NATIONAL TRANSPORTATION SAFETY BOARD PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT This form to be used for reporting civil and public aircraft accidents and incidents

This form to be use	ed for repor	ting civil	and public a	ircraft acc	idents	and inc	claents		
BASIC INFORMATION									
Accident/Incident Location	1 1	0		ident/Incident	Date/Tim	e Local Tin	ne: 11.6	am	
Nearest City/Place: North Perry air	port, Pembrok	e Pines State	: FL Date	: 3/21/20 mm/dd/yy	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO	Local III	F1)T	
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(Enter in decimal degrees or deg	grees:minutes:secon	ids)	Co	llision with Ot	ner All Ci		2 Marie 19 47	THE STATE OF	1
AIRCRAFT INFORMATION				a scale of 8	1 Cont	ified			-
Registration Number: N 704V	M		20.2112	☐ IFR-Equippe	Space Fligh	it		September 1	1
Manufacturer: Cessna			CESSANDE DE	☐ Unmanned A	ircraft		1	bs	1
Model: 150 M			N	laximum Gros	s Weight:	1600			5
Serial Number: 15078909			V	Iaximum Gros Veight at Time	of Accide	nt/Incluen	1. Crow S	Seats:	ON SERVICE SERVICE
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OGyroplane Balloon OHelicopter Comm			Emergency	Float SI	kid	OElectri	IC		
OPowered Lift Transp	ort Experim		☐ Float ☐ Hull		ki/Wheel	Fuel Syst	tem Type	(Reciprocating	9
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Eng. 3	THE PERSON NAMED IN	sera to total 200						1 Diach	
Eng. 4		Propeller	1 OFixed I		Pr	opeller 2		OFixed Pitch OControllable	e Pitch
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MAnnual OUnknown	44		1102/0cm694			Model:		CHEN.	
Date Last Inspection: 9/7/20	18				Ad	ditional E	quipmen	t (Check all	that ap
mileady	"		illed: QYes (ONo		ADS-B		- d 970 - 0.7	
Airframe Total Time: 6911.4	hrs	If Yes: ELT Manu	facturer:			Airframe	Parachute	icator	
hours measured at (Select one)		Model or P		man of the	The second second	Angle of A		ircator	
OLast Inspection OTime of Ac	ccident/Incident	TSO No.:	C91 (121.5 MHz)	OC91a (121.5	MHz)	Data Rec	order		THE REAL PROPERTY.
ype of Maintenance Program (Sei	lect one)		OC126 (406 MHz)			Electroni	c Flight B	ag or Handhe	ld Devie
Annual		Was ELT	still mounted in air	eraft? OYes	OHO	Electron	ic Primary	retion Display	ay
Conditional (Amateur-built only)	to been cut in eq	Was ELT	still connected to an	tenna? OYes	ONO	Handhel			
Manufacturer's Inspection Program	(AAIP)		Activate? OYes	ONO		☐ Heads U	Jp Display		
Other Approved Inspection Program (Continuous Airworthiness	· · · · ·	If activate	ed:	ower Over	ONo	Onboard	d Weather	Davice	
Other, specify:			Aid in Locating Air	crait: Ores	CITO	Satellite Stall W	arning Sy	stem	
escription of Fire Extinguishing	System	If not act				□ Video			
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OWNER/OPERATOR INFORM	ATION		
Registered Aircraft Owner		City: Lave Worth,	
Name: Marina Misoslavova		State: Florida Z	IP: 33460
Fractional Ownership Aircraft: Yes) No	Country: USA	
Operator of Aircraft Same As Re	egistered Owner	Same Address as Registered Owner	
Name:		City:	
Doing Business As:		State:	ZIP:
Air Carrier/Operator Designator (4 Charact	ter Code):	Country:	
Operating Certificates Held (Check all that apply)	Regulation Flight Conducted Unde	Revenue Operation for FAR 121 (Select one for each group)	, 125, 129, 135
☐ None ☐ Flag Carrier Operating Certificate (FAR 121) ☐ Supplemental ☐ Air Cargo ☐ Foreign Air Carriers (FAR 129) ☐ Rotorcraft External Load (FAR 133) ☐ Commuter Air Carrier (FAR 135) ☐ On-Demand Air Taxi (FAR 135)	OFAR 91 OFAR 129 OFAR 413 OFAR 103 OFAR 133 OFAR 433 OFAR 121 OFAR 135 OFAR 433 OFAR 125 OFAR 137 OFAR 433 OFAR 91 Special Flight ONon-US, Commercial ONon-US, Non-commercial	O Non-Scheduled or Air Taxi	O Domestic O International
Commercial Air Tour (FAR 136) Agricultural Aircraft (FAR 137) Pilot School (FAR 141)	OPublic Aircraft (Select one)	Purpose of Flight for FAR 91, 16 (Select one)	3, 133, 137
Certificate of Authorization or Waiver (COA) Commercial Space Transportation Experimental Permit Commercial Space Transportation License Other Operator of Large Aircraft	O Armed Forces O Federal O State O Local O Unknown	O Aerial Application O Aerial Observation O Air Drop O Air Race/Show O Banner Tow O Business O Executive/Corporate O Firefig OFlight O Glider O Collider O	Test Tow ctional Work Use nal
Revenue Sightseeing Flight	Air Medical Flight	O External Load OSkydi	
OYes ONo	OYes ONo	OFerry	
AIRPORT INFORMATION (Fill in if			
Airport Name: North Perry Airport Identifier: KKWO Proximity to Airport: O Off Airport/Airstrip	00- A:	Distance From Airport Center: Direction From Airport: Airport Elevation:	sm degrees true ft. msl
Runway Information		Condition of Runway/Landing Surfa	ace (Check all that apply)
Runway ID:(L/R/C) Length:	ft Width:ft	Dry Snow-Compac	ted
Runway/Landing Surface (Check all that apple Asphalt Grass/Turf Macada Gravel Metal/V Dirt Gravel Snow	am Water Wood	□ Holes □ Snow-Crusted □ Ice Covered □ Snow-Dry □ Rough □ Snow-Wet □ Rubber Deposits □ Soft □ Slush-Covered □ Vegetation	□ Water-Choppy □ Water-Glassy □ Wet □ Unknown
pproach/Departure Segment (Select one)			
OVFR Departure OTakeoff OIFR Departure Proced Initial Climb	OOn Instrument Appro	OBase OGo A	ted Landing (after touchdown)
R Approach (Check all that apply)	The state of the s	VFR Approach (Check all that apply)	
None		None	with the transfer of the organization
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	□ Circling □ Unknown		☐ Unknown

