Eng. 4

NATIONAL TRANSPORTATION SAFETY BOARD PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT

This form to be used for reporting civil and public use aircraft accidents and incidents BASIC INFORMATION Accident/Incident Location Date/Time Nearest City/Place: GANANO Date: 4/2/12 Local Time: 9:10 Am ZIP: 77962 Country: U.S.A. Time Zone: Latitude: _____(dd:mm:ss N/S) Longitude: ____ (ddd:mm:ss E/W) Phase of Operation Collision with Other Aircraft Altitude of In-Flight Hover
Other
Unknown Occurrence Standing Takeoff (incl. initial climb) ☐ Cruise ☐ Midair Maneuvering Taxi Climb On-ground Landing Descent Approach None ft MSL AIRCRAFT INFORMATION Max Gross Weight: 7860 Manufacturer: AIR TEACTOR Model: AT-402A Weight at Time of Accident/Incident: 78/0 Serial Number: 4024-0782 Location of Center of Gravity at Time of Accident/Incident: inches from nose or datum Registration Number: N-45445 Amateur-built: Yes X No Percent Mean Aerodynamic Cord (% MAC) Type of Airworthiness Certificate Landing Gear Category of Aircraft Retractable Number of Seats: \ Airplane (Check all that apply) Check any additional landing gear Balloon If Large Aircraft, how many seats for: Standard Special configuration that applies: ☐ Blimp/ ☐ Glider Blimp/Dirigible Normal Utility Restricted Flight Crew: Tricycle Tailwheel ☐ Limited ☐ Gyrocraft Acrobatic Provisional Amphibian High Skid Cabin Crew: Helicopter ☐ Emergency Float Transport ☐ Experimental ☐ Skid Powered lift Passengers: Float Special Flight □ Ski Ultralight
Unknown ☐ Light Sport Hull Ski/Wheel Unknown Type of Maintenance Program Last Inspection Type Date Last Inspection: 3-1-12 Annual 100 Hour mm/dd/yyyy ☐ Continuous Airworthiness Conditional (Amateur-built only) AAIP Conditional Inspection ■ Manufacturer's Inspection Program Annual Airframe Total Time: 7745, 5 Unknown Other Approved Inspection Program (AAIP)
Continuous Airworthiness hours measured at (check one) X Last Inspection Time of Accident/Incident Other, specify: Stall Warning System Installed Type of Fire Extinguishing System IFR Equipped ☐ Yes ☑ No ☐ Unknown None
Specify Yes No Unknown **ELT Installed ELT Activated** ELT Manufacturer: Yes X No ☐ Yes ☐ No Model/Series: ELT Aided in Locating Accident/Incident Serial Number: Yes No Battery Exp. Date: _ Battery Type: Reciprocating Fuel Engine Type Propeller System Type Reciprocating ☐ Turbo Jet Manufacturer: HARTZELL ☐ Carburetor ☐ Fuel Injected ☐ Turbo Shaft Turbo Fan Fixed Pitch Unknown Controllable Pitch Turbo Prop # 139 Model: Engine Rated Power Measured Time Time as (check one) Total Date Since Since Horsepower or Overhaul Engine Manufacturer's of Mfg. Time Inspection Engine Engine Manufacturer Model/Series Serial Number lbs of Thrust (hours) (hours) (hours) mov/dd/yyyy 9/1/1977 Eng. 1 PRATE + Whitney PTGH-27 PCE-41641 680 18,772 11,016 Eng. 2 Eng. 3

