRCRAFT; AIRCREW DESTINATION; NAME AND HOME BASE OF PILOT N14864 PA 28 UNKNOWN UNKNOWN. | |
| E. TYPE OF FLIGHT PLANS; STATION ALTIMETER SETTINGS USED N10208 VFR 3000. N14864 UNKNOWN UNKNOWN. | |
| F. DETAILED WEATHER CONDITIONS AT FLIGHT ALTITUDE/LEVEL CLEAR VSBY UNRESTRICTED. | |
| G. APPROXIMATE COURSES OF BOTH AIRCRAFT; INDICATE IF ONE OR BOTH AIRCRAFT WERE CLIMBING/DESCENDING N10208 090 LEVEL FLIGHT. N14864 UNKNOWN UNKNOWN. | |
| H. REPORTED SEPARATION IN DISTANCE AT FIRST SIGHTING; PROXIMITY AT CLOSEST POINT HORIZONTALLY AND VERTICALLY; LENGTH OF TIME IN SIGHT PRIOR TO EVASIVE ACTION ONE HALF MILE. NONE 100 FT. 25 SECONDS. | |
| I. DEGREE OF EVASIVE ACTION TAKEN, IF ANY (from both aircraft, if possible); INJURIES IF ANY N10208 DESCENDING RIGHT TURN. NO INJURIES. N14864 NONE UNKNOWN. | |
| J. CLEARANCES ISSUED, IF PERTINENT N10208 NONE. N14864 UNKNOWN. | |
| K. NARRATIVE SUMMARY OF WHAT OCCURRED - INCLUDE IF ATS HAS TAKEN ACTION TO SECURE PILOT(S) STATEMENTS; WHICH FS DISTRICT OFFICE WILL BE INVESTIGATING; IF AN ATS CONTROLLER ERROR IS EVIDENT; IF ONE OR BOTH AIRCRAFT WERE WITHIN AN AREA OF RADAR COVERAGE; IF ONE OR BOTH AIRCRAFT WERE UNDER RADAR CONTROL; IF ONE OR BOTH AIRCRAFT WERE TRANSPONDER EQUIPPED; IF TRANSPONDER EQUIPPED, WERE THE TRANSPONDERS ON; AND IF ON, WHAT MODE AND CODE WERE BEING USED. THE DESTINATION OF THE OTHER AIRCRAFT HAS NOT BEEN DETERMINED. THE REPORTING PILOT DID NOT REQUEST TO BE MET AT DESTINATION BY AN FAA REPRESENTATIVE. ATS CONTROLLER ERROR IS NOT EVIDENT. BOTH AIRCRAFT WERE WITHIN AN AREA OF RADAR COVERAGE. N10208 WAS NOT UNDER RADAR CONTROL. N14864 UNKNOWN. N10208 WAS NOT TRANSPONDER EQUIPPED. N14864 UNKNOWN. AWE/FSDO/63 WILL BE INVESTIGATING. CORNELIUS STATION | |

FIGURE 168-4 FAA FORM 8020-11, INCIDENT REPORT

| DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION INCIDENT REPORT | | |
|--|--|--|
| TO: General Aviation District Office Federal Aviation Administration Barnes Municipal Airport Wearfield, Mass. 01085 | | FROM: Airport Traffic Control Tower Federal Aviation Administration Worcester Municipal Airport Worcester, Mass. 01602 |
| The following is a description of a deviation/incident. It appeared advisable to prepare a formal record, and a copy is being forwarded to acquaint you with its particulars. It is requested that, as necessary, these details be brought to the attention of the pilot or other individuals involved. We hope that through review, recommendations leading toward action to prevent recurrence of incidents of this type will be obtained. No reply is required; however, the undersigned will be glad to answer any questions at your convenience. Any action you can take to assist the Air Traffic Service to provide more efficient services will be appreciated. | | |
| TYPE OF INCIDENT Pilot deviation | TIME OF INCIDENT DATE: June 30, 1983 <input type="checkbox"/> DAY <input checked="" type="checkbox"/> NIGHT | INCIDENT NO. ORH-ATCT-13 |
| AGENCY/AIRCRAFT IDENTIFICATION N2345G, Piper Tripacer | | |
| NAME(S) OF PERSONNEL OR PILOT William Denton, Certificate #54321 | | |
| SUMMARY OF INCIDENT 2356Z N2345G, on VFR flight plan from Pittsburg, Pa., to Worcester, Mass., contacted Worcester Tower north of the city of Worcester and requested landing instructions. 2357Z Worcester Tower advised N2345G to remain north of the city (outside of control zone), issued current weather and traffic information - a DC-9, N1357, departing runway 27 westbound on V3. 2358Z N1357 took off on runway 27. 2359Z Worcester Tower observed an aircraft over northeast side of airport. Observed aircraft was identified as N2345G and landing clearance was issued for runway 27 with right turn in. 010001Z N2345G landed runway 27. Worcester weather 2355Z: Measured ceiling nine hundred overcast, visibility one and one-half miles, light rain showers, fog, wind two-six-five degrees at ten knots. Flight was conducted within a control zone in weather conditions below the basic VFR minima contrary to an ATC instruction. | | |
| REMARKS Pertinent voice recordings, flight progress strips, and weather data are on file at Worcester Tower. CC: AAT-340, ANE-500 | | |
| ATTACHMENTS None | FORWARDED DATE: July 1, 1983 SIGNATURE OF FACILITY CHIEF: <i>M.G. Harrington</i> M.G. Harrington | |

FAA Form 8020-11 (8-78)

