

## WAKE TURBULENCE REPORT FORM

For use by pilots involved in Wake Vortex incidents which occur in the NAT Region, WATRS Area MNPS / RVSM airspace, PAC RVSM airspace, NCA, and EUR-RVSM airspace. The information will be forwarded for inclusion in the appropriate Wake Vortex database.

Address(es) provided on O-2 of this form.

### SECTION A

Date of Occurrence	Time (UTC) *Day / Night	Operator	Flight Number
Aircraft Type and Series		Registration	Aircraft Weight (KG)
Origin and Destination	Position in Lat & Long	Cleared Track Coordinates	
Flight Levels	Speed / Mach No.	Flight Phase: *Cruise / Climb / Descent	Were you turning?  *Yes / No
Did you apply a Track Offset?  *Yes / No	Size of Track Offset  Nautical Miles	Was ATC informed?  *Yes / No	
Met Conditions IMC VMC	Actual Weather Wind      Visibility      Cloud      Temperature /              km              /              °c	Degree of Turbulence  *Light/Moderate/Severe	
Other Significant Weather?			

\*(Circle the appropriate reply only)

### SECTION B

1. What made you suspect Wake Vortex as the cause of the disturbance? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Did you experience vertical acceleration?    \*Yes / No If yes, please describe briefly \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What was the change in attitude? (Please estimate angle)  
Pitch\* \_\_\_\_\_ Roll\* \_\_\_\_\_ Yaw\* \_\_\_\_\_ \*Increase / Decrease

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4. What was the change in height, if any? \_\_\_\_\_
  5. Was there buffeting? Yes / No
  6. Was there stick shake? Yes / No
  7. Was the autopilot engaged? Yes / No
  8. Was the autothrottle engaged? Yes / No
  9. What control action was taken? Please describe briefly \_\_\_\_\_
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10. Could you see the aircraft suspected of causing the wake vortex? Yes / No
  11. Did you contact the aircraft suspected of causing the vortex? Yes / No
  12. Was the aircraft suspected of causing the vortex detected by TCAS? Yes / No
- If yes, to any question 10-12, what type of aircraft was it? \_\_\_\_\_
- And where was it relative to your position? \_\_\_\_\_
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(Estimated separation distances) \_\_\_\_\_

Were you aware of the preceding aircraft before the incident? Yes / No

**OTHER INFORMATION**

13. Have you any other comments that you think may be useful? \_\_\_\_\_
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- 
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Signed \_\_\_\_\_

Name (BLOCK LETTERS) \_\_\_\_\_ Date \_\_\_\_\_

(\*Circle the appropriate reply only)

When complete, please send this form to:

<b>NAT REGION/WATRS (CMA)</b>	<b>PAC REGION (APARMO) NORTHERN CANADIAN AIRSPACE (NAARMO)</b>	<b>EUR REGION (EUROCONTROL)</b>
Directorate of Safety and Operations North Atlantic Central Monitoring Agency National Air Traffic Services Ltd T8G7, One Kemble Street London WC2B 4AP United Kingdom Telephone: (0) 207 832 5562 Fax: (0) 207 832 5013 Email: <a href="mailto:jim.benson@nats.co.uk">jim.benson@nats.co.uk</a>	William J. Hughes Technical Center (WJHTC) Aviation Systems Analysis & Modeling Branch (ACT-520) Atlantic City International Airport Atlantic City, NJ 08045 Telephone +1 609 485 6263 Fax +1 609 485 5117 Email: <a href="mailto:aparmo@admin.tc.faa.gov">aparmo@admin.tc.faa.gov</a>	RVSM Programme Support Office EUROCONTROL Rue de la Fusée, 96 B-1130 Brussels Belgium Telephone: + 32 (2) 729 4633 Fax: + 32 (2) 729 4634 Email: <a href="mailto:phil.evans@eurocontrol.int">phil.evans@eurocontrol.int</a>

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