OWNER/OPERATOR INF	ORMATION	V					
Registered Aircraft Owner		Owner Address					
Name: Coastal Flyir		City: Garado State: Te ZIP: 77962					
Fractional Ownership Aircraft:		State: Tk ZIP: 779(2) Country: 4.5A					
Operator of Aircraft Sa	Operator Address Same As Registered Owner						
Name: ERIC NELS	City: LOUIS	E					
Doing Business As: NELS	State: 7 X ZIP: 77455						
Air Carrier/Operator Designator (4	Character Code	E): NE Q G		Country: WHART			
Regulation Flight Conducted Unc		Revenue Sightseeing					
☐ FAR 91 ☐ FAR 129 ☐	FAR 91 Special	Flight Public Use (select		☐ Yes 🗷 No			
☐ FAR 103 ☐ FAR 133 ☐	Non-US, Comme	ercial Federal St	ate 🗌 Local	Air Medical Flight			
	Non-US, Non-co Armed Forces	mmercial Unknown		□ Y	'es	No No	
Purpose of Flight		Revenue Operation		Type of Commercia	I Onerat	ting Certificate I	Held
for FAR 91, 103, 133, 137 (Select one	e)	for FAR 121, 125, 129, 135 (Se	elect one)	(Check all that apply)	и орын		
Personal		Scheduled or Commuter		None		. (121)	
Business		Non-Scheduled or Air Taxi		☐ Flag Carrier Operati ☐ Supplemental	ing Certiti	cate (121)	
Executive/Corporate Other Work Use				Air Cargo			
☐ Instructional		Domestic or International		Foreign Air Carriers			
Ferry		Domestic International		Commuter Air Carri			
☐ Positioning				Large Helicopter (12			
Acrial Observation	ļ	Cargo Operation		Rotorcraft External	Load (133	3)	
Air Drop		Passenger/Cargo		-01-			
☐ Air Race / Show ☐ Flight Test		Passenger How Cargo Ibs	many?	Agricultural Aircraf	1 (137)		
Public Use		Mail		Other Operator of L	arge Aircr	raft	
☐ Unknown							
OTHER AIRCRAFT - CO	LLISION (H	fair or ground collision occur	ed, complete t	this section for other a			
		fair or ground collision occur			Damag	ge to Other Aires	
Aircraft Registration Number	Manufacturer:					royed 🔲 Mi	пог
Aircraft Registration Number	Manufacturer: Model:				Damag	royed 🔲 Mi	пог
Aircraft Registration Number	Manufacturer: Model: raft		City:		Damag Dest	royed 🔲 Mi	nor
Aircraft Registration Number	Manufacturer: Model: raft		City:State:	ZIP:	Damag Dest	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft Name:	Manufacturer: Model: raft		City:State:		Damag Dest	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircr First Name: Middle Initial:	Manufacturer: Model: raft		City: State: Country:	ZIP:	Damag Dest	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name:	Manufacturer: Model: raft		City:State:Country:	ZIP:	Damag Desti	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial:	Manufacturer: Model: raft		City: State: City: City: State:	ZIP:	Damag Desti	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: Last Name:	Manufacturer: Model: raft		City: City: City: State: Country:	ZIP:	Damag Desti	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial:	Manufacturer: Model: raft		City: City: City: State: Country:	ZIP:	Damag Dest Subs	royed	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: Last Name:	Manufacturer: Model: raft CTION/FAIL	_URE (If more space is need _Yes □ No □ Unknown	City: State: Country: City: State: Country: ded, continue of	ZIP:	Damag Dest Subs	royed 🔲 Mi	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti	Manufacturer: Model: raft CTION/FAIL	_URE (If more space is need _Yes □ No □ Unknown	City: State: Country: City: State: Country: ded, continue of	ZIP:	Damag Dest Subs	royed Mi stantial No Fotal Time/Cycle On Part	nor
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti	Manufacturer: Model: raft CTION/FAIL	_URE (If more space is need _Yes □ No □ Unknown	City: State: Country: City: State: Country: ded, continue of	ZIP:	Damag Dest Subs	royed Mi stantial No Fotal Time/Cycle On Part Hi	es
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Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti	Manufacturer: Model: raft CTION/FAIL ion/Failure? acturer, part no.,	_URE (If more space is need Yes No Unknown serial no., and describe the failure.)	City: State: Country: City: State: Country: ded, continue of	ZIP:	Damag Dest Subs	Fotal Time/Cycle On Part Ho Cycle Con Part Ho Cycle Con Part	es ours yeles
Registered Owner of Other Aircu First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti (If yes, list the name of the part, manufal	Manufacturer: Model: raft CTION/FAIL ion/Failure? acturer, part no.,	_URE (If more space is need Yes No Unknown serial no., and describe the failure.)	City: State: Country: City: State: Country: ded, continue of	ZIP:	Damag Dest Subs	Fotal Time/Cycle On Part Ho Cycle Con Part Ho Cycle Con Part	es ours yeles
Aircraft Registration Number Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti (If yes, list the name of the part, manufa	Manufacturer: Model: raft CTION/FAIL ion/Failure? ceturer, part no., Aircraft I	_URE (If more space is need Yes No Unknown serial no., and describe the failure.) ER PROPERTY Fire Both Ground and I	City: State: Country: State: Country: Bed, continue of	ZIP:	Damag Dest Subs	Fotal Time/Cycle On Part Ho Cycle On Part Ho Ground and In-Flig	es ours yeles Part auled ours
Registered Owner of Other Aircu First Name: Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNG Was there Mechanical Malfuncti (If yes, list the name of the part, manufal DAMAGE TO AIRCRAFT Aircraft Damage	Manufacturer: Model: Traft CTION/FAIL ion/Failure? acturer, part no., Aircraft I	URE (If more space is need Yes □ No □ Unknown serial no., and describe the failure.) ER PROPERTY Fire □ Both Ground and I □ Unknown Origin	City: State: Country: State: Country: Bed, continue of	ZIP:	Damag Dest Subs	Fotal Time/Cycle On Part Ho Cycle Con Part Ho	es ours yeles Part auled ours

