

# WIRE WATCH PROGRAM

Pilot's Name: \_\_\_\_\_ Pilot's Lic #: \_\_\_\_\_

Company Name: \_\_\_\_\_ Prov.: \_\_\_\_\_

Aircraft Type: \_\_\_\_\_ Call Letters: \_\_\_\_\_

Aircraft Owner: \_\_\_\_\_ Date: \_\_\_\_\_

## INCIDENT INFORMATION

Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m.

Accident:  yes  no:

If yes,

- Area secured  yes  no
- Hydro company notified  yes  no
- Time notified: \_\_\_\_\_  a.m.  p.m. Who you spoke to: \_\_\_\_\_
- Transport Canada notified  yes
- Time notified: \_\_\_\_\_  a.m.  p.m. Who you spoke to: \_\_\_\_\_
- Injuries: \_\_\_\_\_
- Aircraft Structural Damage  major  minor  none

If no,

- Area secured  yes  no
- Hydro company notified  yes  no
- Time notified: \_\_\_\_\_  a.m.  p.m. Who you spoke to: \_\_\_\_\_
- Measures taken to prevent future incidents: \_\_\_\_\_

Legal Land Location: \_\_\_\_\_

Weather: \_\_\_\_\_

Detailed description of incident: \_\_\_\_\_

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Pilot's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Complete the form and fax to the CAAA office at (780) 413-0076

