

FAA :: SDR Reporting [SDR Submission Form] - Windows Internet Explorer

https://dev/SDR/Secured/Authenticated/SubmissionsCarrier.aspx

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OMB No. 2120-0663

### 1. Submitter Information

(a) Unique Control #       (b) Difficulty Date  (mm/dd/yyyy)

(c) Registration #       (d) Submitter Type

(e) Submitter Designator

### 2. Codes

(a) Operator Designator       (b) Operator Type

(c) JASC/ATA Code

(d) Stage of Operation

(e) How Discovered

(f) Nature of Condition

(g) Precautionary Procedures

(h) FAA Region       (i) District Office

(j) Flight Number

### 3. Major Equipment Identity

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### 3. Major Equipment Identity

	Manufacturer	Model	Serial Number	Total Time (hours)	Total Cycles
(a) Aircraft	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(b) Engine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(c) Propeller	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### 4. Problem Description

(Note: Please limit your description to 1500 characters.)

Your description is 0 characters in length.

### 5. Specific Part or Structure Causing Difficulty

(a) Part Name

(b) Manufacturer's Name

(c) Part Number

(d) Serial Number

(e) Part Condition

(f) Part/Defect Location

(g) Total Time (hours)

(h) Total Cycles

(i) Time Since (hours)

OR

Overhaul

Repair

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### 5. Specific Part or Structure Causing Difficulty

(a) Part Name  (b) Manufacturer's Name  (c) Part Number  (d) Serial Number

(e) Part Condition  (f) Part/Defect Location  (g) Total Time (hours)  (h) Total Cycles  (i) Time Since (hours)

OR

Overhaul  
 Repair  
 Inspection

[Reset](#)

### 6. Component/Assembly That Includes Defective Part

(a) Component Name  (b) Manufacturer's Name  (c) Part Number  (d) Serial Number  (e) Model Number

(f) Location  (g) Total Time (hours)  (h) Total Cycles  (i) Time Since (hours)

Overhaul  
 Repair  
 Inspection

[Reset](#)

### 7. Structure Causing Difficulty

(a) Body or Fuselage Station  (b) Water Line  (c) Crack Length (inches)  (d) Number of Cracks

From/At  To  From/At  To

(e) Stringer  
 From/At  Left  Right  [Reset](#) To  Left  Right  [Reset](#)

(f) Butt Line

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[Reset](#)

### 7. Structure Causing Difficulty

(a) Body or Fuselage Station  (b) Water Line  (c) Crack Length (inches)  (d) Number of Cracks

From/At  To  From/At  To

(e) Stringer  
 From/At  Left  Right  [Reset](#) To  Left  Right  [Reset](#)

(f) Butt Line  
 From/At  Left  Right  [Reset](#) To  Left  Right  [Reset](#)

(g) Wing Station  (h) Structural Other  (i) Corrosion Level

From/At  Left  Right  [Reset](#) To  Left  Right  [Reset](#) 2  3  [Reset](#)

**Paperwork Reduction Act Statement:**

Per 14 CFR Part 121.703, the information on this report can be submitted on this form or in another format acceptable to the Administrator. The information collected is used to evaluate certification standards, maintenance programs, regulatory requirements. The information is required to ensure safety in air transportation. We estimate that it will take 9 minutes to complete. Use of this form is mandatory. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection is 2120-0663. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave. SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, AES-200.

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