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| <p>U.S. DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION SAFETY IMPROVEMENT REPORT</p> | <p>This report is authorized by law (49 U.S.C. 1421) while you are not required to respond, your cooperation is needed to make the results of this survey comprehensive, accurate and timely.</p> |
| <p>PURPOSE: To invite your participation in The General Aviation Accident Prevention Program. This form is provided for you to offer ideas for program improvement or to report hazards on or adjacent to airport traffic patterns; incomplete, inaccurate or obsolete flight data (charts or publications); malfunctioning navigation aids; contaminated fuel; etc. This report is not intended to be used to report violations of Federal Aviation Regulations.</p> | |
| <p>USE THE SPACE BELOW TO TELL US ABOUT YOUR PROGRAM IDEAS OR ABOUT A HAZARD THAT MIGHT CAUSE AN ACCIDENT. <i>(If you are reporting a hazard, tell us what it is, where it is located, and when it was noticed.)</i></p> | |
| <p>DATE</p> | <p>YOUR NAME AND ADDRESS <i>(Optional)</i></p> |

FAA FORM 8740-5 (3-80)

FORMERLY FAA FORM 8000-7 (2-71)

PAPERWORK REDUCTION ACT STATEMENT: The information collected on this form is necessary to ensure safe operation of aircraft in the national airspace. The information will be used to identify unsafe situations in the national airspace system. It is estimated that it will take approximately 9 minutes to complete the form. Completion of this form is voluntary. There is no confidentiality provided or needed. Note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The control number for this collection of information is 2120-0057. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20