



Zimbabwe Non Type Certified Aircraft Association ZNTCAA@gmail.com

INCIDENT/ACCIDENT REPORT FORM

Date:	Aircraft Registration:					
Incident:	(Minor Structural Failure or Near Miss)					
Accident:	(Injuries or	uries or Structural Failure)				
	-					
Details of Pilot in Command						
Name:		Member of Z	NTCAA:		YES	/ NO
Address:						
Age:	Sex:			Weight (kg):		
Aviation Experience/Licences Held:	•			•		
Approximate Number of Pilot Microlight Ho	ours:	Weightshift		3 Axis:		Gyro:
Length of Time Since Previous Flight:				•		
Details of Second Pilot/Passenger						
Name:	Member of ZNTCAA:		YES / NO			
Address:		-				
Age:	Sex:			Weight (kg):		
Aviation Experience/Licences Held:	•			'		
Approximate Number of Microlight Hours:		Pilot:			Passenger:	
Length of Time Since Previous Flight:						
Type of Microlight:	Weightshift:		3 Axis:		Auto-Gyro:	
Manufacture:	Homebuilt:		Kit:		Factory:	
Make:	Year and C	ountry of Manuf	acture:			
Airframe Hours Since Inspection:	-		Engine Hour	s Since Inspect	tion:	
Aircraft Inspections Carried our Prior to Inc	sident:	Annual:		Daily:		Pre-Flight:
				-		





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Engine:	Horsepower:	Fuel:	Ignition:	SINGLE / DUAL
Propeller Material:	WOOD / NYLON	Number of Blades:		
Type of Wing (if non-standard)				
Date of Incident/Accident:		Approximate Time:		
Weather Conditions (Wind Velocity	//Turbulence/Direction):			
Location/Length/Description of Tak	e-Off Runway Used:			
Location/Distance of Incident/Accid	dent Site from Destination Runwa	ay:		
Purpose of Flight:	CROSS COUNTRY	/ LOCAL / INSTRUCTIO	NAL / DEMC	ONSTRATION
Approximate Fuel on Board at Time	e of Incident:			
Structural Damage to Microlight:				
Injury to second Pilot/Passenger:				
Pilots Comments on What Happen	ed/What Would Have Prevented	the Accident/Incide		
Second Pilot/Passengers Commer	nts on What Happened:			
Advice to Others:				