

TECHNICAL REPORT OF U.S. ARMY AIRCRAFT ACCIDENT
PART XII - WEATHER/ENVIRONMENTAL

For use of this form, DA Pamphlet 385-40; the proponent agency is OCSA.

REQUIREMENTS CONTROL SYMBOL
 CSOCS-309

1. ENVIRONMENTAL ROLE (Check "D, S, U, or N" to Indicate Definite, Suspected, Undetermined, or None)					9. OTHER ENVIRONMENTAL CONDITIONS PRESENT DURING ACCIDENT SEQUENCE											
a. Weather Role <input type="checkbox"/> D <input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N			b. Other Environmental Condition (Specify in blk 9) <input type="checkbox"/> D <input type="checkbox"/> S <input type="checkbox"/> U <input type="checkbox"/> N		a. Animals			h. Foreign Objects								
2. GENERAL DATA AT TIME OF OCCURRENCE					c. Surface			j. Vibration								
a. Temperature ° C (est)		d. Pressure Altitude (+ or-)			d. Noise			k. Dust								
b. Altimeter Setting (HG)		e. <input type="checkbox"/> IMC <input type="checkbox"/> VMC			e. Chemicals			l. Other (Specify) _____								
c. Altimeter Reading (MSL)					f. Radiation			m. None								
3. SKY CONDITION					g. Glare											
a. Clear		d. Overcast (_____ feet)			10. AIRCRAFT ICING				Icing Severity							
b. Scattered (_____ feet)		e. Partial Obscuration			<input type="checkbox"/> None <input type="checkbox"/> Yes				Trace (1)		Light (2)		Moderate (3)		Severe (4)	
c. Broken (_____ feet)		f. Obscuration			a. Main Rotor Blades											
4. HORIZON					b. Wings											
a. Visible		c. Obscured			c. Propellers											
b. Partially Obscured					d. Control Surfaces											
5. VISIBILITY (Naut. miles)					e. Rotor Head											
6. OBSTRUCTION TO VISION					f. Tail Rotor											
a. Natural		(7) Blowing Dust			g. Fuselage											
(1) Dust		(8) Blowing Sand			h. Pitot Static System											
(2) Fog		(9) Blowing Snow			i. Aileron											
(3) Ground Fog		(10) Sun			j. Engine Air Inlet											
(4) Haze		(11) Rain			k. Fuel Vents											
(5) Ice Fog		(12) Other (Specify) _____			l. Antenna											
(6) Smoke		(13) None			m. Windscreen											
b. Induced (rotorwash, etc.)					n. Other											
(1) Blowing Snow		(4) Blowing Spray			11. MOON ILLUMINATION DATA (for night accidents)											
(2) Blowing Sand		(5) Other (Specify) _____			a. Moon Above Horizon <input type="checkbox"/> Yes <input type="checkbox"/> No											
(3) Blowing Dust		(6) None			b. Moon Visible <input type="checkbox"/> Yes <input type="checkbox"/> No											
7. WINDS					c. Moon _____ Degrees Above Horizon											
a. Aloft (at en route altitude) Dir _____ Velocity _____					d. Percent of Moon Illumination											
b. Surface Winds		(1) Surface Wind Dir. and Variance			e. Moon _____ O'clock Position From Flight Path/Nose of Aircraft											
		(2) Surface Wind Velocity and Gust Spread (KT)			f. Time (LCL) of Moon Rise and Set _____ L Rises _____ L Sets											
8. SIGNIFICANT WEATHER (a maximum of three may be selected)					12. TURBULENCE											
a. Hail		h. Thunderstorm			<input type="checkbox"/> None (If "Yes" check "C" for continuous, "I" for intermittent, and "O" for occasional)											
b. Sleet		i. Gusty Winds			<input type="checkbox"/> Yes				C		I		O			
c. Fog		j. Freezing Rain			a. Light				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
d. Drizzle		k. Other (Specify) _____			b. Moderate				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
e. Rain		l. Unknown			c. Severe				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
f. Snow		m. None			d. Extreme				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
g. Lightning					e. None				<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>			
13. FORECAST <input type="checkbox"/> Correct <input type="checkbox"/> Incorrect <input type="checkbox"/> Unknown																
14. REMARKS (Use additional sheet if required)																
15. CASE NO.			a. Date (YYYYMMDD)			b. Time			c. Acft Serial No.							