

NATIONAL TRANSPORTATION SAFETY BOARD

Office of Aviation Safety Washington, D.C. 20594

October 1, 2014

Attachment 17 – Party Forms

OPERATIONAL FACTORS

DCA14MA081



NTSB Investigation No	
Date of Accident: 3/13/14	
Accident Location: PHL	

CERTIFICATION OF PARTY REPRESENTATIVE¹

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

I further acknowledge that I have familiarized myself with the attached copies of the NTSB Accident/Inciden Investigation Procedures (49 C.F.R. Part 831) and "Information and Guidance for Parties to NTSB Accident an Incident Investigations," and will comply, and ensure all employees and representatives of my organization will comply, with these requirements. This includes, but is not limited to, the provisions of 49 C.F.R. §§ 831.11 an 831.13, which, respectively, specify certain criteria for participation in NTSB investigations and limitations on the dissemination of investigation information.

No party representative may occupy a legal position or be a person who also represents claimants or insurers. certify that my participation is not on behalf of either claimants or insurers, and that, although factual information obtained as a result of participating in the NTSB investigation may ultimately be used in litigation (at the appropriate time, and in a manner that is not inconsistent with the provisions of 49 C.F.R. § 831.13 and 49 U.S.C. § 1154) my participation is to assist the NTSB safety investigation and not for the purposes of preparing for litigation. also certify that, after the NTSB IIC releases the parties and party participants from the restrictions on disseminition of investigative information specified in 49 C.F.R. § 831.13, neither I nor my party organization will in any way assert in civil litigation arising out of the accident any claim of privilege for information or records received at a result of my participation in the NTSB investigation.

I further acknowledge my responsibility to ensure that the NTSB is informed in writing, immediately and with specificity, when information or records provided to the NTSB, in any format, or other investigative activities, are subject to United States export controls, classification or licensing requirements, or sanctions restrictions. Similarly, commercially sensitive and/or proprietary material provided to the NTSB investigation should be clearly marked in accordance with the provisions of 49 C.F.R. Part 831.6.

	3/21/2014
Signature	Date
Capt. Lot Cline Check Airman/APD	
Name & Title	
US Airwaye/U S Airwaye	
Party Organization/Employer	

' In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."



NTSB Investigation	No. DCA14MA081	
Date of Accident:	13 MAR 2017	
Accident Location:		

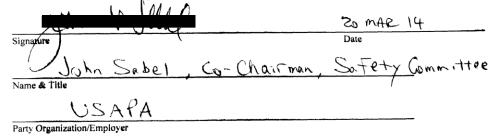
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NTSR Investigation No. DCA 14 MAO 8.1-Date of Accident: March 13, 2014 Accident Location: Phyladel Phyla

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Signature	1.000			October 2, 2014 Date
John Name & Title	V. Sabe	1. Member,	APA	Accusent Investigation
Allie &		+ 1. 20 22A	ion	(APA)

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