

CHIRP GA FEEDBACK

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EDITORIAL

Another interesting batch of reports in this edition of FEEDBACK and I am indebted to the reporters who have such a positive and public-spirited attitude to safety that they are willing to share their errors with us. A common theme in several of the reports is pre-flight planning. When you have read through this edition and are contemplating your next flight, I hope you will resolve to abide by the mantra 'Make a good plan – then fly the plan you have made'.

We continue to receive adverse comments about the electronic distribution of FEEDBACK. Unfortunately there is no realistic prospect of a return to the free distribution of FEEDBACK in paper form so we are considering a subscription service for those wishing to receive FEEDBACK on paper. It is difficult to estimate the costs of such a service without knowing how big the demand would be but please let us know if you would be willing to pay up to (wet finger in the air) £5 per year for FEEDBACK in hard copy to be sent to you through the post.

Ian Dugmore - Chief Executive

EVENT AT A BUSY FLY-IN

Report Text: The event took place during a busy "Fly-in" event at a UK GA aerodrome that provides an aerodrome flight information service. The weather was good VMC and there was a brisk breeze which, as well as giving a good head-wind component for approach, also gave a noticeable crosswind from the right and associated turbulence. A right hand circuit was in use and it was busy. I flew a completely standard overhead join and when on the downwind leg I saw two aircraft ahead, one on short finals and the second just beginning its final approach. The spacing looked just right for me. Following my "downwind to land" R/T call I was told to "report finals" which I subsequently did and then, once the aircraft ahead had vacated the runway, was invited to "land at my discretion". I flew a continuous descending final turn and my approach and landing was completely normal; I was able to vacate the runway in sufficient time for the following aircraft to be able to land. All seemed to be working well, but when established on my final approach I did hear one aircraft behind me calling that he was "going around." It was not until more than an hour after my landing that I was approached by another pilot and it transpired that he was the one that I had heard call "going around." The reason for this was that, having extended his downwind leg to increase spacing from the aircraft ahead, he was flying a longish flat approach to the runway when my aircraft appeared just in front and above him whereupon he, in order to avoid collision, manoeuvred to the dead side and went around. I never saw his aircraft! Suffice to say I was mortified, embarrassed and very sorry for not seeing the other aircraft -and I still am.

Lessons Learned - Much has been written and taught over the years about the importance of listening-out and looking-out, all of it correct, but in a very busy non-controlled aerodrome environment to keep track of all the aircraft is very difficult and we all realise the limitations of lookout. However, having said that, I have thought long and hard about any lessons that I and others could glean from this incident and I have identified two main points that could be of use in reducing the chances of this type of Airprox from reoccurring.

A. I flew a continuous turn onto final approach since it was more convenient to do given the tightening crosswind, it would help the pilots following me achieve spacing and it is as I was taught to do in the RAF. However, RAF circuits are never as busy as the one at the fly-in when my Airprox occurred and they are always controlled by an ATC tower controller. Whilst in the continuous final turn an aircraft is belly-up and therefore its pilot blind to any traffic on a longer straight-in approach, something that would be announced were full ATC in attendance. Therefore, a conventional "square" circuit that features a straight descending base leg gives the pilot the opportunity to perform a further visual check that the straight-in approach is clear of traffic before turning onto final approach and it is certainly something that I will always do in future when operating in a busy visual circuit.

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B. The practice of extending the downwind leg to achieve spacing from traffic ahead does cause problems. The first is that an aircraft performing such an extension places itself in a position in which it is not expected to be in by other pilots and, as happened in the subject incident, the chances of it being visually acquired by them are reduced. The second is that following aircraft have their circuit geometry compromised by the extending aircraft and they are either obliged to follow the extending aircraft (providing they can see it) or to go around. An RAF rule that I was taught was that, unless advised by ATC, the downwind leg should never be extended and that a go-around be flown if spacing from traffic ahead is insufficient, spacing properly being achieved at the upwind part of the circuit by adjusting the position at which the crosswind turn is made. The cause of this Airprox was my failure to see and avoid the other aircraft, but the consideration at A and B above may reduce the chances of the happening again.

CHIRP Comment: We are grateful to the reporter for his open report and thorough analysis of this occurrence. It is important to fly in accordance with the established circuit pattern and the operation being conducted. Military circuits with a continuous turn from the end of downwind on to final are not compatible with civilian circuits; as the reporter notes, the continuous turn makes it difficult to look for aircraft on an extended final and the timing of the "final" call on the RT, made as the aircraft 'tips in' from downwind, will cause confusion. Therefore it was essential to fly civilian 'square' circuits at this event. The reporter is also correct to note that extending downwind can cause problems in the visual circuit, particularly where the circuits extend beyond the boundaries of the ATZI! If a circuit is becoming over extended, the option of going around from the end of downwind allows it to be tightened up again.

MEA CULPA

Report Text: I am an experienced glider pilot and consider myself to be pretty 'switched on' in just about every situation. The reason I begin with this statement is that it may be contributory to the incident that I just got away with - by the skin of my teeth! I have been a "hobby pilot" and have around 4000 hours as pilot in command. I fly gliders mostly but also have a share in a touring motor glider (TMG). I also have a PPL. The [] is a tail wheel aircraft but the main wheels are retractable. Previously I had a share in another TMG that has a fixed undercarriage but in many other ways is quite similar. I have used the experience gained to good effect in the [current aircraft] and this may also be relevant to this incident.

On the day in question, the wind was ten knots from around 30 degrees across the runway with gusts to fifteen knots that made the x-wind component even worse. It was also just beginning to become thermic. The airfield is on the top of a ridge with down slopes either side of the airfield. The grass runway itself is not flat but slopes up at either end. As a glider pilot, I am aware of the risk of turbulence, curl over and excessive sink when flying behind the top of a ridge and this concern was a major part of my workload as I flew the approach. I had flown into [] on several previous occasions but not for some years. On every previous occasion, I have landed on the reciprocal runway. Another contributory factor was that from my perspective, the runway in use appeared to slope upwards. I was concerned that my aircraft would have sufficient take-off performance to take-off in a strong x-wind on an uphill runway. I actually queried with [] Radio if there was a significant slope in the runway. The third factor in this incident is that the circuit was busy. I prefer to fly glider style circuits with a steep 'half airbrake' approach. I had to conform to the GA circuit traffic and fly a long flat approach. I have never quite understood why the GA community adopts this procedure since if the engine were to stop whilst on approach, there would be little chance of actually gliding a light aircraft to the runway threshold. I did my downwind checks as usual and configured the engine for a possible go-around. To do this, I opened the cowl flap, selected the propeller pitch to fine and switched on the fuel booster pump. For the life of me, I cannot think why I neglected to lower the wheels at this stage. This is where my own 'conceit' must have had a hand. I skimped on the checks! I was also flying it like [my previous TMG] - big mistake! Having turned base and then set up for a long, low final approach, I didn't use the airbrakes. The aircraft has a warning buzzer in the cockpit that sounds if the airbrakes are extended and the main wheels are not lowered. It also sounds when the gear is in transit and unlocked. In all other cases, I would use around half airbrake on approach but this approach was so flat, I didn't need to use any airbrake. At the final part of the approach, I was so focussed on staying on the centre line that I completely filtered out the warning buzzer when I finally opened the airbrakes. I rounded out and was expecting the wheels to touch. It was not until I was actually lower to the ground than is normal with the gear down that I realised that I had neglected to lower the gear. I applied full throttle and closed the brakes. I must have been literally one second away from striking the prop on the ground. I shakily called that I was going round and the second attempt to land was all normal. Unfortunately for me, [] was busy that day and I seemed to have a large audience watching me. I am still

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very sheepish about this. On numerous occasions I have read of gliding incidents where pilots land with the main wheel still retracted and thought that I am far too switched on to do something daft like that. Well, I nearly did it myself and now see that factors were:

1. Flying an aircraft that is very similar to one previously owned. Operating procedures do not translate exactly.
2. A very high workload due to difficult cross wind and risk of curl over.
3. An unfamiliar circuit and worries about runway slope for later departure.
4. Flying a type of circuit that I do not like to fly.
5. Overconfidence in my own competence and experience. I was complacent about flying the [] and clearly did not do the checks well enough. In actual fact the later departure from [] was absolutely fine, despite my earlier concerns about the slope in the runway.

Lessons Learned: When flying different, but otherwise similar aircraft, focus more on differences training. Normally, an experienced [] pilot could get into a [] and fly it without any major problem. Do not "skimp" checks. Don't become complacent through over confidence. Aeroplanes bite fools and I was extremely lucky to have got away with it!!!

