

Note: Please forward this form 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: HASSAN BIN ABU BAKAR Reporter's Name:		No. Staf: 8502577 Staff no:	Email / Tel No: Hassan.abubakar@fireflyz.com.my	
Tarikh Kejadian: 2023-07-22 Event Date:	Waktu Kejadian: 2035 Event Time:	No Pendaftaran Kenderaan/Pesawat: 9M-FYJ Acft/Vehicle Reg:	No Penerbangan: 1263 Flight No.:	
Tarikh Berlepas: 2023-07-22 NIL:	Dari: WMKN From:	Ke: WMSA To:	Nakhoda: HASSAN BIN ABU BAKAF Pilot in Command:	
Lokasi: WMSA Location:	Bil Juruterbang: 2 No of T/Crew:	Bil Anak Kapal Kabin: 2 No of Cabin Crew:	Bil Penumpang 54 Pax:	

Sila berikan butiran kakitangan lain atau anak kapal yang terlibat.
Please supply contact details of other personnel or crew involved.

Name: ERNA WAHEEDA BT OTHMAN	Staff No.: 8500860	Email / Tel No: erna.othman@fireflyz.com.my
Name: MUHAMMAD ILHAMI BIN ABDUL LATIF	Staff No.: 2357087	Email / Tel No: ilhami.latif@fireflyz.com.my
Name: MOHAMAD FHAIZZUDDIN BIN ABD KADIR	Staff No.: 2356598	Email / Tel No: fhaizzuddin.abdkadir@fireflyz.com.my
Name:	Staff No.:	Email / Tel No:
Adakah laporan ini sulit? Do you wish this report to be treated as confidential? ☐ Ya/Yes ☒ Tidak/No		

Please tick your department & type of report

PILOT (ASR)Ⓞ	CABIN CREW (CSR)Ⓞ	GROUND OPS STAFF & SECURITY (GIR)Ⓞ	E&M STAFF (GIR)Ⓞ
FY STAFF (OPEN REPORT) Ⓞ		FY STAFF (HAZARD)Ⓞ	
DEPT:		DEPT:	

LOKASI TEPAT HAZAD/EXACT LOCATION OF HAZARD

Bangunan/ Building	Lokasi/ Location
Alamat/ Address	

DESKRIPSI PERISTIWA KEMALANGAN / KEJADIAN / HAZAD / KEROSAKAN / KECEDERAAN

EVENT DESCRIPTION ACCIDENT / INCIDENT / HAZARD / DAMAGE / INJURIES

Sila isikan ruang ini dan juga ruang di belakang sekiranya berkenaan. Sila tulis dengan jelas.
Please use this space, and any required additional pages. Please write clearly.

During the approach into Subang on the last sector from Terengganu, a bird strike was encountered at 1600 feet. A stain mark was left on the windshield, but no abnormalities were observed and the aircraft landed safely. The engineer has been notified.

Please continue description on page 2

Cuti Sakit / MC hari/days *Jika cuti sakit melebihi 3 hari, Ketua Jabatan perlu melaporkan kepada JKPP dalam masa 24 jam
***If MC is more than 3 days, HOD must report to DOSH within 24 hours**

Saranan Suggestion	N/A
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Lampiran Document Sokongan Supporting Documents Attached:	IMG_4428.jpeg,IMG_4435.jpeg,
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SAFETY MANAGEMENT SYSTEM

SAFETY REPORT

MR1

Lampirkan kertas A4 bersama-sama borang ini beserta dengan deskripsi kejadian sekiranya ruang ini tidak mencukupi.
Continue description on additional A4 paper if extra space is required and fill in any details overleaf as applicable

Cabin Log

Please add all relevant details

Continued

OPERATIONAL DETAILS

Runway Used: 15	Operational Phase: APPROACH	Operating Restrictions : N/A
Runway Condition: DRY	Aircraft Landing Lights: SERVICEABLE	Effect On Flight : N/A

AIRSPACE DETAILS

ALT AMSL: ft	ALT AGL: or FLT Level: ft	IAS: kts / mach
TCAS:	Intruder Realtime Alt(+/-): ft	Intruder Relative Postion: o'clock
Distance and Relative Bearing from Station or Waypoint:		

WEIGHT DETAILS

Take Off Weight 20693 kg	Landing Weight: 19946 kg	Fuel Dumped: N/A kg
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WEATHER DETAILS

Wind Direction: VRB deg	Wind Speed: 04KT kts	Temperature 29 °C
Cloud Cover Type: FEW	Base: 1800 ft	Tops: N/A ft
QNH: 1010 hpa	Visibility: 1000	
Icing: N/A	Turbulence: N/A	Precipitation Type: N/A
Precipitation Intensity: N/A	Light Condition: N/A	

GO- AROUND (For data info))ENVIRONMENT○

ATC○ UNSTABILISED APPROACH)○

OTHER(Please Specify): ○

RECORDS

Tapes Requested:	ATC Advised:
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BIRD/WILDLIFE HAZARD INFORMATION

	Species: UNKNOWN	Size: UNKNOWN
Number Seen: 1	Number Hit: WINDSHIELD	A/C Part Struck: WINDSHIELD

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

Name:	Seat No:	Gender:	Contact No:
Address:			
Name:	Seat No:	Gender:	Contact No:
Address:			

Sambungan deskripsi kejadian serta lain-lain maklumat (jika perlu)

Continue description and any other details (if required)