Description of Damage to Aircraft and Other Property (use additional sheet if necessary)									
AIRPORT INFORMATION (if the		and on ann	nach taknaff ar	within 2 miles	of an airmort	complete this section)			
					72.010000				
Airport Identifier 38°58'59.39"	7 _	_W	Distance From						
Airport Name: Coastal Flying			Direction Fron		,0	degrees MAG			
Proximity to Airport Off Airport/Airst	ip On Airport O	On Airstrip	Airport Elevat	ion: <u>40</u>		ft. MSL			
Approach Segment (Select one) On Instrument Approach Landin		-	□ Fü		-0	☐ Go Around			
☐ Crosswind ☐ Down	vind Low	Approach	VFR Approach	orted Landing (a		n)			
IFR Approach (Check all that apply) None	LDA C	Practice GPS Loran Unknown	None Traffic Pattern Straight-In Valley/Terrain Go Around Full Stop		State	op and Go nuch and Go nulated Forced Landing reed Landing ecautionary Landing aknown			
Runway Information			Condition of R	unway/Landir	ng Surface	(Check all that apply)			
Runway ID: Same (L/R/C) Length: 3	DOO ft Width: 2	5ft	Dry Holes	☐ Snow-	-Compacted -Crusted	☐ Water-Calm ☐ Water-Choppy			
Runway/Landing Surface (Check all that Asphalt	adam	1	☐ Ice Covered ☐ Rough ☐ Rubber Depos ☐ Slush Covered	Snow-	-Dry -Wet	☐ Water-Glassy ☐ Wet ☐ Unknown			
FLIGHT ITINERARY INFORMA									
Last Departure Point 38"58"59"39" N. Airport ID: Quest' Hull 7" W. City: GANADO State: Texas Country: U.S.A.	Time of Departure Time: 4.10 Am Time Zone: Central	City: Loc	Same		Type Fligh None Company Military V VFR Activated?	t Plan Filed VFR/JFR VFR IFR VFR Unknown Yes No			
Type of ATC Clearance/Service (Check a	il that apply)								
None ☐ Special VFR ☐ 1FR	☐ Specia			R Flight Follow offic Advisory	ing	☐ Cruise ☐ Unknown / NA			
Airspace where the accident/incident occ Class A Class E Class B Class G Class C Demo Area Class D Warning Area	☐ Prol ☐ Res ☐ Mili	hibited Area tricted Area	s Area (MOA) Area	☐ Jet Training ☐ TRSA ☐ FAR 93	, Area	Special Air Traffic Control Area Unknown			
Aircraft Load Description (Check all that	apply)								
□ None □ Towing Glide □ Passengers □ Towing Bann □ Cargo □ Other Externs	er 🔲 Wat	echutists ter emical/Fertilize	r/Seeds	☐ Livestock ☐ Unknown					
FUEL & SERVICES INFORMA									
Fuel on Board at Last Takeoff (convert from pounds, as necessary) Gallons	Fuel Type 80/87 100 Low Lead 100/130	☐ 115/145 ☑ Jet A ☐ Automotiv	☐ JP3 ☐ JP4	Oth	ner, specify				
Other Services, if Any, Prior to Departu									

