

DETAILS OF OCCURRENCE								
Date	:	22/09/2022	Time	:	1430H	Location	:	BATTALION 4
DETAILS OF AIRCRAFT/COMPONENT								
Aircraft type	:	AW139	Aircraft Regn.	:	9M-PMD	MSN	:	31809
Component Name	:	N/A	Part Number	:	N/A	MSN	:	N/A
Total time	:	1433:10	Total Cycles	:	1198	Total Landing	:	2531
Reported by								
Name	:	MAHMOOD	Designation/ Staff No	:	LAE	Date	:	26/09/2022
DESCRIPTION OF INCIDENT/ACCIDENT/PROBLEM								
<p>Aircraft took off at 1210pm from WMSA to BN 4 for Tactical Winching Training and returned to base at 5pm.</p> <p>Pilot reported, unintentionally raise collective lever during OEI training thus NR went low below 87% ; automatically restored to AEO mode. CAS messages checked by LAE and found no registered defect for this event.</p> <p>HUMS download carried out and found Transmission Over torque (XMSN OVTQ - AEO). FDR data downloaded and sent to Leonardo for clarification.</p>								
<p>ATTACHMENTS: <input type="checkbox"/> Report <input type="checkbox"/> Photo <input type="checkbox"/> Video <input type="checkbox"/> Others, specify:</p>								



IMMEDIATE CORRECTIVE ACTION BY AMO/CAMO

CAS messages checked by LAE and found no registered defect for this event.
HUMS and FDR data downloaded and sent to Leonardo for clarification.

ATTACHMENTS: Report Photo Video Others, specify:

INVESTIGATION BY CRISIS MANAGEMENT TEAM

FOR QAM USE

Report Category	<input type="checkbox"/> Mandatory Occurrence Report (MOR) <input type="checkbox"/> In Service Difficulty Report (ISDR) <input type="checkbox"/> Internal Occurrence Report (OR)
Reportable to authority	<input type="checkbox"/> Yes <input type="checkbox"/> No Date Reported to Authority : _____
Reportable to operator	<input type="checkbox"/> Yes <input type="checkbox"/> No Date Reported to Operator : _____
Reportable to TC Holder/ STC Holder/ DOA	<input type="checkbox"/> Yes <input type="checkbox"/> No Date Reported : _____

CORRECTIVE / PREVENTIVE ACTION RECOMMENDATION

Crisis Management Team Minutes of Meeting attached:

REPORT COMPILED BY :

Name:

Stamp:

Date:

Review, Accepted and closed by QAM:

Name:

Stamp:

Date: