For effective analysis of data, the Authority requires monthly summary of movements at each aerodrome. This is in accordance with the requirements of Occurrence Reporting and Investigation Regulation 2009, Part 36.

Fill in the total movements for each aerodrome for the month and **by the end of first week of the following month** send to:

Quality Assurance Officer**, CAAF,** Nadi Airport

PH: 8923155 Ext: 3403 or 3391

Fax: (679) 6727429

|  |  |  |
| --- | --- | --- |
| **Year**: | **Month**: | **Date Submitted**: Click or tap to enter a date. |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Government**  **Aerodrome with**  **Scheduled Services** | **Aerodrome Name** | **Total monthly movements by category of operation** | | | | | | | | | **Total** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** |
| Bureta |  |  |  |  |  |  |  |  |  |  |
| Kadavu |  |  |  |  |  |  |  |  |  |  |
| Labasa |  |  |  |  |  |  |  |  |  |  |
| Matei |  |  |  |  |  |  |  |  |  |  |
| Nadi |  |  |  |  |  |  |  |  |  |  |
| Nausori |  |  |  |  |  |  |  |  |  |  |
| Savusavu |  |  |  |  |  |  |  |  |  |  |
| **Government**  **Aerodrome**  **(Other)** | Cicia |  |  |  |  |  |  |  |  |  |  |
| Gau |  |  |  |  |  |  |  |  |  |  |
| Koro |  |  |  |  |  |  |  |  |  |  |
| Lakeba |  |  |  |  |  |  |  |  |  |  |
| Moala |  |  |  |  |  |  |  |  |  |  |
| Vanuabalavu |  |  |  |  |  |  |  |  |  |  |
| **Private**  **Aerodrome with**  **Scheduled Services** | Malololailai |  |  |  |  |  |  |  |  |  |  |
| Mana |  |  |  |  |  |  |  |  |  |  |
| **Private**  **Aerodrome**  **(Other)** | Kaibu |  |  |  |  |  |  |  |  |  |  |
| Laucala Island |  |  |  |  |  |  |  |  |  |  |
| Vatulele |  |  |  |  |  |  |  |  |  |  |
| Wakaya |  |  |  |  |  |  |  |  |  |  |
| Yasawa |  |  |  |  |  |  |  |  |  |  |

**Submitted by:**      

**Signature: **