



NTSB TDA Accident Notification Supplemental Form

DISCLAIMER: The information requested on this worksheet will be used by the NTSB and our federal partners during the initial launch phase of an NTSB accident investigation. Completing this worksheet is voluntary; however, **air carriers must still comply with notification and reporting requirements in accordance with 49 C.F.R. 830.**

Instructions: Please complete the following survey with as much information as possible. This information should be submitted to the TDA Division **within 1-2 hours** after the air carrier makes the official accident notification to the NTSB Response Operations Center. For questions, please call TDA at 202-314-6185.

AIR CARRIER ACCIDENT INFORMATION

Certificated Air Carrier Operator:			
Airline Flight Operated As: (For example, Northwest Airlines)		Flight Number	
Accident Site location: (for example, city & state, airport)		Time of Accident:	
Total Number of Persons on Board			

PASSENGERS INFORMATION							
Adults:		Infants (lap only):		Non-Revenue:		Total Passengers:	

CREW INFORMATION					
# of Flight Crew: (incl. jumpseat)		# of Cabin/In-Flight Crew:		Total Crew:	

ADDITIONAL DETAILS					
HazMat onboard? Yes No Unknown			List Special Groups onboard (for example, VIPs, SSR student groups)		
Aircraft Fatalities: Yes No Unknown			Ground Fatalities: Yes No Unknown		
Number of Aircraft Fatalities (if known)			Number of Ground Fatalities (if known):		

Is there ground structure damage? Yes No

Additional Details
(office buildings, residences, shopping mall, other):

Flight Pairing Route:	Departure:		Arrival:	
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Aircraft Type:		Aircraft Registration:	
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Toll-free Family Assistance Phone #:		EOC Phone Number	
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FRC Location(s):	
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FAC Location: (if known)	
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Nearest Commercial Airport (to accident location):	
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List of Codeshare agreements (for this flight):	
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Air Carrier POC Name, Title & Direct Phone Number:	
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