



AVIATION SECURITY DIRECTIVE

EXT REFERENCE		DISTRIBUTION: AS PER DISTRIBUTION LIST
DEPT REF: CAV/CASU/1/1		Directive No: ASD 05 of 2013
VALIDITY: With immediate effect and until further notice.		Issue Date: 30 May 2013.

Subject: Reporting of Out-Of-Routine Aviation Security and Facilitation Occurrences

1.0 Purpose of the Aviation Security Directive

1.1 This Aviation Security Directive (ASD) is issued pursuant to provisions of Section 19 of the Civil Aviation (Security) Regulations 2008 for guidance and necessary action to be taken in the event of reportable out-of-routine aviation security and facilitation occurrences at the Sir Seewoosagur Ramgoolam International Airport.

2.0 Objective

The objective of reporting occurrences is to enable actions to be taken to prevent recurrence.

3.0 Requirements

3.1 With immediate effect, organisations conducting business in the civil aviation sector shall ensure that aviation security/facilitation incidents, including out-of-routine occurrences, happening within their sphere of operations and affecting airport/aircraft operations are reported to the Authority.

4.0 Reportable Occurrences

4.1 The following is a non-exhaustive list of reportable occurrences:

- Bomb warnings;
- Discovery of firearms, ammunition, weapons, explosives or items of a suspect nature, at the airport;
- Breach of access control;
- Presence of off duty officials inside the Security Restricted Area;
- Persons including passengers with disruptive/unruly behaviours;
- Misrouting of passengers and/or baggage;
- Unattended baggage;
- Occurrences resulting in the death or injury to any person;
- Occurrences that may attract media concern;

- Incidents or occurrences affecting security and/or facilitation which do not fall within any of the specific categories mentioned above.

5.0 Reporting Procedure

5.1 Following an occurrence, organisations are required to report the occurrence to the Authority by:

(i) Telephone, immediately following the occurrence, on:

During normal working hours, telephone No 6032000 (Extn 2054, 2110 or 2201);

During outside normal working hours, telephone No 6374741 or 6032000 (Extn 2202 or 2203), and

(ii) Submitting a preliminary report, on the address below, by filling the Occurrence Report Template (ORT) (Copy enclosed at annex to this Directive) within 48 hours of the occurrence.

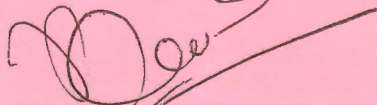
Postal Address	Director of Civil Aviation Department of Civil Aviation Sir Seewoosagur Ramgoolam International Airport Plaine Magnien
Fax	230-6373164
Email address	civil-aviation@mail.gov.mu

6.0 Where more than one organisation is involved in an incident or occurrence, all organisations involved should submit reports.

7.0 Reporting of aviation security incidents/Out-Of-Routine occurrences does not absolve the reporting organisation from any enquiry by Law Enforcement Authorities and the ORT should be submitted independently of any investigation carried out by the Police.

8.0 Non-compliance of the above provisions may entail judicial proceedings.

The collaboration of everyone is sought for the enhancement of aviation security.



Y KOWLESSUR
for Director of Civil Aviation

REPORTING OF OUT-OF-ROUTINE AVIATION SECURITY AND FACILITATION OCCURRENCES**OCCURRENCE REPORTING TEMPLATE (ORT)**

This template must be filled in for any out-of-routine aviation security and facilitation occurrence(s) and forwarded to the **Director of Civil Aviation** as required by provisions of Aviation Security Directive **ASD 05 of 2013**.

1.	Brief title of occurrence :		
2.	Date of incident: -----/-----/-----	Time of incident: ----- (AM /PM)	
3.	Other organizations involved:		
4.	Details of persons involved:		
5.	Exact Location of occurrence:		
6.	Organization(s)/Officials contacted:		
7.	Full description of occurrence (please be thorough. Continue on extra sheet(s) if necessary):		
8.	Effect on airport/aircraft operations:		
9.	Action taken by Aerodrome Operator :		
10.	Action taken by Police :		
11.	Action taken by any other entity (please specify):		
12.	Corrective actions taken to prevent recurrence:		
13.	Has an investigation been initiated and by whom?		
14.	Name of person filling the form:		
	Position:		
	Tel No:	Fax No:	E-Mail:
15.	Date: -----/-----/-----	Signature:	Official Stamp: