

SAFETY MANAGEMENT SYSTEM

Note: Please forward this form $\underline{as\ soon\ as\ possible\ within\ 24hrs}$ to the following:

GD_FYSAFETY and your Section Manager.

SILA ISIKAN SEMUA MAKLUMAT UTAMA (KOTAK TEBAL) PLEASE COMPLETE ALL PRIMARY DETAILS (BOLD BOX)

Nama Pemberi Maklumat: Shahreil Rezza Bin Mohamed Reporter's Name: shafi			No. Staf: 850257 Staff no:	8502575 Email / Tel No: rezza.shafi@fireflyz.com			@fireflyz.com.my		
Tarikh Kejadian: 2023-07-18 Waktu Kejadian: 1100 Event Time:			No Pendaftaran Kenderaan/Pes Acft/Vehicle Reg:		esawat: 9M-FYK	1	No Penerbangan: 1338 Flight No.:		
Tarikh Berlepas: 2	023-07-18	Dari: SZB From:	Ke: JHB To:		Nakhoda: SHAHREIL REZZA Pilot in Command:				
Lokasi: MID AIR Location:			Bil Juruterbang: 2 No of T/Crew:	2	Bil Anak Kapal Kabin: 2 Bil Penumpar No of Cabin Crew: Pax:				
	0	n atau anak kapal yang terlibat							
Please supply contact details of other personnel or crew involved Name: SHAZRUL IZRAN BIN SALEHUDDIN				aff No.: 8502395 Email / Tel No: shazrul.salehuddin@fir			huddin@fireflvz.com.		
Name:			Staff No.:		Email / Tel No:				
Name:			Staff No.:		Email / Tel No:				
Name:			Staff No.:		Email / Tel No:				
Adakah laporan ini su Do you wish this repo		ated as confidential?	O Ya/ Yes		⊚ Tidak/ No				
Please tick your depart									
PILOT (ASR)⊚		CABIN CREW (CSR)		ND OPS STA RITY (GIR)O	AFF & E&	M STAF	F (GIR))O		
FY STAFF (OPEN REDEPT:	EPORT) O		FY STA	AFF (HAZAR	D) O				
LOKASI TEPAT HAZA	AD/EXACT	LOCATION OF HAZARD							
Bangunan/ <i>Building</i>			Lokasi/	Lokasi/ <i>Location</i>					
Alamat/ Address									
EVENT DESCRIPTION Sila isikan ruang ini da	V <i>ACCIDE</i> n juga ruan	ALANGAN / KEJADIAN / HAZ. ENT /INCIDENT / HAZARD / Eng di belakang sekiranya berker required additional pages. Pi	DAMAGE / INJURIE	S an jelas.	AAN				
DESCEND 5000FT (ACADEMY 14X).F TIME ATC SAID TH GIVEN FOR FY133 AFTER A FEW LAI	PASSING PILOT FLY HE EARLIE B8 WAS 50 PSE PRES	ND UNDER JOHOR RADAR 6 8500FT TCAS TA TRIGGE ING (PIC) ASKED AGAIN AT ER ALTITUDE CLEARED W/ 000FT.PILOT FLYING(PIC) F SSED IAS BUTTON TO INITI DMPLIED WITH THE RA.FLI	RED WITH AMBE TC OF THE CLEAR AS 9000FT WHER PRESSED ALT BU ATE CLIMB TO 90	R SYMBOL RED ALTITU EAS BOTH TTON ON A 000FT. AT T	OF INTRUDER SIGNATION OF INTRUDER SIDE AND TRAFFIC CREW ARE SURE AFCS TO LEVEL OF THAT TIME AN RAF	ON 500F CONFIF THAT T FF AIRC	T BELOW RMATION.THIS THE EARLIER RAFT AND JUST		
Cuti Sakit / MC		hari/days *Jika cuti sa				kepada J			
Suggestion CONTR	OLLER SU	TC FOR BETTER AIRCRAFT (I IPERVISION.IF AIRCRAFT VIC ER RADAR							
Lampiran Document S Supporting Docume		ed:							





SAFETY MANAGEMENT SYSTEM

				ripsi kejadian sekiranya ruang ini tid quired and fill in any details overl			
Please add all relevant details					Continued		
OPERATIONAL DETAILS							
Runway Used:	Operational Phase:			Operating Restrictions :			
Runway Condition:	Aircraft Landing Light	s:		Effect On Flight:			
AIRSPACE DETAILS							
ALT AMSL: 8500 f	t ALT AGL: or	FLT Level:	ft	IAS: 240	kts / mach		
TCAS: RA	Intruder Realtive Alt(+	Intruder Realtive Alt(+/-): 500		Intruder Relative Postion: 12 o'clo			
Distance and Relative Bearing from Station or \	Vaypoint: 15NM FROM (OSRUP					
WEIGHT DETAILS							
	g Landing Weight:		kg	Fuel Dumped:	kg		
WEATHER DETAILS	•						
Wind Direction: de	g Wind Speed:		kts	Temperature	°C		
Cloud Cover Type:	Base:			Tops:			
QNH: hp	a Visibility:						
lcing:	Turbulence:		Precipitation Type:				
Precipitation Intensity:	Light Condition:						
GO- AROUND (For data info))ENVIRONMENT	0	ATC	O UN	NSTABILISED APPROACH)O			
OTHER(Please Specify):		0					
_							
RECORDS Tapes Requested:		ATC Advised:					
rapes requested.		ATC Advised.					
BIRD/WILDLIFE HAZARD INFORMATION	T			T ₋ .			
	Species:		Size:				
Number Seen:	Number Hit:		A/C Part Struck:				
DANGEROUS GOODS DETAILS							
Cargo: Pax Baggage:		Detection Location:					
Acceptance Location:		Shipper's Name and Address:					
Class or Division Used:]					
Correct Class or Division:							
Airway Bill #:							
AFFECTED PASSENGER OR CREW DETAILS	i						
Name:	Seat No:	Gender:		Contact No:			
Address:							
Name:	Seat No:	Gender:		Contact No:			
Address:				·			





SAFETY MANAGEMENT SYSTEM

Sambungan deskripsi kejadian serta lain-lain maklumat (jika perlu) Continue description and any other details (if required)							