Form I.4.

Mutual Aid Box Alarm Systems Unmanned Aircraft Systems Program (UAS)

Accident Reporting Form

OVERVIEW

This document gathers information required by the Federal Aviation Administration (FAA) and MABAS-Illinois to investigate all UAS accidents resulting in injuries to persons or damage to property. This report shall only be filed in the event of a UAS-related injury to any person or damage to the UAS airframe or 3rd party property as a result of operations.

SCOPE AND INTENT

This report was developed with the intention of identifying, documenting, and mitigating potential hazards and injury risks during MABAS UAS operations. While the data provided in this report may be used by the Federal Aviation Administration in the event of an investigation, the intent of the following form is to be non-punitive.

NOTE: This Accident report does not supersede or replace any reporting of accident or injury by the AHJ or sponsoring agency. UAS flight crews shall, when required by the AHJ complete all required reporting documentation on behalf of the AHJ. Any local injury reports filed after a UAS accident shall be noted in and attached to this form.

WHEN TO FILE

This document shall be filed in the event any of the following conditions are met as a result of a UAS accident or incident on a MABAS Response.

- 1. Serious or life-threatening injury to any person, (Reference 49 CFR. §830.2) including but not limited to:
 - Any life-threatening injury requiring immediate medical treatment.
 - Hospitalization for more than 48 hours, commencing within 7 days from the date the injury was received.
 - A fracture of any bone (except simple fractures of fingers, toes, or nose).
 - Severe hemorrhages, nerve, muscle, or tendon damage.
 - Injuries involving any internal organ.
 - Injuries involving second- or third-degree burns, or any burns affecting more than 5 percent of the body surface.
- 2. Major airframe damage to the UAS or 3rd party property, including, but not limited to:
 - Total UAS airframe loss.
 - Substantial damage to the unmanned aircraft system where there is damage to the airframe, power plant, or onboard systems that must be repaired prior to further flight.
 - Damage to property other than the UAS.
 - A catastrophic inflight malfunction (such as an inflight fire).

WHEN NOT TO FILE

1. An accident report shall not be filed for small, superficial, or minor injuries that do not require substantial or immediate treatment.

Examples of exempt injuries:

- Minor lacerations, scrapes, cuts, or avulsions.
- Minor bruising, sprains or strains.
- Simple fractures of fingers, toes, or nose.
- Any injury not warranting immediate medical treatment.

- 2. An accident report shall not be filed for superficial or cosmetic damage that does not affect flight performance, for normal wear, or for non-flight-related damage to the UAS.
 - Examples of exempt UAS damage:
 - Scratches or damage to paint and cosmetic surfaces or coatings.
 - Normal wear of mechanical components.
 - Damage caused during storage or transport.
 - Component malfunction or failure during non-flight tests.

DIRECTIONS

- 1. Provide necessary medical treatment to injured persons.
- 2. Photographically document the following:
 - a. UAS impact site.
 - b. Undisturbed UAS airframe and debris.
 - c. Extent of injuries.
- 3. Notify the MABAS UAS Section Chief and IC.
- 4. Complete the following form in its entirety.
- 5. Submit to the UAS Section Chief and IC within 12 hours.
- 6. Recover, but **DO NOT DISPOSE** of or alter in any way, UAS wreckage or debris until instructed.

GENERAL INFORMATION		
Date		
RPIC Name	RPIC Certificate	Number
Sponsoring Agency	Division No.	
Dispatch Number	RPIC Contact Ph	one
ENVIROMENT		
Please fill-in the following information	as reported at the time the inciden	t took place:
Please fill-in the following information	as reported at the time the inciden	t took place:
Please fill-in the following information	as reported at the time the inciden Wind Direction	t took place: Cloud Bases
Location Local Time	Wind Direction	Cloud Bases
Location	Wind Direction Wind Speed	Cloud Bases Visibility
Location Local Time AIRCRAFT	Wind Direction Wind Speed	Cloud Bases Visibility
Location Local Time AIRCRAFT	Wind Direction Wind Speed	Cloud Bases Visibility

Yes No	Yes	ed to 3 [™] Party Property? No □
Description of Damage to Aircraft:		
Description of Damage to 3 rd Party F	Property	
INJURIES Please fill-in following information fo	r any serious injuries that occurre	d as a result of the incident:
Number of Persons Injured: Injuries Serious or Life Threatening	EMS Respond	led? Yes No
Yes No	EMS Report N	
Description of Injuries: Please descr	ibe any resulting injuries to the be	st of your ability.

IMAGES

Please attach	and describe	e any relevant	images of th	e accident scene.	If no images are	available,	skip this
step.							

Image File Name:		Image Description:	
Image File Name:		Image Description:	
Image File Name:		Image Description:	
Image File Name:		Image Description:	
Image File Name:		Image Description:	
ATTESTATION			
and understand the knowledge and abi Administration in th	e above form, and veri lity. I understand that the e event of an investigat	the aircraft involved in the aforem fy the above information is true and the above information may be submaion into the cause of the incident. If ify and mitigate further hazards dur	nd correct to the best of my nitted to the Federal Aviation understand the intent of this
	Print Name		Date
	Signature		