	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												ents	
BASIC		TION												
	t/Incident Loc						Accident/Incident Date/Time							
							Da			15	Loo	cal Time:	09:14 AM	
			ited States					mm/dd	vyyy		Tir	ne Zone:	EDT	
Latitude:			Longitude:			· ·								
	(Enter in decima	l degrees or d	egrees:minutes:sec	conds)			Co	ollision with	Othe	er Airc	raft: C) Midair	OOn-groun	d O None
AIRCI	RAFT INFO				1									
Registr	ation Number:	N42BR						☑ IFR-Equip □ Commercia						
Manufa	Manufacturer: Legend							Unmanned		-				
Model: _Turbine Legend							laximum Gr							
	umber:						W	Veight at Tim	ie of	Accid	ent/Inci	dent:		lbs
Year of	Manufacture:							umber of Se						
Amateu	Ir-Built: OYes		OKit/Plans Mai Original Design				1	abin Crew Seat				Passenger	Seats: 01	
	⊙ No					The Processing of the Processi		umber of En	igine	s:1			1	
Catego ⊙Airpla	ry of Aircraft	Type of A (Check all t	irworthiness Co hat apply)	runcate		Landing Ge (Check all the						e Type (Se procating		id Rocket
O Ballo	on	Standar	d Special				Ret	ractable			O Turb	o Shaft	-	Rocket
OBlimp OGlide	Dirigible	□ Norma ☑ Aerob				Tricycle	e DTailwheel OTurbo Prop OHybrid Rocket OTurbo Jet ONone							
ÖGyro	plane	Balloo	n Provisi	ional										
O Helic O Powe		Comr Trans												
ORock	et		Specia Specia	l Light-Spo		Hull				ieel	Fuel Sy	stem Type	(Reciprocati	ng)
OUltral OUnkn	0		-	mental Lig		Other La	uncł	h/Recovery Sys	stem		OCarb	uretor	O Fuel-	Injected
Conna	0.000	□Certificate □None	e of Authorization	or Waiver Unknown	(COA)	□ None		D U	nkno	wn				
			. .					Date		d Powe		Total	Time Inspection	Since:
Engine	Engine Manufa	icturer	Engine Model/Series			facturer's Number		of Mfg. mm/dd/yyyy		lbs of T	ower or 'hrust	(hours)	(hours)	(hours)
Eng. i	Walter													
Eng. 2														
Eng. 3 Eng. 4														
	an action Truna			Propell	er 1	OFixed P				Prope	ller 2	-	Fixed Pitch	L
Саят н О100-н	spection Type	tinuous Airwo	rthingag				ollable Pitch OControllabl							
O AAIP		ditional Inspe		Manufa	cturer:	OGround	d Adjustable Ma			OGround Adjustable Manufacturer:				
● Annu	al O Unk	nown		1						Mode				
Date L	ast Inspection:	06/14/2 mm/dd/yy				OYes O			A	dditio			Check all tha	
Airfran	ne Total Time:			If Yes:		0				DADS	-В			11 57
	s measured at (S					rer:					ame Para e of Atta	chute ck Indicato	or	
OL	ast Inspection	O Time of A	ccident/Incident			0.: (121.5 MHz) (91a (121 5 MH		Auto	pilot			
	Maintenance	Program (Se	elect one)			(121.5 MHZ) 6 (406 MHZ)			- P		Recorde		Handheld De	vice
O Annu	al itional (Amateur-	built orby)		Was EL	T still me	ounted in aircra	aft?	OYes ONo		Eleci	tronic Mu	ltifunction	Display	
O Manu	facturer's Inspect	ion Program		1		nnected to ante		? OYes ONe				mary Fligh S	it Display	
	Approved Inspect nuous Airworthin		(AAIP)	If active		e? OYes O	0110		Handheld GPS					
	, specify:	035		1 "		Locating Aircra	Image:			e				
	otion of Fire Ex	tinguishing	System	If not a	ctivated:	-				Stall	Warning	System		
O None	2	- 0	-	Indicate	Reason:		imag	ge		1	o Record	ing Device	•	
O Spec	ity:					☐ Fire Dama ☐ Battery Ex		ed/Damaged			a, specify	, .		