EVACUATION OF AIRCRAFT									
Was an emergency evacuation of the aircra			Yes 1						
Method of Exit - Describe how the occupants exited and how many occupants evacuated each location									
								- 1	
								1	
WEATHER INFORMATION AT T	HE ACCI						Method of	Datafore	
Weather Observation Facility			ce of Weather In k all that apply)	tormation			(Check all the		
Facility ID: Internet Observation Time: 9:00		□ Na	ational Weather Ser			Company	In Person	2500,000	
Observation Time: 4-00 Time Zone: Central			ight Service Station V/Radio			☐ Military ☑ Internet	☐ Teletype ☐ Telephone	e/Computer	
Distance from Accident Site: 10	NM	□ A	utomated Report	g	TC)	Unknown	☐ Aircraft R	tadio	
	grees MAG	LIC	ommercial Weather	Service (DUA	15)		Unknown		
Briefing Type/Completeness		Ligh	t Condition				Visibility		
☐ Full ☐ Abbrev		D.D.				Dark Night	10	miles	
Partial / Limited By Pilot Unknow Partial / Limited By Briefer Not Pe		⊠ Da	ay Ni	gnt		Bright Night Not Reported		united:	
Sky/Lowest Cloud Condition	Ceiling					striction to Visibility		at apply)	
☐ Clear ☐ Thin Broken ☐ Thin Overcast	☐ None ☑ Brok		☐ Obs	cured	M	None Blowing Dust	☐ Fog ☐ Grou	nd Foe	
Few ☐ Thin Overcast ☐ Partial Obscuration ☐ Unknown	Over		_	mown		Blowing Sand	☐ Haze		
Scattered						Blowing Snow Blowing Spray	☐ Ice Fe		
Lowest Cloud Condition Height	Ceiling	Heigh	t			Dust	Unkn		
2,500 AAGL				ft AGL					
Wind Direction Wind Speed			Wind Gusts			pe of Turbulence (C		oply)	
☐ Indicated: Velocity: 5	KTS		Velocity:	KTS		None In C	louds nity of Thunder	rstorm	
degrees MAG -or-			Gusting		1 -	verity of Turbulence		19. A P 19. C 195. A I	
☐ Variable ☐ Light and 1	'ariable	Not Gusting			☐ Extreme ☐ Moderate ☐ Lig			☐ Light	
			<u> </u>		-		erate Chop		
NOTAMs (D, L and FDC), AIRMETS	SIGMET	s, PIR	EPs in effect at	the time of	f the	accident/incident			
1									
l									
1									
1									
1									
	Icing Fore	cast		- Lambert		Type of Precipitat	ion (Check all	that apply)	
Temperature: (C)	Amo		Moderate	Type Rime		None	Drizzle		
or <u>76 b</u> (F)	➤ None ☐ Trace		Severe	☐ Clear		Rain Snow	☐ Ice Pellets ☐ Snow Pellets		
Altimeter Setting: in. HG or MB	Light			Mixed		Hail Rain Showers	☐ Snow Grai		
Density Altitude:ft	Icing Acti					Freezing Rain	☐ Ice Pellets	Shower	
Dew Point:(C)	Amo None		Moderate	Type Rime		Snow Shower	Freezing D	Prizzle	
or(F)	☐ Trace	Section 2	Severe	Clear		Intensity of Precip	itation		
	Light			☐ Mixed		☐ Light ☐ N	1oderate	☐ Heavy	

