NAMIBIA CIVIL AVIATION AUTHORITY
(Tel) +264 61 702 2212 | Web: http://www.dca.com.na | Private Bag 12003 Windhoek Namibia

DANGEROUS GOODS INVESTIGATION REPORT

Time and Date of incident:	Report number:	
Place of occurrence:	Type of Report:	
	Violation observed	
	Incident	
	Accident	
	Other	
Name and address of shipper:	Documents attached:	
	Air waybill	
	Shipper's declaration	
	Acceptance check list	
	Notification to captain	
Name and address of consignee:	Photographs	
	Analysis report	
	Witness statement	
	Police report	
	Other	
Name and address of operator:	Additional Information:	
	Airport of departure:	
	Airport of destination:	
	Aircraft registration:	
	Flight No:	

Dangerous Goods involved:

UN / ID no.	Proper shipping name	Class / Division	Sub risk	Number and type of packages	Packing instruction and packing group

Chronological report of occurrence

_____
_____
_____
_____
_____
_____
_____
_____
_____

Violation to the regulation:

Action taken by Inspector:

REPORT COMPILED BY:

Name and Title of Inspector	*Signature*	*Date*
Telephone	*Fax*	*E-mail*