

WAKE VORTEX ENCOUNTER REPORTING FORM FOR AIR NAVIGATION SERVICE PROVIDERS (ANSPs)

When in receipt of a pilot reported wake encounter, please attempt to collect the following information:

Date and Time	Date of incident	
	Time (UTC)	
Encountering	Make	
	Model	
	Series	
	Phase of flight	<input type="checkbox"/> take-off <input type="checkbox"/> initial climb <input type="checkbox"/> climb <input type="checkbox"/> cruise <input type="checkbox"/> descent <input type="checkbox"/> holding <input type="checkbox"/> approach <input type="checkbox"/> final <input type="checkbox"/> touch-down <input type="checkbox"/> taxiing <input type="checkbox"/> other
	Runway	<input type="checkbox"/> L <input type="checkbox"/> C <input type="checkbox"/> R
Generating	Make	
	Model	
	Series	
	Phase of flight	<input type="checkbox"/> take-off <input type="checkbox"/> initial climb <input type="checkbox"/> climb <input type="checkbox"/> cruise <input type="checkbox"/> descent <input type="checkbox"/> holding <input type="checkbox"/> approach <input type="checkbox"/> final <input type="checkbox"/> touch-down <input type="checkbox"/> other
	Runway	<input type="checkbox"/> L <input type="checkbox"/> C <input type="checkbox"/> R
Location	Location	
	State	
	Airport	
Spacing between	Vertical	
	Horizontal	
	Any additional information related to the encounter	

Weather	Wind	
	Visibility	
	Cloud	
	Temp	
	Dew Point	

Send to:

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