

ERC# _____

CONFIDENTIAL

ASAP SUBMISSION EVENT FORM

“USE INK ONLY”

DATE OF INCIDENT _____

YOU MUST ENTER YOUR HOME PHONE NUMBER AND HOME MAILING ADDRESS.

Name _____ Employee# _____

Home Address _____

City, State, Zip _____

Home Phone (Area Code) _____ - _____

Title _____ Base Station _____ Shop/Dock/Gate _____

WORK HISTORY

Normal work shift: Days _____ Evenings _____ Graveyard _____ Other _____

Did event occur on overtime __Y/N_____ Hours on duty at time of event _____

Time of event occurrence _____

Aircraft Type _____ Nose# _____ Flight _____

Component Name _____ CPN _____

S/N _____ Component Position _____

FINDINGS

Is this a FAR violation? _____Y/N_____ Safety Concern? _____Y/N_____

When did you become aware of this? (Date/Time) _____

How did you become aware of this? _____

FAA Enforcement Investigative Report Number (if EIR received) _____

ERROR EVENT

Please check the most appropriate type(s) of maintenance error:

- | | |
|----------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Improper Installation | <input type="checkbox"/> Improper Servicing |
| <input type="checkbox"/> Improper/Incomplete Repair | <input type="checkbox"/> Improper Trouble Shooting |
| <input type="checkbox"/> Actions causing FOD Damage | <input type="checkbox"/> Actions causing other Damage |
| <input type="checkbox"/> Inspection Requirement | <input type="checkbox"/> Engineering Repair/Alteration |
| <input type="checkbox"/> Improper Aircraft Release | <input type="checkbox"/> Improper/Incomplete Paperwork |
| <input type="checkbox"/> Actions Causing Personal Injury | <input type="checkbox"/> Other (explain) |

SUMMARY OF EVENT

What action have you taken to correct this?

CONTRIBUTING FACTORS

Please check the items that contributed to the event error.

Equipment/Tools

- | | |
|-----------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> 1. Unsafe | <input type="checkbox"/> 4. Mis-calibrated |
| <input type="checkbox"/> 2. Unreliable | <input type="checkbox"/> 5. Unavailable |
| <input type="checkbox"/> 3. Poor layout of controls or displays | <input type="checkbox"/> 6. Inappropriate for the task |

- 7. Cannot be used in intended environment
- 8. No instructions
- 9. Too complicated

- 10. Incorrectly labeled
- 11. Not used
- 12. Other (explain below)

Aircraft Design/Configuration/Parts

- 1. Inaccessible
- 2. Aircraft configuration variability
- 3. Parts unavailable

- 4. Parts incorrectly labeled
- 5. Easy to install incorrectly
- 6. Other (explain below)

Information (e.g., work cards, maintenance manuals, service bulletins maintenance tips, non-routines, IPC, etc.)

- 1. Not understandable
- 2. Unavailable/inaccessible
- 3. Incorrect
- 4. Too much/conflicting information

- 5. Update process is too long/complicated
- 6. Incorrectly modified manufacturer's MM/SB
- 7. Information not used
- 8. Other (explain below)

Technical Knowledge/Skills

- 1. Inadequate skills
- 2. Inadequate task knowledge
- 3. Inadequate task planning

- 4. Inadequate airline process knowledge
- 5. Inadequate aircraft system knowledge
- 6. Other (explain below)

Environment/Facilities

- 1. High noise levels
- 2. Hot
- 3. Cold
- 4. Humidity
- 5. Rain

- 6. Snow
- 7. Lighting
- 8. Wind
- 9. Vibrations
- 10. Cleanliness

- 11. Hazardous/toxic substances
- 12. Power sources
- 13. Inadequate ventilation
- 14. Other (explain below)

Leadership/Supervision

- 1. Inadequate planning/organizations
- 2. Inadequate prioritization of work
- 3. Inadequate delegation/assignment of task

- 4. Unrealistic attitude/expectations
- 5. Amount of supervision
- 6. Other (explain below)

Communication

- 1. Between departments
- 2. Between mechanics
- 3. Between shifts
- 4. Between maintenance crew and crew chief

- 5. Between crew chief and management
- 6. Between flight crew and maintenance
- 7. Other (explain below)

Individual Factors

- 1. Physical health (including hearing and sight)
- 2. Fatigue
- 3. Time constraints
- 4. Peer pressure
- 5. Complacency

- 6. Body size/strength
- 7. Personal event (e.g. family problem, car accident)
- 8. Workplace distractions/interruptions during task performance
- 9. Other (explain below)

Please describe specifically how the checked items contributed to the event error.

SIGNATURE _____

DATE _____

This report will automatically be forwarded to NASA for participation in the Aviation Safety Reporting System.

FAX THIS REPORT TO (918) 292-1021, ICS 292-1021

American Airlines
Tul Form #8282-5