CHIRP Comment: Another very honest report that brings out several Human Factors issues. The reporter mentions over-confidence but the issue could be under-arousal. There are 3 stages of pilot experience that all have their own hazards; the first stage is that the workload is too high for the pilot's experience, followed by the experimental stage and finally the stage where the workload does not provide sufficient arousal for the immediate task in hand. Add to this the distraction of thinking about the departure and very quickly there is a situation in which a check can be missed. If there are concerns about the departure runway there is always the option of using the reciprocal after inspecting the runway surface, slope and departure wind.

As the reporter in the following report notes, "There is never a legal requirement to use a particular runway". One of the contributory factors that could have been avoided was the long flat approach. Motor glider pilots can readily integrate into a powered approach circuit by conducting level-to-glide approaches. Many pilots of powered aircraft will also do this to practise glide approaches. Finally, when it comes to wheels-up landings there is an old saying: 'there are those pilots who have – and those who nearly have!' Being meticulous about a 'last chance' check on final approach will keep you in the second category.

PLANNING PERFORMANCE AND DECISION MAKING

Report Text: Take-off was abandoned on Rwy []. This runway was in use after pilots commented on the turbulence at the touch down point of the previous in-use Rwy. A quick check of our weight and the state of the runway was made and I prepared to depart. Power checks were normal, I "lined-up" at the Rwy markings, full static power was achieved and the brakes released. At approx. 45-50 Kts IAS we reached my "no-go" point and so I abandoned the take-off. The aircraft was brought to a halt just past the intersection. ATC informed me over the radio that I had not used the entire runway available but they were changing back to Rwy []. An uneventful departure was then made on Rwy [].

There are several reasons for the abandonment:

1. Insufficient performance planning for the conditions, state of the runway and "wet Grass factor" not applied to the TORR/TODR figures.
2. Using the marked runway position for the take-off, rather than going back further to where the local pilots go from (about 50m, although my subsequent calculations showed this would not have made a difference).
3. The identified "no-go" point was reached without being at flying speed. Had I made the full performance calculation at the time, the take-off would not have been attempted. I made a significant error of judgment and a lack of airmanship; fortunately the only damage is to my pride. The only saving grace is that I had a defined "no-go" point, which was used to good effect.

Lessons Learned - Always fully plan for the full conditions, applying the safety factors applicable e.g. wet grass. Don't rush to get airborne, consider all variables. Ensure you stick to your "No-Go" decision point.

These are the comments from my CFI: The pilot has explained the situation well and freely admits his error in not making calculations for the new runway, or even considering the need to recalculate. His use of a no-go point prevented this human factors incident from turning into an accident, and selection and use of

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such a point should form part of every pilot's pre-take-off actions. Any change to an initial plan (in this case a runway change) should ring alarm bells for everyone, especially if (as in many cases) there is a perceived need to avoid delay. The alarm bells should cause a rethink. Is that new runway necessary, or more important, safe, for MY take-off? There is never a legal requirement to use a particular runway. Choose the most appropriate for your flight; even at a controlled aerodrome you can ask to use a better one. However, another classic human factor was involved here. The passengers were all qualified pilots, but, as has happened in many accidents, none of them had commented on, or perhaps realised themselves, the need for a re-think. Anyone can make an error, so it is worth considering every flight as if you were the pilot-in-command, and if the real PiC appears to be doing something you wouldn't, ask if he or she has considered what you've noticed.

CHIRP Comment: Once again, we are hugely grateful to the reporter for sharing his experience and honestly admitting his mistakes. There is little for us to add except to applaud the use of a “no go” point. The reporter uses either 2/3rds flying speed at 1/3rd runway distance, or flying speed at half distance – the former being the safer option. Readers can find more information in CAA [Safety Sense Leaflets No's 7 and 12](#). GASCo has produced a free app available on IOS and Android systems which is based on the factors set out in Safety Sense Leaflet No 7. Just enter *GASCo Performance mini* in the appropriate store search engine to locate and download the app. Calculating the factors manually isn't difficult but the app makes it that bit quicker and importantly provides the opportunity to review some 'what ifs?' (E.g. wet runway) in a matter of moments.

