



# ASAP REPORTING FORM



CONFIDENTIAL

CONTRIBUTING FACTORS	
Please identify any item(s) that contributed to the event. Include as much information as possible; i.e. Workcard number, AMM ref, Tooling description, raining, snowing.	
<b>Equipment/Tools</b> , e.g., Unsafe, Unavailable, No instructions, Not used:	
<b>Aircraft Design/Configuration/Parts</b> , e.g., Parts unavailable, A/C configuration variability	
<b>Technical Data(Work cards, AMM, IPC, etc.)</b> , e.g., Unavailable/inaccessible, Incorrect	
<b>Environment</b> , e.g., Weather conditions , High noise levels	
<b>Facilities</b> , e.g., Lighting, Hazardous/toxic substances, Power sources, Access (ladders, stands)	
<b>Communication</b> , e.g., Between mechanics, flight crews, Shift turn over	
<b>Individual Factors</b> , e.g., Time constraints, Fatigue, Complacency, Personal Event	
<b>FAX Completed Report to 713-324-3026</b>	
Signature	Date
<p><u>Personal Information</u>, <u>Work History</u> and <u>Summary of Event</u> sections are required. Your submission will not be accepted without providing this documentation. The information is necessary to provide feedback and/or to contact you concerning this event.</p> <p>The information provided in this report are confidential, and will only be used in accordance with the provisions of the Continental Airlines Technical Operations ASAP program.</p> <p>The data from this report will be forwarded to NASA on your behalf for participation in the Aviation Safety Reporting System.</p>	

For ASAP Office Use Only					
ERC#		Receipt Date		Time	