

USAF MISHAP REPORT

(Fill in all spaces applicable. If additional space is needed, use additional sheet(s).)

FOR OFFICIAL USE ONLY *(When filled in)*

1. DATE OF OCCURRENCE <i>(Year, Month, Day)</i>	2. VEHICLES(S) OR MATERIEL INVOLVED <i>(Mission Design Series and serial number if applicable)</i>	3. MISHAP EVENT NUMBER			
4. LOCATION OF OCCURRENCE		5. LOCAL AND ZULU TIME			
6. <input type="checkbox"/> DAY <input type="checkbox"/> NIGHT <input type="checkbox"/> DAWN <input type="checkbox"/> DUSK					
7. ORGANIZATIONS OWNING VEHICLE OR MATERIEL AT TIME OF MISHAP					
MAJOR COMMAND	NAF/CENTER	WING	GROUP	SQUADRON OR UNIT	BASE AND ICAO OR SORTS CODE
8. <i>(List of organizations of second vehicle or materiel, if they differ from item 7 above)</i>					
MAJOR COMMAND	NAF/CENTER	WING	GROUP	SQUADRON OR UNIT	BASE AND ICAO OR SORTS CODE
9. ORGANIZATION AND BASE SUBMITTING REPORT <i>(Do not abbreviate)</i>					
10. LIST OF PERSONNEL DIRECTLY INVOLVED					
LAST NAME, FIRST NAME, MIDDLE INITIAL	GRADE	SSN	ASSIGNED DUTY	AERO RATING	DEGREE INJURY*
*Enter applicable letters in DEGREE INJURY column: No Lost Time-NL; Lost Time-LT; Permanent Partial-PP; Permanent Total-PT; Fatal-FT					
11. FACTUAL SUMMARY OF CIRCUMSTANCES					
12. AUTHENTICATION					
CERTIFIED BY <i>(Title)</i>	TYPED NAME AND GRADE	SIGNATURE	DATE		

Fill out AF Form 711b on each vehicle or materiel involved in the mishap. Vehicle or materiel includes assets and property (AFI 91-204, Chapter 4). See guidance below for completing items that are not self-explanatory.

Item 2. Vehicles (s) or Materiel Involved. List the nuclear weapon or system, space system, aircraft/UAV, guided missile, explosives or chemical agents item, directed energy system, automotive vehicle, ground equipment, or any other item involved. Provide MDS and serial number, or other item number if they have numbers. If the report is on injuries only and no equipment is involved, enter "NA" in this block. If more than one vehicle or materiel is involved, list the one most heavily damaged first followed by the others. Continue on plain white paper if more space is needed.

Item 3. Mishap Event Number. (AFI 91-204, Chapter 6)

Item 4. Place of Occurrence. Give the location of the mishap and not the location where trouble first developed. Identify state, county and distance/direction from nearest town. Indicate distances in nautical miles (NM) or statute miles (SM) and points of the compass for direction. Also list latitude and longitude. For an on-base mishap, give the exact location (e.g., Bldg. T-465, Aircraft Hangar, Luke AFB AZ).

Item 6. Day, Night, Dawn, Dusk. Using the Air Almanac, dusk begins at official sunset and lasts 30 minutes. Dawn begins 30 minutes before sunrise and lasts until sunrise.

Item 7. Organization Owning Vehicle or Materiel at Time of Mishap. Substitute proper units and organizations if the structure of the organization possessing the vehicle or materiel is not the same as the headings of the boxes in item 7. For federalized ANG units, show the gaining command, Numbered Air Force, and the applicable ANG wing, group and squadron. For ANG units not federalized, show the ANG organizations and ANG as the MAJCOM. Enter the base name and ICAO code. If an ICAO code is not available, use Home Location Code from SORTS

Item 8. If a second vehicle or materiel is involved list it here. Continue on plain white paper if more than two vehicles or materials are involved.

Item 10. List of Personnel Directly Involved. List the information for all DoD personnel involved in the mishap. Include all persons injured on the ground as a result of the mishap. List the operator or person most directly involved first. Army and Navy personnel assigned to the Air Force are shown as Army or Navy. List all passengers aboard a mishap aircraft. List mission controller and flight safety officer for launch mishaps and list mission controller and the individual on console during an orbit mishap. Identify civilian employees by their employment agency or department (e.g., Civ-USAF, Civ-Army, Civ-FAA, and so forth). This list may also include personnel such as maintainers when maintenance is a factor in the mishap.

Assigned Duty: Use duty title abbreviations. For crewmembers involved in aviation mishaps use the duty symbol shown on the AFTO Form 781, Arms Aircrew/Mission Flight Data Document.

Aero Rating. Use the current rating held. Leave blank if not rated.

Item 11. Factual Summary of Circumstances. This summary of the mishap may be disclosed under the Freedom of Information Act. Therefore, there are two main considerations for completing this item. First, the summary must be completely factual. It must not draw on privileged sources. Do not use any information in Part 2 of the report not found in the exhibits in Part 1. For example, do not include statements indicating what the operator heard, felt, or saw. Second, the Factual Summary of Circumstances must lead the reader through the sequence of events involved in this mishap.

To meet these objectives, present the summary in sequence. List the facts, conditions, and circumstances just as the safety investigators discovered them, without reference to attachments. State how the mishap occurred, not why. Do not discuss the importance of facts or how they relate to investigative conclusions. Provide as complete a factual summary as possible. Many requests under the Freedom of Information Act are for an account of the mishap, but not for the report itself. In these cases, only the factual summary of circumstances is released.