CAS ENTRY

Report Text: Before flight, I checked the NOTAMS, weather, ATIS, briefed the pax, confirmed departure from airfield, spoke with the duty instructor and booked out with ATC. I obtained a Basic Service from [] and noted there was a lot of RT to other aircraft using a Traffic Service. Operating between 1000 - 2000ft, I flew towards Oxford to show my guest the sights of the city. Despite my unfamiliarity with the area, my SA was good and I was aware of my position, however I did find it hard to fully pick up everything on the radio. It was the first solo flying I had done out of [] and so although relatively familiar with the area, I was taking my time and using features on the ground like the roads and rivers in order to not intrude on any CAS. From Oxford we headed south to Didcot power station as it was a good feature and kept me clear of controlled airspace. I then got permission to cross the Benson stub to the south W to E on a heading until clear. We then overflew, Henley, Marlow and the plan was then to head over towards the Maidenhead area. At this point, the time was starting to get on in the afternoon and the winter sun was starting to fall. There was a little bit of haze and the low sun made the haze appear a little worse than otherwise would have been. Following the river, I was referring to the map and was pointing things out to my guest. Another contributing factor was the poor radio. Whether it was the headset, the aircraft or the radio stack I am not sure, but the volume was 3/4 full in order to make out what was being said. There was also a significant amount of background noise. As well as keeping a good eye out and lookout for other aircraft, and spotting a few as well, I was also trying to navigate by the features on the ground. When I looked down at my map to check the airspace near Maidenhead, my eyes were drawn to the Maidenhead name on the map, and then to the left to the LTMA 2500'+ and from this I was happy that I was clear of controlled airspace. It was at this point that I should have noticed the controlled airspace further E which was the London CAS. Another contributing factor was where I had my map folded. It was in such a way that it obstructed most of the London CAS but only showed the western most edge on the A5 area of map on display. As I approached the CAS I was underneath the 2500+ CAS, air traffic asked what altitude I was operating to, and I answered either 1000 or 1500ft but in my mind what was required to keep me clear. This was acknowledged but not challenged by ATC and I assumed I was fine. Again it was difficult to make out all radio traffic. Shortly afterwards as I followed the river Thames, ATC contacted me and informed me that I had entered CAS. At this point I said I was immediately turning to the NW. From this point onwards my flight back, recovery and landing were uneventful. Everything was closed up, signed and completed as appropriate, and contacted the duty instructor to say the a/c was back. That evening I then made inquiries into the next stage of events and clarification on the reporting process.

Lessons Learned - There were several contributing factors to the event:

1. Weather - haze and lowering sun reducing the visibility
2. Experience - although reasonable hours in a light aircraft, the task of VFR navigating in a busy airspace environment is not something that I have done a great deal of recently and in the past few months.

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3. Familiarity - although reasonably familiar with a/c, the local area and identifying of features was more time consuming.
4. SA, the good weather had brought out many more aircraft and due to the other traffic around, poor radios and unfamiliarity with the area, my navigating suffered and I therefore misread a map that said the CAS was from 2500'+ whereas in reality, further to the right on the map, it did correctly say SFC - 2500'
5. Poor comms - the radio headset, or the equipment were poor and this demanded more of my ability to try and listen to position and traffic reports in order to help me look for other aircraft.

How to avoid in future: - I had planned the Oxford, Henley and Marlow legs, however not the Maidenhead. I should have stopped where I was in clear airspace, taken up a racetrack, examined the route and the airspace, and made an appropriate plan to get there. In addition I could also have used radio aids to identify where I needed to go. - Once the club 'sky demon' system is running, use this in future to help with identifying the surrounding airspace - consider the weather and the traffic. Consider a traffic service in future and plan it as a local area nav with a more rigid plan for the route until I build familiarity with the area.

CHIRP Comment: The reporter is correct in determining that the primary cause of the incident was inadequate pre-flight planning; a contributory factor may have been the distraction of pointing out features to the passengers. It is worth considering that a first solo flight from an unfamiliar airfield should be just that: solo - to allow full concentration on the things that are new. Missing a ground feature while flying towards Maidenhead would likely result in infringing CAS; when flying close to CAS it is advisable to fly parallel to the boundary if possible. The option of using more radio aids in future is questionable on what really should have been a VFR exercise. Also there is no requirement to wait for the club to get Sky Demon - there is a free version, 'Sky Demon Light', which can be used at home. The reporter had obtained a Basic Service but not from the most suitable agency. One option would be to use the Farnborough Listening Squawk (4573) and tune in to the appropriate Farnborough frequency where he might have been alerted before he infringed CAS. Better still, contact Farnborough and ask for a service.

