Transport Canada Transports Canada

Canada

CAIRS: Civil Aviation Issues Reporting System

Request for Review Form

I want to	☐ receive follow-up from a CAIRS coordinator. ☐ receive follow-up from a CAIRS coordinator but I do not want my contact details to be shared. ☐ remain completely anonymous. *(If you choose this option, you will not receive any follow-up.)*

REQUEST FOR REVIEW INFORMATION

I am conveying	☐ a compliment ☐ a suggestion ☐ a recommendation ☐ a concern ☐ a complaint ☐ a hazard

Issue Description (who, what, where and when):

Suggested Solution:

Province of Occurrence	

☐ I have supporting documentation and it is attached. ☐ I do not have supporting documentation.

INFORMAL RESOLUTION

☐ I have tried informal resolution. ☐ I have not tried informal resolution.

If you have attempted informal resolution, please provide details.

CONTACT INFORMATION

Title	☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ☐ Other :						
First Name		**Last Name**					
Company							
Telephone	***Home*** ( ) -	***Office*** ( ) - Ext.		**Fax**	( ) -	**Cell**	( ) -
Street Number		**Apt. Number**			**Suite Number**		
Street Name				**City**			
Province / State		**Country**			**Postal / Zip Code**		
E-mail					**Date** *(yyyy-mm-dd)*		

FOR OFFICE USE