

ATTACHMENT 7

Aircraft Weight and Balance

Smith Corky

From: Fedok Jason
Sent: Friday, October 07, 2011 10:09 AM
To: Hicks Ralph; Smith Corky; Moats Heidi
Cc: Emery Eric
Subject: Weight Estimates

Here are the weight estimates provided by Mr. Nicholson:

Paul Nicholson "100 kilos, just over 16 stone" = 220-225

His wife weighed in at 20 stone (280 lbs) 7-8 months ago and was under a "doctor induced diet." He estimated she had lost 25 kilos (55 lbs) making her weight about 225 lbs. at the time of the accident.

He estimated his wife currently weighs about the same as his wife or 225 lbs. [ME reported this weight as 265 lbs.]

He stated that Ms. Tamaki was the smallest at approximately 11-12 stone or 154-168 lbs.

Feel free to check my conversions and math but using the above (and the MEs weight) I get a **total passenger weight estimate of 864 lbs to 883 lbs.**

I will write up the interview summary on my way to DC and have my field notes to you tonight. Jason

Aircraft Weight and Balance Revision Form

Date: 10/21/2008

Aircraft	
Tail No:	N63Q
Make:	Bell
Model:	206B
Serial:	2063
Time:	11376
TCD No:	

Registered Owner	
Name:	Paul Dudley
Address:	Linden Airport 1101 West Edgar Road Linden, NJ 07036

Weight	CG Range
Maximum Weight: 3,200.00	FWD: AFT:

As Received			
Previous Weight & Balance Date : 01/30/2008			
Empty Weight:	Useful Load:	Empty Weight CG:	Moment:
1,911.52	1,288.48	116.48	222,648.60

Item	Weight	Arm	Moment
• Added Polesti Boom Beam	3.0	5.50	16.50
			0.00
			0.00
			0.00
			0.00
			0.00
			0.00
			0.00

New			
Empty Weight:	Useful Load:	Empty Weight CG:	Moment:
1,914.52	1,285.48	116.30	222,665.10

Notes:

As Calculated ☒
As Weighed ☐

Prepared By: Michael E. Dillon

Signature: 

Printed Name: Michael E Dillon

Repair Agency License No:

PROP

AVIATION SERVICES, INC.

288 Christian Street Suite 107
Oxford, Connecticut 06478
(631) 756-5500

Aircraft Weighing Report

MANUFACTURER: Bell
MODEL: 206B
REGISTRATION: N63Q
SERIAL NO.: 2063

Approved for Return to Service:

Michael Tarascio
Weight Specialist


Approved Authorized Signature

October 6, 2011
Date Completed

Aircraft Weight and Balance Report Number 11-4203

Repair Station no. IDDR252K

PROPAIR AVIATION SERVICES, INC. Also Performs:

- 24 Month IFR/VFR Certifications 91.411 & 91.413
- Annual RVSM Certifications

For more information about our services call us at



IMPORTANT NOTES RELATIVE TO THIS WEIGHT AND BALANCE REPORT

- 1) Carefully review this report. Contact PROPair if you have questions. Assure that signatures are provided on cover page.
- 2) A copy of this report will be furnished for a period of three (3) years upon request. Repair stations are required to maintain a copy for two (2) years (FAR 145.61).
- 3) This report references the up-to-date equipment list which was applicable at the time of this weighing. If report is filed separately, attach equipment list. If report is inserted in Pilot's Handbook, position this information in front of equipment list.
- 4) The Following information will be placed in the aircraft log book:
 - a. Notation that aircraft was weighed and date weighed.
 - b. Basic Empty Weight. (If oil is included, so note).
 - c. Center of Gravity location.
 - d. Associated moment.
 - e. Aircraft Weighing Kit designation and date calibrated.
 - f. Authorized signature.

For your convenience, a label containing the above information is provided below.

AIRCRAFT WEIGHT AND BALANCE

Report Number 11-4203

DATE WEIGHED 6-Oct-11		MODEL Bell 206B		SERIAL NUMBER 2063	
PLACE WEIGHED Republic Airport (FRG)			WEIGHING PERSONNEL Michael Tarascio		
REACTION	SCALE READING	TARE	NET WEIGHT	ARM	MOMENT
LEFT MAIN	452	0	452		
RIGHT MAIN	590	0	590		
SUB-TOTAL (BOTH MAIN)			1042	179.9	187456
NOSE TAIL	918	0	918	55.1	50582
TOTAL AS WEIGHED			1960	121.45	238038

CONFIGURATION AND MEASUREMENTS

MAC 0
LEMAC 0

Main Jack Point: 179.9

Nose/Tail Jack Point: 55.1

OWNER: DUDLEY PAUL P 1101 W EDGAR RD LINDEN, NJ 07036

PROP
AVIATION SERVICES, INC.

PROP

AVIATION SERVICES, INC.

288 Christian Street Suite 107 / Oxford, Connecticut 06478

Repair Station No. IDDR252K

Acraft Model _____ Bell 206B _____ Reg. No. N63Q _____ Date 10/6/11

Basic Empty Wgt. 2146.8 * C.G. 120.20 Mom. 258044
% MAC _____

Weight Kit No. JW-75 Calibr. Date May-11
* Includes Full engine oil. All Stores Removed.

This aircraft weighed in accordance with accepted procedures and is approved for return to service.

 _____ President
Authorized Signature _____ Title

Electronic Forms(PDF)

UNITED STATES OF AMERICA
Department of Transportation
Federal Aviation Administration

MEDICAL CERTIFICATE 2nd CLASS

This certifies that (Full name and address):

paul dudley

[REDACTED]

Date of Birth	Height	Weight	Hair	Eyes	Sex
[REDACTED]	[REDACTED]	203	blk	brn	m

has met the medical standards prescribed in part 67, Federal Aviation Regulations, for this class of Medical Certificate.

Limitations

no restrictions

Date of Examination

6/23/2011

Examination No.

Examiner

Typed Name

kenneth d steiner md

AIRMAN'S SIGNATURE

Flight Crew:

PILOT:

Mr. Paul D Dudley

Pilot Cert Commercial rotorcraft

Not Injured

The pilot has prior incidents.

Weight: 203 Lbs- Medical Cert.

Passengers

PAX 1

Name: Paul Nicholson

Nationality Great Britain Not verified

Condition: Stable, NYU Hospital -Treated and released

Home address:

Temp address

Phone

Phone

Weight: 223Lbs- Record of Conversation

PAX 2

Name: Harriet Nicholson - Wife of Paul Nicholson

Nationality Great Britain Not verified (Born in Portugal)

Condition: Critical Bellevue Hospital

Home address:

Temp address

Phone

Phone

Weight: 253Lbs- Record of Conversation

PAX 3

Name: Helen Tamaki - Partner of Sonia Marra

Nationality New Zealand- Not verified

Condition: Critical Bellevue Hospital

Home address:

Temp address

Phone

Phone

Weight: 185 Lbs- NYC ME Record of Conversation

PAX 4

Name: Sonia Marra - Partner of Helen Tamaki, and Daughter of Harriet Nicholson

Nationality Great Britain - Not verified

Condition: Deceased pronounced by NYC ME at the scene

Home address:

Temp address

Phone

Phone

Weight: 265 Lbs- NYC ME Record of Conversation

ALCOHOL WAIVER AND SURETY RETURN FORM

NAME: [Redacted]
 ADDRESS: [Redacted]
 CITY: [Redacted]
 STATE: [Redacted]
 ZIP: [Redacted]

DATE: [Redacted]
 TIME: [Redacted]
 SIGNATURE: [Redacted]
 ADDRESS: [Redacted]
 CITY: [Redacted]
 STATE: [Redacted]
 ZIP: [Redacted]

NAME: [Redacted]
 ADDRESS: [Redacted]
 CITY: [Redacted]
 STATE: [Redacted]
 ZIP: [Redacted]

NAME: [Redacted]
 ADDRESS: [Redacted]
 CITY: [Redacted]
 STATE: [Redacted]
 ZIP: [Redacted]

NAME: [Redacted]
 ADDRESS: [Redacted]
 CITY: [Redacted]
 STATE: [Redacted]
 ZIP: [Redacted]

ALCOHOL WAIVER

Signature of [Redacted]

Signature of [Redacted]

Printed Name: [Redacted]