AIRWAY INCURSION

Report Text: En route to the Channel Islands from Wales, I was talking to Yeovilton, who were unable to advise on Danger Area activity and suggested a call to Plymouth Military. Plymouth confirmed the Danger Areas were active. After negotiating a revised route to avoid the active areas and Bournemouth I started a channel crossing just off Swanage, and asked to transfer to Bournemouth ATC. Plymouth suggested I stay with them until transfer to Jersey.

I checked my chart for the crossing and saw that an airway NN621 had a base of 165+ so proceeded as normal to climb and track toward ORTAC.

Within a few minutes I received an urgent call from Plymouth to descend immediately to 3000ft as I had entered the Class A Airspace. I did as directed and after levelling and ensuring all was well I re-checked the map. I realised I had missed the information on the opposite side of the airway, which is Q41 with a base of 35+. I believe this is a common error for GA pilots as the base is so low.

Lessons Learned - I learnt a lesson from this experience of always checking airways designators and bases, especially in the vicinity of commercial airports and within 10 miles of intended track and there may be more than one airway and base. Also check the entry point of the track to the airspace and alternative directions. My misreading was due to looking only at the entry point. I also have GPS with airspace warning messages, but on the occasion and being on track I probably missed the message. It would have been prudent on this occasion to have transferred per request to Bournemouth ATC.

Since that occurrence I have purchased a tablet and subscribe to Sky-Demon for in-flight information including clear warning of controlled airspace in the vicinity allowing adequate time to avoid. Without doubt the information and usefulness of Sky-Demon, should make it an essential tool on par with current charts, for pilots of all types of GA aircraft to possess.

CHIRP Comment: The reporter is commended for contacting Plymouth Military to determine the status of the Danger Areas; many pilots do not! Calling Plymouth also allowed them to intervene at the earliest opportunity when the pilot infringed Q41. However, the reporter had planned to go through the Danger Areas with a fall-back unplanned option of going around; planning this way was the wrong way round and put the reporter in a difficult position when he was not cleared through the ranges. It would have been

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better to plan the worst case. The report has highlighted that the height annotation of Q41 on the VFR chart is unclear; CHIRP will follow this up with NATS.

AIRPORT IDENTIFICATION

Report Text: I had departed [] with a friend and his son who was considering a flying career and had already taken a few lessons. Our destination []. About 10 miles out, I called [] and confirmed details for approach and landing. I was trying to be precise for the would-be pilot and continued looking out of windows. Within a few minutes I saw the runway ahead and reported joining downwind. The controller accepted and advised Number 1 and turn over petrol station, report finals.

I have landed at [] many times so was familiar with procedures. I was describing my action to the student as I continued the circuit. I identified the buildings on north side of the runway, but did not notice that no planes were parked in normal places. I turned on the roundabout and reported Finals. Controller replied to continue.

At short finals I noticed a new feature of PAPIs but thought they must have recently been put there. There were features that did not seem correct, but I did not pay full attention to them, as all was proceeding well. I landed nicely and called the tower for instructions to proceed. There was no response to that or other calls, which concerned me so I decided to vacate the runway at nearest exit. As I turned off, I saw on the main building “Welcome to [*an airfield that was not the intended destination*]” and felt embarrassed, but understood why the radio was silent with my calls to [*my intended destination*] tower. I established RT contact with [*the airfield where I had landed*] and followed instructions to park. After paying the landing fee, I departed with my passengers to [].

Lessons Learned - I am advised that both airfields are close and have identically aligned runways, and land features that are similar and can be mistaken.

My mistakes were, having established contact with [], I then ignored the GPS and looked out of the window, believing [] was ahead. I was distracted by attempting to show a student the procedures for landing. Once established downwind I was deceived by similar features and made the outlook fit the picture I expected. Having checked the track on my GPS, I now know that I was north of [], but believed that it was ahead, so on seeing the runway, I did not question or check the view, or my GPS.

To ensure no future occurrences I have taken to instituting additional approach checks.

1) At planning stage, check map to see what if any other airfields are close. Study destination airfield plate to ensure I am aware of any significant features and highlight on kneepad and plate.

2) Prior call to destination, check map to ground and GPS that aircraft track is actually to destination. Once airfield details received, if available on GPS set the OBS to runway direction. This will ensure you have the extended centre-lines, and are joining circuit of correct airfield. I have this facility and will include it in future approach checks.

3) Having joined the circuit at instructed point ensure the ground features are as you expect from the planning, DO NOT Misinterpret features to fit your expected picture. If something looks different from expectations, consider a go-around and a call to tower for advice.

CHIRP Comment: Once again we are grateful for an open report, thorough analysis and useful lessons. The crux of the problem was, once again, a lack of planning exacerbated by the distraction of commentary to a passenger. There is also a hint of over reliance on the GPS; GPS can fail and it is important to cross-check the GPS with visual navigation and vice versa. Always have a line drawn on a paper chart and remember to practise pure visual navigation skills from time to time so that they are available and up to the task on the day that the electronics fail. Finally, the reporter is spot on with his advice about the danger of ‘confirmation bias’ i.e. making what you see fit your mental model of what you expect to see.

TRAFFIC ALERT

Report Text The main purpose of this 'CHIRP' is to encourage, as vehemently as possible, any pilots who are reluctant to make contact with major ATC units to change that about themselves and to do so in the future at every opportunity. It could literally mean the difference between safe and unsafe flight.

I was the pilot en route, solo, from [Yorkshire] to N Wales, tracking towards Seaforth VRP from Dewsbury VRP, and agreed a Basic Service from Manchester Radar (118.575) when about one mile south abeam Rochdale, at approximately 11:35 hours.

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At about 11:50 hours, as I was just passing the VRP at M6 Junction 26/M58, Manchester Radar called me to alert me to, "Traffic, your 10 o'clock, about one mile distant, left to right, height unknown" (or words to that effect) I looked and then finally saw a high-wing A/C, I suppose it must have been a Cessna, rapidly increasing in apparent size on a constant bearing, climbing straight towards me from my 10 o'clock, which was perhaps, by the time I had spotted it, about a quarter to a half mile distant. I was at about 1800 feet, on the Manchester QNH of 1017 hPa, and, by dint of slowing, I was able to let the A/C pass harmlessly ahead of me, which was travelling from left to right and climbing towards 2000 feet, having just emerged from the Low Level Corridor, heading north.

Quite honestly, without that ALERT, I don't like to think what could have happened, and I am most sincerely grateful for the sublime service that Manchester Radar provided. I am guessing that the other A/C had been transiting the Low Level Corridor, South to North, but had not actually spoken to Manchester Radar nor was their transponder altitude encoded, even if they were on frequency and perhaps even squawking the Manchester 'Listening Out' code of 2677.

I would recommend, as part of pre-flight planning, that pilots who have not been in the habit of calling major ATC Units simply write out the call that could be made to the first major ATC Unit that they are going to approach, and even take it with them as part of their PLOG.

So simple to request a Basic Service, and welcomed by the ATC Units, and it could really keep you safe, as it did me.

I emailed the personnel at Manchester ATC to thank them and received the following response: - "Thank you so much for the email, we so very rarely get to hear from pilots once our day job is over. I very much appreciate the sentiment of your email but promise you that no thanks are necessary."

Lessons Learned - I will never hesitate to make contact with all ATC Units in future and commend this action to all pilots, however shy or inexperienced they may be. Personal revision of CAP 413 always boosts confidence and, furthermore, I have found that the more major the Aerodrome, the more kindly you are treated, a fact which might pleasantly surprise.

CHIRP Comment: We agree that pilots should use all available options to increase their Situational Awareness and avoid collisions. However, if you require Traffic Information (TI) you should ask for a Traffic Service; it may not be available but don't temper your request by your expectation of success. In this case the reporter was provided with radar-derived TI while in receipt of a Basic Service to comply with the controller's duty of care. The aircraft emerging from the transit corridor was probably not on the same frequency as the reporter underlining the importance of always squawking with altitude to allow radar-equipped agencies to see you and alert other aircraft to your presence. Finally, how nice to read that the reporter took the trouble to thank ATC; a good example of the courtesy we should extend to each other.

Reports received by CHIRP are accepted in good faith. While every effort is made to ensure the accuracy of editorials, analyses and comments published in FEEDBACK, please remember that CHIRP does not possess any executive authority.

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