

Nacionalna komisija za istraživanje nesreća i ozbiljnih
nezgoda vazduhoplova
National Commission for Investigation of Accident and
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PRIJAVA O NESREĆI ILI OZBILJNOJ NEZGODI VAZDUHOPLOVA

Accident or Serious Incident Report Form

Bijela polja popunite velikim štampanim slovima, označite sa "X" odgovarajuće kvadrate, nepotrebno precrtati
Fill all the items in block capital letters, mark appropriate fields with "X", disregard inapplicable items

1. Mjesto nesreće ili ozbiljne nezgode, Regija/Država / Location of the Accident or Serious Incident, District/State

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2. Datum i vrijeme / Date and Time

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3. Tip vazduhoplova / Aircraft Type

4. Registracija vazduhoplova / Aircraft Registration

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5. Kategorija vazduhoplova /
Weight category (MTO)

- između 0 -2250 kg / between 0 – 2250 kg
 između 2251 – 5700 kg / between 2251 – 5700 kg
 između 5701 – 27000 kg / between 5701 – 27000 kg
 između 27001 – 272000 kg / between 27001–272000 kg
 više od 272000 kg / more than 272000 kg
 nepoznato / unknown

6. Operator i vlasnik / Operator and Owner

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7. Adresa operatora/Address of Operator

8. Država operatora / State of Operator

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9. Plan leta / Flight plan

10. Broj leta ili pozivni znak / Flight Number or Call Sign

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11. Faze leta / Flight Phase

<input type="checkbox"/> Vuča / Towing <input type="checkbox"/> Parkiranje / Parking <input type="checkbox"/> Izguravanje / Pushback <input type="checkbox"/> Voženje prije poletanja / Taxiing before take off	<input type="checkbox"/> Poletanje / Take off <input type="checkbox"/> Početno penjanje (<1500ft)/ Initial climbing <input type="checkbox"/> Penjanje / Climbing <input type="checkbox"/> Lebdenje / Hover	<input type="checkbox"/> Krstarenje / Cruise <input type="checkbox"/> Poniranje / Descending <input type="checkbox"/> Čekanje / Holding <input type="checkbox"/> Tokom promjene nivoa leta / Flight level change	<input type="checkbox"/> Neuspjeli prilaz / Missed approach <input type="checkbox"/> Sletanje / Landing <input type="checkbox"/> Voženje posle sletanja / Taxiing after landing <input type="checkbox"/> Drugo / Others
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12. Vrsta leta / Type of Flight (Air transport operations)

<input type="checkbox"/> Komercijalni – Redovni / Commercial - Scheduled <input type="checkbox"/> Privatni / Private <input type="checkbox"/> Obuka / Training	<input type="checkbox"/> Čarter / Charter <input type="checkbox"/> Medicinski / Medical <input type="checkbox"/> Vlastite potrebe / Non commercial <input type="checkbox"/> Rekreacija / Pleasure <input type="checkbox"/> Poslovni / Business	<input type="checkbox"/> Poslovni / Business <input type="checkbox"/> Rad iz vazduha / Aerial work <input type="checkbox"/> Prelet / Ferry Instrukcija/ Instructional <input type="checkbox"/> Samostalno / Single <input type="checkbox"/> Duplo / Dual <input type="checkbox"/> Čarter / Charter	<input type="checkbox"/> Taksi / Taxi <input type="checkbox"/> Probni – tehnički / Test - Technical <input type="checkbox"/> Drugo / Other <input type="checkbox"/> Nepoznato / Unknown <input type="checkbox"/> Drugo / Other
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13. Vođa vazduhoplova
/ Pilot in Command

Prezime / Surname

Ime / First Name

14. Broj osoba u vazduhoplovu / <i>Number of persons on board</i>	Posada/Crew	Putnici/Passengers	Drugi/Others
15. Broj povrijeđenih osoba / <i>Number of persons injured</i>	Posada/Crew	Putnici/Passengers	Drugi/Others
Smrtno / <i>fatal</i>			
Ozbiljno / <i>serious</i>			
Male povrede / <i>minor</i>			
Bez povreda / <i>none</i>			
16. Šteta na vazduhoplovu / <i>Damage to the aircraft</i>	<input type="checkbox"/> uništen / <i>destroyed</i> <input type="checkbox"/> znatno / <i>substantial</i> <input type="checkbox"/> mala / <i>minor</i> <input type="checkbox"/> nikakva / <i>none</i> <input type="checkbox"/> nepoznata / <i>unknown</i>		
17. Šteta nanijeta trećim osobama (građevine, vozila, flora,...) / <i>Third party damage (buildings, vehicles, plants,...)</i>			
18. Opasne robe u vazduhoplovu / <i>Dangerous goods information</i>	<input type="checkbox"/> nema / <i>none</i>		

19. Meteorološki uslovi / 20. Doba dana / *Meteorological Conditions Light Conditions*

<input type="checkbox"/> VMC <input type="checkbox"/> IMC <input type="checkbox"/> CAT _____	<input type="checkbox"/> Dan / <i>Daylight</i>	<input type="checkbox"/> Svitanje / <i>Dawn</i>	<input type="checkbox"/> Noć / <i>Night</i>
	<input type="checkbox"/> Sumrak / <i>Dusk/twilight</i>	<input type="checkbox"/> Mjesečina / <i>Night-moonlight</i>	<input type="checkbox"/> Nepoznato / <i>Unknown</i>

21. Opis događaja / *Brief description*

22. Dodaci / *Attachments*

<input type="checkbox"/> Skice / <i>Sketches</i>	<input type="checkbox"/> Izvještaji / <i>Reports</i>	<input type="checkbox"/> Slike / <i>Photographs</i>	<input type="checkbox"/> Drugo / <i>Other</i>
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Detalji o podnosiocu prijave / *Report submitter details*

Ime podnosioca / <i>Name of reporter</i>	Telefon / <i>Phone</i>	Datum podnošenja / <i>Date</i>
Potpis podnosioca / <i>Signature of reporter</i> _____		