PILOT "A" INFORMAT										
Pilot "A" Responsibilities at th				or 1 m.t	O :::	Г	По#1	Tinks Comm		I
	Student Pilot	☐ Flight Ins	structor [Check Pilot	☐ Flight	Engineer	U Other I	light Crew		
Pilot "A" Identification					11200					1
First Name: Wesley Middle Initial: 7. Last Name: Fortik				State	Edr Text atry: U	as_ 2	ZIP: 779	57		
Age at time of Accident/Inciden	t: <u>34</u>	Date of Birt	th:		ificate N	lumber.			-	
Degree of Injury	Seat Occupie	ed .	in our jy	Seat	Belt			Shoulder H	arness	
None Fatal Unknown Serious	Left Right Center	☐ Front☐ Rear Single	Unknov			100	□ No □ No	Used Available	⊠ Yes ⊠ Yes	□ No □ No
Pilot Certificate(s) (Check all th	nat apply)			200		-	V			
□ None □ Studen □ Private □ Flight		☐ Recrea	tional	Commercia Airline Tra			Flight Engir U.S. Militar	у	☐ Foreign	
Principal Occupation Mo	edical Certifica			35543556		tificate Va	A CONTRACTOR OF THE PROPERTY O	Date of La	ast Medic	al i
Other	Class I	Class 3 Driver's Licen Unknown	nse (Sport Pilot	only) 🔯 W		iitations/wa tions/waive		4/28/ mm/dd	עניניל	
Medical Certificate Limitation	ns					Audipontin	400			
must Fly with		ve. 10	nses							
1.1031 1.19 3-101	-0,50-		. 55							
Medical Certificate Waivers										- ALOSSIA
										1
		Tre-ba	Danian Ain		-100		111111111111111111111111111111111111111			
Date of Last Flight Review or Equivalent, Including		-511	Review Airo							
FAR 121/135 Checks: 2	25/12	Make:	CESSNI	3	- i - m					
790 O O	mm/dd/yyyy		C-172			Y	D. ti-ste			
	Other Aircraft (Check all that ap	E-017 F7 F6	- C20 (1)(2-1)(1)	ent Rating(s)	1		or Rating(s	}		
	None	37.97	None	, иш ирргуу		M None			Instrumen	t Airplane
Single-Engine Land	Airship		Airpla A		l	L Airpla	ne Single-En			t Helicopter
	☐ Free Balloon ☐ Glider		☐ Helico		- 1	☐ Gyrop	ne Multi-Eng lane		Helicopter Glider	
Multiengine Sca	Gyroplane		L FOWE	içu Em	1	Power] Glider] Sport	
	☐ Helicopter ☐ Powered Lift									
Type Ratings	Powered Life					Student	Endorseme	nts (Include a	dates)	
type Ratings					A.					
l										
				1		т		т —	1	7
Flight Time (enter appropriate	All	This Make	Airplane Single	Airplane			drument		6111	Lighter
number of hours in each box)	Aircraft	& Model	Engine	Multiengine	Night	Actual	Simulated	Rotercraft	Glider	Than Air
Total Time		550	3600	-	-	-	+	+		
Pilot in Command (PIC)	3550	550))-700							
Time as Instructor				W. Wellow			-	Sentiture.	F III	W2
This Make/Model	98	-000 m -14.		10000 To 150 100		1				
Last 90 Days Last 30 Days	52							1		
Last 24 Hours	5							T		
Armin M. I. Karama				-	-	_	- HOW HAD	and the same of th		