FIGURE 169-5 FAA FORM 8020-15, INVESTIGATION OF A NEAR MID-AIR COLLISION INCIDENT

| INVESTIGATION OF NEAR MID-AIR COLLISION INCIDENT <i>(RPTG Indicates reporting aircraft - OTHER Indicates other aircraft involved)</i> | | | | | | | | | | | | | | | | | | | |
|--|---|-------------------------------|------------------------|-------------|------------------------------|-------|--|------------------------|---------------------------------------|-----------|------------|----------------------------|----------|--|--|-------|--|--|--|
| IDENTIFICATION A | 1 DATE AND TIME OF INCIDENT | | | | 2 AIRCRAFT OPERATORS | | | | | | | | | | | | | | |
| | 3 ESTIMATED ALTITUDES (MSL) | | | | RPTG | OTHER | AIRCRAFT | | RPTG | OTHER | AIRCRAFT | | | | | | | | |
| | 4 GEOGRAPHICAL LOCATION <i>(Nearest city/State)</i> | | | | 5 NEAREST 3 LTR FAA FACILITY | | | | 6 OVER WATER | | | | | | | | | | |
| | 7 AIRCRAFT INVOLVED <i>(Make model registration number)</i> | | | | | | | | | | | | | | | | | | |
| GENERAL INFORMATION B | RPTG | OTHER | 1 AIRCRAFT DESCRIPTION | | | | RPTG | OTHER | 2 OPERATIONAL AREA | | | | | | | | | | |
| | | | SINGLE ENGINE | | | | | | AIRPORT TRAFFIC AREA | | | | | | | | | | |
| | | | TWIN ENGINE | | | | | | CONTROL ZONE | | | | | | | | | | |
| | | | THREE ENGINE | | | | | | TERMINAL CONTROL AREA | | | | | | | | | | |
| | | | FOUR ENGINE | | | | | | TERMINAL RADAR SERVICE AREA | | | | | | | | | | |
| | | | MORE THAN FOUR ENGINE | | | | | | POSITIVE CONTROL AREA | | | | | | | | | | |
| | | | TURBO PROP | | | | | | ENROUTE - ON AIRWAY | | | | | | | | | | |
| | | | TURBO JET | | | | | | ENROUTE - OFF AIRWAY | | | | | | | | | | |
| | | | RECIPROCATING | | | | | | OCEANIC AIRSPACE | | | | | | | | | | |
| | | | HIGH WING | | | | | | SPECIAL USE AIRSPACE <i>(Specify)</i> | | | | | | | | | | |
| | | | LOW WING | | | | | | | | | | | | | | | | |
| | | | MULTIWING | | | | | | UNCONTROLLED AIRSPACE | | | | | | | | | | |
| | | HELICOPTER | | | | | | OTHER <i>(Specify)</i> | | | | | | | | | | | |
| | | OTHER <i>(Specify)</i> | | | | | | NONE | | | | | | | | | | | |
| | | | | | | | | UNKNOWN | | | | | | | | | | | |
| | | 3 TYPE OF AIR TRAFFIC CONTROL | | | RPTG | OTHER | 4 PHASE OF FLIGHT | | | RPTG | OTHER | 5 FLIGHT PLAN | | | | | | | |
| | | TOWER | | | | | TAKE OFF | | | | | VFR | | | | | | | |
| | | CENTER | | | | | CLIMB | | | | | IFR | | | | | | | |
| | | RADAR | | | | | LEVEL FLIGHT | | | | | NONE | | | | | | | |
| | | GCA PAR | | | | | DESCENDING | | | | | OTHER <i>(Specify)</i> | | | | | | | |
| | | OTHER <i>(Specify)</i> | | | | | LANDING | | | | | UNKNOWN | | | | | | | |
| | | NONE | | | | | TURNING | | | | | | | | | | | | |
| | | UNKNOWN | | | | | OTHER <i>(Specify)</i> | | | | | | | | | | | | |
| WEATHER C | 1 ATMOSPHERIC CONDITIONS AT FLIGHT ALTITUDE | | | | | | 2 VISIBILITY AT FLIGHT ALTITUDE | | | | | | | | | | | | |
| | SOLID INSTRUMENT CONDITIONS | | | | | | LESS THAN 1 MILE | | | | | | | | | | | | |
| | MORE THAN 5/10 CLOUDS | | | | | | 1 to 5 MILES | | | | | | | | | | | | |
| | LESS THAN 5/10 CLOUDS | | | | | | MORE THAN 5 MILES | | | | | | | | | | | | |
| | CLEAR | | | | | | UNLIMITED | | | | | | | | | | | | |
| | 3 FLIGHT CONDITIONS | | BRIGHT DAY | | BRIGHT NIGHT | | THUNDERSTORM | | DUSK | | TURBULENCE | | ICING | | | | | | |
| | | | GLARING SUN | | BLACK NIGHT | | PRECIPITATION | | DAWN | | HAZE | | FOG | | | | | | |
| SIGHTINGS D | 1 DISTANCE INITIAL SIGHTING | | | | 2 EVASIVE ACTION TAKEN | | | | 3 ALTIMETER SETTINGS | | | | | | | | | | |
| | LESS THAN 100 | | | | RIGHT TURN | | | | RPTG | | | | OTHER | | | | | | |
| | 100 - 500 | | | | LEFT TURN | | | | | | | | | | | | | | |
| | 500 - 1,000 | | | | CLIMB | | | | | | | | | | | | | | |
| | 1,000 - 2,000 | | | | DESCEND | | | | RPTG | | | | OTHER | | | | | | |
| | 2,000 - 1 MILE | | | | ABRUPT | | | | | | | | Magnetic | | | | | | |
| OVER 1 MILE | | | | LEVELED OFF | | | | | | | | 6 ESTIMATED TRUE AIR SPEED | | | | | | | |
| UNOBSERVED | | | | NONE | | | | | | | | RPTG | | | | OTHER | | | |
| PILOT DATA E | 1 REPORTING AIRCRAFT | | | | | | 2 OTHER AIRCRAFT | | | | | | | | | | | | |
| | A. OPERATOR <i>(Name/Address)</i> | | | | | | A. OPERATOR <i>(Name/Address)</i> | | | | | | | | | | | | |
| | B. FAA OPERATING CERTIFICATE | | | C. NUMBER | | | B. FAA OPERATING CERTIFICATE | | | C. NUMBER | | | | | | | | | |
| | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | | | | |

FAA Form 8020-15 15-791 SUPERSEDES PREVIOUS EDITION

FIGURE 169-5 FAA FORM 8020-15, INVESTIGATION OF A NEAR MID-AIR COLLISION INCIDENT Con'd

| | | | | | | | | | | | | | | | |
|--|--|---|--------------------------------------|-------------------------------------|--|--|--|----------------------|----------------------|--|--------------------------------------|-------------------------------------|---------------------|--|---------------------|
| OPERATOR/PILOT DATA (Cont.) | a TYPE OF FAA OPERATING CERTIFICATE <input type="checkbox"/> AIR CARRIER <input type="checkbox"/> OPERATING | | | | b TYPE OF FAA OPERATING CERTIFICATE <input type="checkbox"/> AIR CARRIER <input type="checkbox"/> OPERATING | | | | | | | | | | |
| | c PILOT (Name and address/home base) | | | | d PILOT (Name and address/home base) | | | | | | | | | | |
| | 3 PILOT CERTIFICATE INFORMATION | | | | 4 PILOT CERTIFICATE INFORMATION | | | | | | | | | | |
| | a CERTIFICATE NUMBER | | ATP <input type="checkbox"/> | STUDENT <input type="checkbox"/> | b TOTAL FLIGHT TIME | | c TIME IN EQUIPMENT | | d CERTIFICATE NUMBER | | ATP <input type="checkbox"/> | STUDENT <input type="checkbox"/> | b TOTAL FLIGHT TIME | | c TIME IN EQUIPMENT |
| | | COMMERCIAL <input type="checkbox"/> | MILITARY <input type="checkbox"/> | | | | | | | COMMERCIAL <input type="checkbox"/> | MILITARY <input type="checkbox"/> | | | | |
| | | PRIVATE <input type="checkbox"/> | OTHER <input type="checkbox"/> | | | | | | | PRIVATE <input type="checkbox"/> | OTHER <input type="checkbox"/> | | | | |
| INVESTIGATION | 1 CLOSEST POINT OF PASSAGE IN FEET | | | | 2 CLOSEST POINT OF PASSAGE IN FEET | | | | | | | | | | |
| | a ABOVE OTHER AIRCRAFT FT | | b BELOW OTHER AIRCRAFT FT | | a ABOVE RPTG AIRCRAFT FT | | b BELOW RPTG AIRCRAFT FT | | | | | | | | |
| | c LEFT OF OTHER AIRCRAFT FT | | d RIGHT OF OTHER AIRCRAFT FT | | c LEFT OF RPTG AIRCRAFT FT | | d RIGHT OF RPTG AIRCRAFT FT | | | | | | | | |
| | 3 ALTIMETRY ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | 4 ALTIMETRY ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | | | | | | | |
| | 5 PILOT ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | 6 PILOT ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | | | | | | | |
| | 7 AIR TRAFFIC OPERATIONAL ERROR a SYSTEM ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | 8 AIR TRAFFIC OPERATIONAL ERROR a SYSTEM ERROR <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | | | | | | | |
| | b SYSTEM DEVIATION <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | b SYSTEM DEVIATION <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | | | | | | | |
| | c MILITARY FACILITY DEVIATION <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | c MILITARY FACILITY DEVIATION <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | | | | | | | | |
| | 9 VIOLATION INDICATED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | FAR PART NUMBER | | | 10 VIOLATION INDICATED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | FAR PART NUMBER | | | | | |
| | 11 TRANSPONDER <input type="checkbox"/> YES OPERATING <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | MODE CODE | | | 12 TRANSPONDER <input type="checkbox"/> YES OPERATING <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> UNKNOWN | | | MODE CODE | | | | | |
| | 13 STATEMENT FROM PILOT OBTAINED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DECLINED | | | | 14 STATEMENT FROM PILOT OBTAINED <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> DECLINED | | | | | | | | | | |
| | STATUS | 1 FINAL EVALUATION <input type="checkbox"/> CRITICAL <input type="checkbox"/> POTENTIAL <input type="checkbox"/> NO HAZARD | | | | 2 INVESTIGATION <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED | | 3 DATE CLOSED / / | | | | | | | |
| BRIEF DESCRIPTION OF INCIDENT (No opinion or analysis) | | | | | | | | | | | | | | | |
| ATTACHMENTS | | | | | | DISTRIBUTION OF INVESTIGATION TO | | | | | | | | | |
| DATE | | REGION | | DISTRICT OFFICE | | TYPE/PRINTED NAME OF REPORTING INSPECTOR | | | | SIGNATURE | | | | | |