

# POST CHIEF'S REPORT



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>Serious 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:

2xWaved	Waved	Stationary		2xWaved	Waved	Stationary	
<input type="checkbox"/>	<input type="checkbox"/>	n/a	<b>Yellow</b>	<input type="checkbox"/>	<input type="checkbox"/>	n/a	<b>Yellow</b>
<input type="checkbox"/>	<input type="checkbox"/>	n/a	<b>Yellow + SC board</b>	<input type="checkbox"/>	<input type="checkbox"/>	n/a	<b>Yellow + SC board</b>
n/a	<input type="checkbox"/>	n/a	<b>Red</b>	n/a	<input type="checkbox"/>	n/a	<b>Red</b>
n/a	<input type="checkbox"/>	n/a	<b>Green</b> (after SC period, before start line)	n/a	<input type="checkbox"/>	n/a	<b>Green</b>
n/a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Code 60 (Purple)</b>	n/a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Code 60 (Purple)</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 appeared to lose control?**

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 WRITTEN INFORMATION**

**Now please include a sketch of the incident on the reverse of this form.**

Post Chiefs' Name:

Signature: .....

Witness Name:

Signature: .....

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

**DIAGRAM OF INCIDENT:**

**Post Chiefs' Name:**

**Signature:** .....

**Witness Name:**

**Signature:** .....

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

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