



BIRD / OTHER WILDLIFE STRIKE REPORTING FORM

1. Name of Operator / Aircraft Callsign <div style="text-align: center; font-size: 24px;">.</div>	2. Aircraft Make/Model <div style="text-align: center; font-size: 24px;">B737-800</div>	3. Engine Make/Model 																																																																
4. Aircraft Registration <div style="text-align: center; font-size: 24px;">9M-MSE</div>	5. Date of Incident <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 40px; height: 20px; text-align: center;">Day</div> <div style="border: 1px solid black; width: 40px; height: 20px; text-align: center;">Month</div> <div style="border: 1px solid black; width: 40px; height: 20px; text-align: center;">Year</div> </div>	6. Local Time of Incident <input type="checkbox"/> Dawn <input type="checkbox"/> Dusk <input type="checkbox"/> HR <input type="checkbox"/> MIN <input type="checkbox"/> Day <input type="checkbox"/> Night <input type="checkbox"/> AM <input type="checkbox"/> PM																																																																
7. Airport Name <div style="text-align: center; font-size: 24px;">KUL</div>	8. Runway Used <div style="text-align: center; font-size: 24px;">32R</div>	9. Location if En Route (Nearest Town/Reference & State) <div style="text-align: center; font-size: 24px;">Take-off Roll</div>																																																																
10. Height (AGL) 	11. Speed (IAS) <div style="text-align: center; font-size: 24px;">100kts</div>																																																																	
12. Phase of Flight <input type="checkbox"/> A. Parked <input type="checkbox"/> B. Taxi <input checked="" type="checkbox"/> C. Take-off Run <input type="checkbox"/> D. Climb <input type="checkbox"/> E. En Route <input type="checkbox"/> F. Descent <input type="checkbox"/> G. Approach <input type="checkbox"/> H. Landing Roll	13. Part(s) of Aircraft Struck or Damaged <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 10%; text-align: center;">Struck</th> <th style="width: 10%; text-align: center;">/</th> <th style="width: 10%; text-align: center;">Damaged</th> <th style="width: 20%;"></th> <th style="width: 10%; text-align: center;">Struck</th> <th style="width: 10%; text-align: center;">/</th> <th style="width: 10%; text-align: center;">Damaged</th> </tr> </thead> <tbody> <tr> <td>A. Radome</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>H. Propeller</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>B. Windshield</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>I. Wing/Rotor</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>C. Nose</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>J. Fuselage</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>D. Engine No. 1</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>K. Landing Gear</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>E. Engine No. 2</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>L. Tail</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>F. Engine No. 3</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>M. Lights</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>G. Engine No. 4</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td>N. Other: (Specify)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>			Struck	/	Damaged		Struck	/	Damaged	A. Radome	<input type="checkbox"/>		<input type="checkbox"/>	H. Propeller	<input type="checkbox"/>		<input type="checkbox"/>	B. Windshield	<input type="checkbox"/>		<input type="checkbox"/>	I. Wing/Rotor	<input type="checkbox"/>		<input type="checkbox"/>	C. Nose	<input type="checkbox"/>		<input type="checkbox"/>	J. Fuselage	<input type="checkbox"/>		<input type="checkbox"/>	D. Engine No. 1	<input type="checkbox"/>		<input type="checkbox"/>	K. Landing Gear	<input type="checkbox"/>		<input type="checkbox"/>	E. Engine No. 2	<input type="checkbox"/>		<input type="checkbox"/>	L. Tail	<input type="checkbox"/>		<input type="checkbox"/>	F. Engine No. 3	<input type="checkbox"/>		<input type="checkbox"/>	M. Lights	<input type="checkbox"/>		<input type="checkbox"/>	G. Engine No. 4	<input type="checkbox"/>		<input type="checkbox"/>	N. Other: (Specify)	<input type="checkbox"/>		<input type="checkbox"/>
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14. Effect on Flight <input type="checkbox"/> None <input type="checkbox"/> Aborted Take-Off <input type="checkbox"/> Precautionary Landing <input type="checkbox"/> Engines Shut Down <input type="checkbox"/> Other: (Specify)	15. Sky Condition <input type="checkbox"/> No Cloud <input type="checkbox"/> Some Cloud <input type="checkbox"/> Overcast	16. Precipitation <input type="checkbox"/> Fog <input type="checkbox"/> Rain <input type="checkbox"/> Snow <input checked="" type="checkbox"/> None																																																																
17. Bird/Other Wildlife Species 	18. Number of birds seen and/or struck <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Number of Birds</th> <th style="width: 10%; text-align: center;">Seen</th> <th style="width: 10%; text-align: center;">/</th> <th style="width: 10%; text-align: center;">Struck</th> </tr> </thead> <tbody> <tr> <td>1</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>2-10</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>11-100</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>More than 100</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>	Number of Birds	Seen	/	Struck	1	<input type="checkbox"/>		<input type="checkbox"/>	2-10	<input type="checkbox"/>		<input type="checkbox"/>	11-100	<input type="checkbox"/>		<input type="checkbox"/>	More than 100	<input type="checkbox"/>		<input type="checkbox"/>	19. Size of Bird(s) <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large																																												
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20. Pilot Warned of Birds <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																		
21. Remarks (Describe damage, injuries and other pertinent information)																																																																		
Reported by (Optional)	Title : <div style="text-align: center; font-size: 24px;">16/07/2023</div> Date:	*send all bird remains including feather fragments to:																																																																

THIS INFORMATION IS REQUIRED FOR AVIATION SAFETY



SUPPLEMENTARY BIRD/WILDLIFE STRIKE REPORTING FORM OPERATOR

COSTS AND ENGINE DAMAGE INFORMATION

A. BASIC DATA

Operator :
 Aircraft Make/Model :
 Engine Make/Model :
 Aircraft Registration :
 Date : day month year
 Aerodrome/Location if known :

B. COST INFORMATION

Aircraft time out of service hours
 Estimated cost of repairs or replacement U.S.\$ (in thousands)
 Estimated other costs
 (e.g. loss of revenue, fuel, hotels) U.S.\$ (in thousands)

C. SPECIAL INFORMATION ON ENGINE DAMAGE STRIKE

Engine position number	1	2	3	4
<i>uncontained failure</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>fire</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>shutdown – vibration</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>shutdown – temperature</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>shutdown - fire warning</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>shutdown - other (specify)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....				
<i>shutdown - unknown</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estimated percentage of thrust loss *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Estimated number of birds ingested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Bird/Wildlife species.....

* These may be difficult to determine but even estimates are useful.

Send all bird remains feather fragments to:

Reported by:

Title :

Date: