

# POST CHIEFS' REPORT FORM



Circuit:  Post:

Qualifying / Race No:  Date:  /  /

Formula / Type:  Time of Incident:  :  Time of Report:  :

- |                                   |                                  |                               |                               |                              |                              |
|-----------------------------------|----------------------------------|-------------------------------|-------------------------------|------------------------------|------------------------------|
| <b>Weather Conditions:</b>        |                                  | <b>Track Conditions:</b>      |                               | <b>Incident Radioed:</b>     | <b>Major Incident Form:</b>  |
| <input type="checkbox"/> Sunny    | <input type="checkbox"/> Drizzle | <input type="checkbox"/> Dry  | <input type="checkbox"/> Wet  | <input type="checkbox"/> Yes | <input type="checkbox"/> Yes |
| <input type="checkbox"/> Overcast | <input type="checkbox"/> Rain    | <input type="checkbox"/> Damp | <input type="checkbox"/> Oily | <input type="checkbox"/> No  | <input type="checkbox"/> No  |

**FLAG INFRINGEMENT:** Car Number:  Overtook Car:

Between the Flag(s) Displayed at Post:  and the Flag(s) displayed at Post:

- |                          |                          |   |                          |                          |                          |
|--------------------------|--------------------------|---|--------------------------|--------------------------|--------------------------|
| <b>2 x Waved</b>         | <b>Waved</b>             |   | <b>2 x Waved</b>         | <b>Waved</b>             |                          |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Yellow</b>                                     | <input type="checkbox"/> | <input type="checkbox"/> | <b>Yellow</b>            |
| <input type="checkbox"/> | <input type="checkbox"/> | <b>Yellow + SC board</b>                          | <input type="checkbox"/> | <input type="checkbox"/> | <b>Yellow + SC board</b> |
| n/a                      | <input type="checkbox"/> | <b>Red</b>  | n/a                      | <input type="checkbox"/> | <b>Red</b>               |
| n/a                      | <input type="checkbox"/> | <b>Green (after SC period, before start line)</b> | n/a                      | <input type="checkbox"/> | <b>Green</b>             |
| n/a                      | <input type="checkbox"/> | <b>Code 60</b>                                    | n/a                      | <input type="checkbox"/> | <b>Code 60</b>           |

- Please ✓ if any of the following statements apply:
- The overtaken driver signalled the overtaking driver to pass
  - There appeared to be a great speed differential between the two cars
  - The flag signals had been displayed for ..... seconds\*/minutes\* prior to overtaking occurring.
  - Marshals were working trackside (over the barriers) when this incident occurred *\* Delete as appropriate*

**CONTACT BETWEEN:** Car Number:  & Car Number:

- Contact Area:**
- Side to Side
  - Nose to Tail
  - Nose into Side
- Did contact occur because a car lost control first?**
- Yes - Which Car Number:
- Did contact cause a car to leave the circuit?**
- Yes -  Spun  Continued  into Barrier  into Gravel

**Follow-up action Required:**

No  Yes -  Straight Tow  Suspended Lift  Other - .....

**OTHER INCIDENT:** Car Number:  & Car Number:

- Please ✓ if any of the following statements apply:
- Exceeded Track Limits (list numbers & times below if necessary)
  - Missed the chicane/complex
  - Moved across the circuit more than once (weaving) preventing other car moving alongside

**EXTRA INFORMATION / DIAGRAM:** (use overleaf if necessary; if so, tick box)

Post Chiefs' Name:  Signature: .....

Witness Name:  Signature: .....

Follow-up Action – Post informed of outcome at: (time)  :

# POST CHIEF'S REPORT (continued)



## SKETCH OF INCIDENT:

Include: Track Direction, Track Sector Layout, Cars, Trajectory, Marshal's Posts & Flags, etc. as applicable

Post Chiefs' Name (PRINT): .....

Signature: .....

Witness Name (PRINT): .....

Signature: .....

Time Sketch Completed/Signed:  :

Post Chief informed of outcome at:  :