## Air Traffic Mandatory Occurrence Report ZAB-M-2023/08/10-0007

	orting F	AC ID	2. [	Date L	ITC (de	d/mm	/yyyy) I	)			3. Tir	ne UT	C		4. Sig	gnif	ican	t Oc	curre	ence?
Z	Α	В	1	0	0	8	2	0	2	3	1	8	1	0			0	Yes	• <b>•</b>	No
O CI	ntroller	provid	ling s	service		Aircra	aft Owr			r mmary)	Ŏ I	Electro	l Facili nically Descri	Detec	ted	ary)	_	oid ed ential eve Yes		nent ou ntribut O L
Training	g in pro	gress?	0	Yes	● No	0	Unkno	own	Neare	est Airp	ort: <u>T</u>	US	Po NM	ssible	0	Yes	<b>•</b>	No	Ale	rt #:
							-	Airspa	ace/Al	titude	/Rout	e/Spe	ed MO	Rs						
E1. Air	craft in																			
Aircraft			-	/pe/Su			/VFR	Facility communicating			Position communicating with A/C				A/C			Frequency		
(b) (3	3) (10	JUS	SC	§ 1:	30e)		IFR VFR		th A/C <b>ZA</b> I					R90						133.0
Violated	d Facilit	y: <b>ZAI</b>	В	Positio	on:	ı					1								Freq	uency:
Heading	g	Altitu	de		Phase	of Fli	ght				Tr	affic P	attern	Location	on				Evas	ive Act
E2. MO	R type	(only o	amo	lete o	ne sub	-sectio	on as a	applic	able):											
E2a. Ai	ircraft e	ntered								nd alte	rnate	action	s were	taken	by AT	Со	r the			
fliq Airspac	ght crev									For	eian f	acility (	deviation	on.		Acti	on ta	aken	hv.	
Facility		Position				F	reque	ency		7' 0"	Foreign facility deviation:  O Yes						on ta		IJy.	
												Č	No			F	_		t crew	
I I a a compa	otod/ur	nintand	lod.							TC	AS RA	ν:	Sr	oillout:						
Unexpe						<b>~</b> !-				' ' '	10 11		- 1 .		C	<b>)</b> Y	es		No	
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## Air Traffic Mandatory Occurrence Report ZAB-M-2023/08/10-0007

Type of Deviation:  Control Surface:  Was possible pilot deviation validated? Yes No Military Pilot Deviation? Yes NMAC  Was this a verified NMAC?  Yes No NMAC Number:  Apt/NAVAID: Direction: Distance:  Pilot of Plot Name: Phone Number: Certificate  Address:			t Deviation Informatio	n		
Pilot Information Available?				F		
Pilot Information Available?				Frequency:		
Reason for no pilot information being given:  No call received  Pilot Deviation  Was this a possible pilot deviation?  Plase of Flight:  Aircraft #: ORG Choices: Office Number:  Type of Deviation: Control Surface:  Was possible pilot deviation validated? Ores No Military Pilot Deviation? Yes No Military Pilot Deviation? Yes No Mac Number:  ApriNAVAID: Distance:  Pilot of Plot Name: Phone Number: Certificate  Address:  Pilot of Pilot Name: Phone Number: Certificate  Address:	ZAB	R	90		133.0	
Pilot Deviation   Was this a possible pilot deviation?   Phase of Flight:   Phase of Flight:   ORG Choices:   Office Number   ORG Choices:   ORG Choices:   Office Number   ORG Choices:   ORG Ch						
Pilot Deviation  Was this a possible pilot deviation?  Preliminary Number: Phase of Flight:  Airspace Class: Aircraft #: ORG Choices: Office Number:  Was possible pilot deviation validated? Yes No Military Pilot Deviation? Yes NMAC  Was this a verified NMAC?  Was this a verified NMAC?  Pilot of Pilot Name: Phone Number: Certificate  Address:  Pilot of  Pilot Name: Phone Number: Certificate  Address:	Reason for no pilot information	on being given:				
Was this a possible pilot deviation?    Yes	No call received					
Aircraft #: ORG Choices: Office Number  Aircraft #: ORG Choices: Office Number  Type of Deviation: Control Surface:  Was possible pilot deviation validated? Yes No Military Pilot Deviation? Yes NAC  Was this a verified NMAC?  Yes No NMAC  NMAC  Was this a verified NMAC?  Direction: Distance:  Pilot of Pilot Name: Phone Number: Certificate  Address:  Pilot of  Pilot Name: Phone Number: Certificate			Pilot Deviation			
Aircraft #: ORG Choices: Office Numbe  Type of Deviation: Control Surface:  Was possible pilot deviation validated? Yes No Military Pilot Deviation? Yes  NMAC  Was this a verified NMAC?  Was this a verified NMAC?  O Yes No NMAC Number: Direction: Distance:  Pilot of Pilot Name: Phone Number: Certificate  Address:  Pilot Name: Phone Number: Certificate  Address:	Was this a possible pilot de	viation?				
Type of Deviation:  Was possible pilot deviation validated? Yes No Military Pilot Deviation? Yes NMAC  Was this a verified NMAC?  Yes No NMAC Number:  Apt/NAVAID: Direction: Distance:  Pilot of Pilot of  Pilot of  Pilot Name: Phone Number: Certificate  Address:	Yes No	Preliminary Number:		Phase of Flight:		
Was possible pilot deviation validated?		Aircraft #:	ORG Choices:		Office Number:	
Was this a verified NMAC?  O Yes No NMAC Number:  Apt/NAVAID: Direction: Distance:  Pilot of Control  Pilot Name: Phone Number: Certificate  Pilot of Pilot Name: Phone Number: Certificate  Address:  Address:	Type of Deviation:		Control	Surface:		
Was this a verified NMAC?    Yes   No   NMAC Number:	Was possible pilot deviation v	alidated? O Yes O	No Military Pil	ot Deviation?	O Yes No	
Apt/NAVAID: Direction: Distance:  Pilot of Districtions: Phone Number: Certificate  Address:  Pilot of Pilot of Phone Number: Certificate  Address: Phone Number: Certificate			NMAC			
Apt/NAVAID: Direction: Distance:  Pilot of Distributes 113  Pilot Name: Phone Number: Certificate  Pilot of Pilot of Pilot of  Pilot Name: Phone Number: Certificate  Address:	Was this a verified NMAC?					
Pilot Name: Phone Number: Certificate  Address:  Pilot of  Pilot of  Pilot of  Address: Phone Number: Certificate  Address:	O Yes No	NMAC Number:				
Pilot Name:  Address:  Pilot of  Pilot Name:  Phone Number:  Certificate  Certificate  Address:	Apt/NAVAID:	Direction:		Distance:		
Address:  Pilot of Pilot Name: Phone Number: Certificate  Address:	Pilot of (b) (3) (10 USC § 130)			·		
Pilot of Pilot Name: Phone Number: Certificate  Address:	Pilot Name:		Ph	none Number:	Certificate Number	
Pilot Name: Phone Number: Certificate  Address:	Address:				I	
Pilot Name: Phone Number: Certificate  Address:						
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	NIVIAC Description:					

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Summary
J1. Summary - provide a brief summary for all MORs in this section that will provide enough information for QA to understand what occurred. Include information about items that require additional information in the specific MOR you are reporting.
(b) (5)
QA Summary
(b) (5)