

NIGERIAN SAFETY INVESTIGATION BUREAU

SAFETY HOUSE, NNAMDI AZIKIWE INTERNATIONAL AIRPORT P.M.B. 7009 GARKI FCT- ABUJA, NIGERIA



NOTIFICATION PROCESS CHECKLIST

COMPLETED BY:	DATE:
Name of Relevant Document:	SIGN.:

Status	Description
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Report Receiving Form NSIB.01.19 completed and placed in Investigation File
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Duty Officer Informed DG/CEO upon completion of Report Receiving Checklist NSIB.01.19
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	DG/CEO formed Team to conduct preliminary assessment of the reported occurrence
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Team conducted Event Risk-based Analysis of the reported occurrence for classification as Accident/Serious Incident/Incident
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Team submitted to DG/CEO the report of preliminary assessment of the occurrence and its classification, including recommend to Institute Investigation or not to institute investigation
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	DG/CEO Formed Investigation Team, including the appointment of an IIC
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC in coordination with Duty Officer complete Initial Action after Notification Checklist NSIB.01.05
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC Contacted Director of Operations, Licensing and Training Standards of NCAA to obtain information of the contact person of the airline involved in the occurrence
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC had established communication with the contact person of the airline involved to obtain further information on the occurrence using template Letter in Appendix E to IPPM
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC Reviewed the Accident/Incident Report Form NSIB.01.001, NSI.01.02 and any additional information received from the Airline involved
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC filled the Initial Notification Form NSIB.01.03 with the available information obtained on the occurrence
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC Used aircraft information (Manufacturer, Max Take-off Weight) to determine States and ICAO to be forwarded the Notification in accordance with NSIB.01.02 (Notification and Reporting Checklist)
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC clicks the link www.icao.int/safety/AIA/pages to obtain addresses of the other States involved for forwarding of the Notification
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC draft transmittal Letter for forwarding of the Notification to States involved and ICAO, if applicable
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	The transmittal Letter contains statement requesting the States to appoint accredited representative to participate in the investigation
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	IIC submitted the filled Notification Form (NSIB.01.03) to the Director of Engineering or Director of Operations for validation

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<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Director of Engineering or Director of Operations forwarded the validated Notification Form and draft transmittal letters to the DG/CEO to the concerned States and ICAO, if applicable.
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Commissioner approves Notification transmittal letters
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Director of Engineering or Director of Operations forwarded Notification to the addresses obtained from ICAO website of the concerned States' AIAs
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Director of Engineering or Director of Operations forwarded Notification to ICAO through adrep@icao.int , if applicable
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Revised Notification Form filled and forwarded to the States concerned and ICAO, if applicable, when new/more accurate or significant information on the occurrence is obtained by the Bureau
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Copies of transmittal letters and Notifications forwarded to the concerned States and ICAO, if applicable, are kept in the Investigation File
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Copies of NSIB.01.001, NSIB.01.02, NSIB.01.03 & NSIB.01.05 are kept in the Investigation File
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Copies of relevant correspondences to and from the Bureau, including acknowledgement of notification to the States concerned are kept in the Investigation files
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	Copies of internal correspondences regarding decisions on the occurrence are kept in the Investigation Files
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	The completed Event Risk-based analysis of the occurrence for classification of the occurrence is kept in the investigation File
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	
<input type="checkbox"/> Complete <input type="checkbox"/> N/A	