Pilot "B" Responsibilities at the Time of Accid					-2007-00-00-00-00-00-00-00-00-00-00-00-00-				
Pilot Co-Pilot Student Pilot Flight Instructor Check Pilot Flight Engineer Other Flight Crew									
Pilot "B" Identification									
First Name: Middle Initial: Last Name:			City: State: Country: _	Z	IP:	······································			
Age at time of Accident/Incident: Date of Birth: Certificate Number:									
D		mm/dd/yyyy	Cont Dale			Shoulder H		-	
☐ Minor ☐ Unknown ☐ Right ☐	Front [Rear Single	Unknown	Seat Belt Used Available	Yes T		Used Available	☐ Yes [□ No □ No	
Pilot Certificate(s) (Check all that apply)		_		1			_		
None Student ☐ Private Flight Instructor	Recreation Sport		ommercial rline Transport		Flight Engir U.S. Militar	у	Foreign		
Principal Occupation Medical Certificat	e		Medical Co	ertificate Val	idity	Date of La	st Medical		
Other Class I D	lass 3 river's License nknown	(Sport Pilot only)	The state of the s	imitations/waiv tations/waivers		mm/dd/y	yyy		
Medical Certificate Limitations			1						
				11.40					
Medical Certificate Waivers									
Date of Last Flight Review	Flight Re	eview Aircraft						J- J- 177	
or Equivalent, Including								- J- (m-	
or Equivalent, Including FAR 121/135 Checks:					*****				
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy	Make: Model:								
or Equivalent, Including FAR 121/135 Checks:	Make: Model: Rating(s)		ating(s)	Instructor (Check all th	Rating(s)				
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) Other Aircraft I (Check all that apply) (Check all that appl) None	Make: Model: Rating(s)	Instrument Ra	ating(s)	Instructor (Check all th	Rating(s) at apply)		instrument Ai		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Or Equivalent, Including mm/dd/yyyy Other Aircraft I (Check all that apply) Airship	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th	Rating(s) at apply) Single-Engi		Instrument Ai		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) Other Aircraft I (Check all that appty) (Check all that appt None None Airship Single-Engine Land Free Balloon Free Balloon	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Airplane	Rating(s) at apply) Single-Engin	ne 1	instrument Ai Instrument He Helicopter		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) Other Aircraft I (Check all that apply) (Check all that apply) None None None Single-Engine Land Airship Single-Engine Sea Glider Multiengine Land Glider Multiengine Sea Gyroplane	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th	Rating(s) at apply) Single-Engin Multi-Engin	ne []	Instrument Ai		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sea Helicopter	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Gyroplan	Rating(s) at apply) Single-Engin Multi-Engin	ne []	instrument Ai Instrument He Helicopter Glider		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sea Helicopter Powered Lift	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Gyroplan Powered	Rating(s) at apply) Single-Engin de Lift	ne	instrument Ai Instrument He Helicopter Glider Sport		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sea Helicopter	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Gyroplan Powered	Rating(s) at apply) Single-Engin de Lift	ne []	instrument Ai Instrument He Helicopter Glider Sport		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sea Helicopter Powered Lift	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Gyroplan Powered	Rating(s) at apply) Single-Engin de Lift	ne	instrument Ai Instrument He Helicopter Glider Sport		
or Equivalent, Including FAR 121/135 Checks: mm/dd/yyyy Airplane Rating(s) (Check all that apply) None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sea Helicopter Powered Lift	Make: Model: Rating(s)	Instrument R. (Check all that a	ating(s)	Instructor (Check all th None Airplane Gyroplan Powered	Rating(s) at apply) Single-Engin de Lift	ne	instrument Ai Instrument He Helicopter Glider Sport		
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ADDITIONAL FLIGHT CREV	W MEMBERS	(Exclusive of cabin a	ttendants, complete the	following info	matic	on)		
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Middle Initial:		State:	Z1P:		- 1	☐ Minor ☐ Serious	Unknown	1
Last Name:		Country:		-				_
Pilot Certificate(s) (Check all that a	pply)				- 1	Seat Occupi	- Indian	
☐ None ☐ Student	Recreational	Commercial	Flight Engineer	☐ Foreign	1	☐ Left ☐ Right	☐ Front ☐ Rear	- 1
	☐ Sport	Airline Transport	U.S. Military	-		Center	Single	1
Type Rating/Endorsement for Accident/Incident Aircraft?	Yes No	of this Accider	ime at the Time	hrs			☐ Unknown	1
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Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accider	nt/Incident:	hrs				
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First Name:		City:				None	Fatal	
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☐ None ☐ Student ☐ Private ☐ Flight Instructor	☐ Recreational ☐ Sport	☐ Commercial ☐ Airline Transport	☐ Flight Engineer ☐ U.S. Military	☐ Foreign		☐ Left ☐ Right	☐ Front ☐ Rear	
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NTSB Accident/Incid	ient No.	Reviewed by NTSB Regional Office	Name of Investigator	Date Report Received
CEN12CA221		DENVER, CO	ARNOLD W. SCOTT	04/11/12

April 1, 2012

Dry fertilizer equipment was on the aircraft. Later that afternoon, the aircraft was switched over to spray booms and spray pump.

April 2, 2012

I showed up to work in the morning. The aircraft was inside of the hangar still. As it was being loaded at 9am, I was checking the oil and cleaning the windshield. The aircraft was then pulled out for the first flight of the day. I started the aircraft. The wind was out of the southeast at 5mph. Clear skies. I lined up on the runway heading 180. I pushed the throttle forward and started accelerating down the runway. About halfway down the runway, the tail came up and chemical spots started to appear on the windshield. ¾ of the way down the runway, the aircraft started to fly and chemical was starting to cover the windshield. I activated the windshield washer to clean chemical from the windshield and it was immediately was covered again. I thought about dumping the load but I didn't feel comfortable because I was having trouble seeing to maintain level flight. I also thought about stopping the aircraft, but I was already dedicated to flight by this time. I became airborne and immediately activated the windshield washer again. Unfortunately, the windshield and side windows were covered with chemical by this time and I lost all visual reference and was then unable to maintain level flight. The next thing I remember was impacting the ground and sliding to a stop.

After further investigation, I realized that when the aircraft was switched over from dry product to liquid, the hopper vent was not turned around. This in turn pressurized the hopper, blowing chemical out of the hopper lid and onto the windshield, ultimately completely obscuring my view, which led to me not being able to maintain level flight.

Alesly fth 4/9/\$2012