



NIGERIAN SAFETY INVESTIGATION BUREAU

P.M.B 7009, Area 1, Garki, Nnamdi Azikiwe International Airport, Abuja, Nigeria
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Website: www.aib.gov.ng Email: commissioner@aib.gov.ng

Dear [NAME OF EXPERT],

[DATE]

LETTER OF ACCEPTANCE OF EXPERT

[ACCIDENT FILE NUMBER]
[AIRCRAFT REGISTRATION]
[LOCATION]

The Nigerian Safety Investigation Bureau (NSIB), *herein referred to as the Bureau*, is empowered to investigate aircraft accidents in Nigeria. The objective of the investigation is to advance aviation safety by identifying safety deficiencies and making recommendations designed to eliminate or reduce such deficiencies.

During the course of an accident investigation, the Bureau may authorize a person to participate as an expert when the person is designated as such by a Minister responsible for a government department having a direct interest in the investigation and/or another State Investigation Authority in the subject-matter of the investigation and should contribute to achieving the objective of the Bureau.

Pursuant to the provisions of Section 5.21 of the Civil Aviation (Investigation of Air Accidents and Incidents) Regulations. And pursuant to your designation by your State, you are hereby granted the status of an Expert.

You shall be subject to the under the supervision of the Investigator-in-charge, to participate in the investigation to the extent necessary.

You shall be subject to the supervision of the Investigator-in charge (IIC) and be permitted to:

- (a) Visit the scene of the accident;
- (b) Have access to the relevant factual information, which is approved for public release by the State conducting the investigation and information on the progress of the investigation;
- (c) Assist in the identification of victims;
- (d) Meet with surviving passengers who are citizens of the expert's States; and
- (e) Receive a copy of the final report or duties under these Regulations.

Your attendance as an expert is subject to the following conditions:

- (a) you shall provide to the Bureau with all relevant information available to you; and
- (b) you shall not divulge information on the progress and the findings of the investigation without the express consent of the Bureau.

Failure to comply with any of the above conditions and responsibilities could result in the immediate revocation of your expert status.

You should also understand that the privileges of an expert will be exercised at your own risk.

Please sign and return the attached copy of this letter to the Investigator-in-charge, indicating your understanding and acceptance of the above-mentioned conditions and responsibilities.

Please accept the assurances of the highest regards of the Director General/CEO.

Yours truly,

[NAME OF SIGNATORY]

[Designation]

For: Director General/CEO

I understand and accept the conditions outlined above with respect to my attendance as an expert at the subject investigation.

I also understand that the privileges of an expert will be exercised at my own risk, and I hereby agree to indemnify and save harmless the Accident Investigation Bureau for any damage or injuries I may suffer as a result of my attending the investigation as an expert.

Signed:

[NAME OF SIGNATORY]

[Designation]

