

DANGEROUS GOODS OCCURRENCE REPORT

DGOR no.

See the Notes on the next page of this form. Those boxes where the heading is in *italics* need only be completed if applicable.

Mark type of occurrence:

Accident: ☐

Incident: ☐

Other Occurrence: ☐

1. Operator:	2. Date of occurrence:	3. Local time of occurrence:	
4. <i>Flight date:</i>	5. <i>Flight no.:</i>	6. <i>Departure date:</i>	
7. <i>Destination airport:</i>	8. <i>Aircraft type:</i>	9. <i>Aircraft destination:</i>	
10. Location of occurrence:	11. Origin of the goods:		
12. Description of the occurrence, including details of injury, damage etc. (if necessary continue on the next page)			
13. Proper shipping name (including technical name):			14. UN/ID no. (when known):
15. <i>Class/division (when known):</i>	16. <i>Subsidiary risk(s):</i>	17. <i>Packing group:</i>	18. <i>Category (class 7 only):</i>
19. <i>Type of packing:</i>		20. <i>Packaging specification marking:</i>	
21. <i>No. of packages:</i>		22. <i>Quantity (or transport index, if applicable):</i>	
23. <i>Reference no. of Air Waybill:</i>			
24. <i>Reference no. of courier pouch, baggage tag, or passenger ticket:</i>			
25. <i>Name and address of shipper, agent, passenger etc.:</i>			
26. Other relevant information (including suspected cause, any action taken):			
27. Name and title of person making report:		28. Telephone no.:	
29. Company/dept. Code, E-mail or Info Mail code:		30. <i>Reports ref.:</i>	
31. Address:		32. Date Signature:	

Description of the occurrence (continuation of 12):

Notes: