

Failure Report			
Event date:			
Component type and serial No.:			
Total No. of hours worked on the damaged product:			
Date of the last inspection:			
Description of the failure or dangerous event occurrence: (If it is important, please draw a sketch or enclose a photograph.)			
<b>Classification of failure location (Section 6.4)</b>			
According to the operator:	<input type="checkbox"/> - main group	<input type="checkbox"/> - sub-group	
According to the manufacturer:	<input type="checkbox"/> - main group	<input type="checkbox"/> - sub-group	
<b>Operator's classing of fault</b>			
According to potential effects:	<input type="checkbox"/> - critical	<input type="checkbox"/> - breakdown	<input type="checkbox"/> - minor
According to the time course:	<input type="checkbox"/> - sudden	<input type="checkbox"/> - gradual	<input type="checkbox"/> - irregular
According to the fault reason:	<input type="checkbox"/> - inadequate dimensioning	<input type="checkbox"/> - ageing	<input type="checkbox"/> - wear out
	<input type="checkbox"/> - mishandling	<input type="checkbox"/> - constructional	<input type="checkbox"/> - manufacturing
<b>Report elaborated</b>			
Address:		Name:	Signature:
		Date:	

Faults	finish abilities to perform the required function.
Critical fault:	- has caused unacceptable effects
Minor fault:	- has affected particularly important properties
Breakdown fault:	- has not affected particularly important properties
Degradation fault:	- has occurred suddenly and completely
Damage:	- has occurred gradually and partially
Defect:	- unit/part has not complied with the technical specification since damaging
	- state of deterioration is minor with respect to the unit/part operating
<b>WARNING!!!</b>	
If the failure has an effect mentioned in section 4.4.1 maintenance manual, the operator is obliged to follow the instructions in section 4.4.1 Maintenance manual.	