



Langley Regional Airport Incident Report

SMS # _____
RCMP File # _____
<i>Office Use Only</i>

Section 1 –To be completed by the person making or receiving the report

Accident Incident Hazard Incursion Other: _____

Number of Injuries Fatal _____ Serious _____ Minor _____ None _____

Location: _____ Date: _____ Time of Incident: _____ AM /PM
Day/Mo/Yr

Nature of Incident (brief explanation):

Names of Person(s) Involved / Witnesses:

Name: _____ E-mail: _____

Home Address: _____ Phone #: _____

Name: _____ E-mail: _____

Home Address: _____ Phone #: _____

Factual Description of the Incident (chronological order):

Reporting Person Contact Info:

Name: _____ Phone: _____ E-mail: _____

Home Address: _____

Section 2 -To be completed by YNJ Management:

Report Received By:

Name: _____

Date: _____

Recommendations:

Resultant Actions:

Report Reviewed By Management Team:

Name: _____

Signature: _____

Date: _____