

Incident Involving Animal During Air Transport

Date: 6/30/14

SkyWest Flight No.: 6379

Time of Incident: 1648 (ATL)

Reporting Manager/Supervisor: [REDACTED], United ATL [REDACTED]

CHECK APPLICABLE ITEMS

PetSafe (United Express only) Checked Baggage Cabin Pet

Damage Loss Injury X

Complete the following information to the best of your ability. Use additional paper if needed and attach to this form.

Description of animal (include name if available)

3 year old female Golden Retriever, name unknown

Identification and contact information of pet's owner(s) and/or guardian(s):

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Narrative description of the incident, name of witnesses and/or SkyWest employees involved:

In ATL United ramp agent notified cargo the dog was bleeding when taken off aircraft. It seemed that the door of the crate was bent – possibly dropped or fell out of bin or possibly something fell on top of kennel. ATL agent did not know what caused the bent kennel. Agent advised the dog seemed fine, blood on mouth dried and animal is good spirits. There was a hole in kennel large enough for the dog to stick his nose through. Consignee advised by UAX PetSafe of minor injury. Vet care not needed.

Narrative description of the cause of the incident (if unknown, indicate as such):

Self-inflicted injury and damage caused by dog chewing on kennel door.

Narrative description of any corrective action taken in response to the incident (if no action was taken, describe reason why):

None required. Injury was self-inflicted.

Station Manager/Supervisor Name

Signature [REDACTED]

Date 7/14/14



Date: 8/13/14

Time of Incident: 1137 HRS CST (ORD)

SkyWest Flight Number: 5436, UA
AWB 016-
5137-7465

Mainline Partner: United

Reporting Manager/Supervisor: United ORD General Manager Station: ORD

CHECK APPLICABLE ITEMS

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Cargo | <input type="checkbox"/> Checked Baggage | <input type="checkbox"/> Cabin Pet |
| <input type="checkbox"/> Damage | <input type="checkbox"/> Loss | <input checked="" type="checkbox"/> Injury |

Complete the following information to the best of your ability.

Description of animal (include the animal's name, if available):

Tabby Cat, age unknown,
Owner/Guardian:

Narrative description of the incident, name of witnesses, and/or employees involved:

unknown specific injury, no known witnesses, no names of employees provided by United to SkyWest

Narrative description of the cause of the incident (if unknown, indicate as such):

On arrival into ORD it was discovered that the cat had injured itself during the flight from SPI to ORD as it attempted to claw its way out of the shipping container

Narrative description of any corrective action taken in response to the incident (if no action was taken, describe the reason why):

none required because injuries were self-inflicted, animal was treated by local veterinarian in ORD and cleared to continue trip to final destination where it was released in good condition in LAX

Submit the completed form via email (customerrelations@skywest.com) or fax (435.634.3405).