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O Pilot O Co-Pilot	Nesponsibilit	ties at the Time	e of Accident/I	ncident		nt Engineer	O Other Flig	ght Crew		The same of
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Middle Initial: M	THE REAL PROPERTY.				State:	FL	ZI	P: 3346		
Last Name: Gavrilor					Country:	USA	ELECTRICAL CONTRACTOR			
Age at time	of Accident/I	ncident: 26	Date of	Birth:		mn	n/dd/yyyy			
			Certificate Nu	ALC: NO.				T	flatable Resi	traints
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O Other	O None O Class 1	O Driver's L			Without lim	itations/waivers			7/12/2018 mm/dd/yyyy	
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Last Name: Perez				State: 7	200	Total Control				
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NOTAMs (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident:

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escription of Damage to Aircra	ft and Other Property	(Use additional sheet if necessary)		a stance of the
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RECOMMENDATION (How could the	s accident/incident have been	prevented?)		
Operator/Owner Safety Recommendation 1. Tower being more at not instructing airci not clearing them Ground controllers being			intersection causes clus olission avo	and meanwhile terino idande as well
MECHANICAL BLALFILL	iligated beta long tenir southern		Andrew State of the State of th	
Was there Mechanical Malfunction/Failur (If yes, list the name of the part, manufacturer, par	re? Yes No		parate sheet)	Total Time/Cycles On Part Hours
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TIEL O OFFICE INTEGRAL				
FUEL & SERVICES INFORMATION Fuel on Board at Last Takeoff Convert from pounds, as necessary) Gallons	Fuel Type O 80/87 O 100 Low Lead O 100/130 O Jet	A O JP8	O Other, speci	fy
Other Services, if Any, Prior to Departure				
VACUATION OF AIRCRAFT				
Vas an emergency evacuation of the aircra				
lethod of Exit – Describe how the occupant	s exited and how many occu	pants evacuated each locati	on	
THER AIRCRAFT - COLLISION	(If air or ground collision	occurred, complete this	section for other a	ircraft)
rcraft Registration Number Manufacture Model:	rer: (essna 172M			Damage to Other Aircraft ☐ Destroyed ☐ Minor ☐ Substantial ☐ None
egistered Owner of Other Aircraft me: Aflantis flight acad y: Vallamood te: FL O ZIP: 33024 untry: USA	emy inc	Pilot of Other Airch Name: Abdulat City: Pembrone State: FL Country: USA	Ali A A	legurashi 223

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