					Battery Expired/Damaged Unknown									

OWNER/OPERATOR INFORMA	TION			
Registered Aircraft Owner			City: Columb	ia
Name: BR Legend, LLC			State: SC	ZIP: <u>29201</u>
Fractional Ownership Aircraft: O Yes O	No		Country: <u>Unit</u>	ed States
Operator of Aircraft Same As Re	gistered Owner	_		Registered Owner
Name:			City:	
Doing Business As:				ZIP:
Air Carrier/Operator Designator (4 Charact	er Code):		Country:	
Operating Certificates Held (Check all that apply)	Regulation Flight Conducted Un		evenue Operat elect one for each	ion for FAR 121, 125, 129, 135 group)
 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) Construct Air Carrier (FAR 135) 	OFAR 91 OFAR 129 OFAR OFAR 103 OFAR 133 OFAR OFAR 121 OFAR 135 OFAR OFAR 125 OFAR 137 OFAR OFAR 91 Special Flight O Non-US, Commercial O Non-US, Non-commercial	431 C 435 437 C) Scheduled or Co Non-Scheduled Passenger Cargo Mail Contract C	or Air Taxi O International
On-Demand Air Taxi (FAR 135) Commercial Air Tour (FAR 136)	O Non-OS, Non-commerciar	Pu	rpose of Fligh	t for FAR 91, 103, 133, 137
Agricultural Aircraft (FAR 137) Pilot School (FAR 141)	OPublic Aircraft (Select one) O Armed Forces		elect one)	
Certificate of Authorization or Waiver (COA)			Aerial Applicat Aerial Observat	
Commercial Space Transportation Experimental Permit	O State	Ō	Air Drop	OGlider Tow
Commercial Space Transportation License	O Local		Air Race/Show Banner Tow	OInstructional OOther Work Use
□ Other Operator of Large Aircraft	OUnknown	l č	Business	O Personal
			Executive/Corp External Load	orate OPositioning OSkydiving
Revenue Sightseeing Flight Air Medical Flight				Onlyan mb
	e e		Ferry	
O Yes O No	O Yes O No		J Ferry	
	O Yes O No			departure, or within 3 miles of an airport)
	O Yes O No if accident/incident occurred on ap	proach, la	anding, takeoff,	departure, or within 3 miles of an airport)
AIRPORT INFORMATION (Fill in	O Yes O No if accident/incident occurred on ap	proach, la Distand	anding, takeoff, ice From Airpo	rt Center: <u>1.2 NM (1.38 SM)</u> sm
AIRPORT INFORMATION (Fill in Airport Name: <u>Columbia Metropolitan</u>	O Yes O No If accident/incident occurred on ap Airport	proach, la Distand Directi	anding, takeoff, ice From Airpo ion From Airp	
AIRPORT INFORMATION (Fill in Airport Name: <u>Columbia Metropolitan</u> Airport Identifier: <u>CAE / KCAE</u> Proximity to Airport: Off Airport/Airstr	O Yes O No If accident/incident occurred on ap Airport	proach, la Distand Directi Airpor	anding, takeoff, ice From Airpo ion From Airp rt Elevation:	West degrees true 236' MSL ft. msl
AIRPORT INFORMATION (Fill in Airport Name: <u>Columbia Metropolitan</u> Airport Identifier: <u>CAE / KCAE</u> Proximity to Airport: Off Airport/Airstr Runway Information	O Yes O No If accident/incident occurred on ap Airport p O On Airport/Airstrip ON/A	proach, la Distand Directi Airpor	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm
AIRPORT INFORMATION (Fill in Airport Name: <u>Columbia Metropolitan</u> Airport Identifier: <u>CAE / KCAE</u> Proximity to Airport: Off Airport/Airstr Runway Information Runway ID:(L/R/C) Length:	O Yes O No if accident/Incident occurred on ap Airport p O On Airport/Airstrip O N/Aft Width:ft	Distand Distand Directi Airpor Conditio Dry Holes	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway, s	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that I) Asphalt Grass/Turf	O Yes O No if accident/Incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water	proach, la Distand Directi Airpor Conditie ☑ Dry	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway s covered gh	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Dry Water-Glassy Snow-Wet
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that I Asphalt Grass/Turf Oracle Gravel	O Yes O No if accident/Incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood	Distance Distance Directi Airpor Conditie Dry Holess Dice Ce Rougg	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway s covered gh per Deposits	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Dry Water-Glassy Snow-Wet Soft
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that I) Asphalt Grass/Turf	O Yes O No if accident/incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood	Distance Distance Directi Airpor Conditie Dry Holess Dice Ce Rougg	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway s covered gh per Deposits	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Dry Water-Glassy Snow-Wet
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that I Asphalt Grass/Turf Oracle Gravel	O Yes O No if accident/incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood v □ Unknown	Distance Distance Directi Airpor Conditie Dry Holess I Ice Ce Rougg	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway s covered gh per Deposits	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Dry Water-Glassy Snow-Wet Soft
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that ID) Asphalt Grass/Turf Orrete Gravel Dirt Ice	O Yes O No if accident/incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood v □ Unknown) OOn Instrument Ap	proach, la Distand Directi Airpor Conditi Dry Holes Ice Cd Roug Rubb Slush-	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway s covered gh per Deposits	ort Center: 1.2 NM (1.38 SM) sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Dry Water-Glassy Snow-Wet Soft
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstr Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that ID) Asphalt Grass/Turf Dirt Ice Dirt Ice OTaxi OVFR Departure OTaxi OVFR Departure OTaxi OIFR Departure Proc OInitial Climb OIFR Departure Proc	O Yes O No if accident/incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood v □ Unknown) OOn Instrument Ap	proach, la Distand Directi Airpor Conditi Dry Holes Ice Cd Roug Rubb Slush-	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway, s covered gh covered gh covered covered covered gh covered covered gh covered covered covered gh covered	ort Center: 1.2 NM (1.38 SM)_sm ort: West
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AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstri Runway Information Runway Information Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that defined) Asphalt Grass/Turf Dirt Ice Dirt Ice OTaxi OVFR Departure OTakeoff OIFR Departure Proc OInitial Climb IfR Approach (Check all that apply) None ADF/NDB PAR SDF Sidestep	O Yes O No if accident/Incident occurred on ap Airport p OOn Airport/Airstrip p OOn Airport/Airstrip opply) adam □ Water I/Wood □ Unknown) OOn Instrument Ap OLanding □ Unknown) □ Unknown) □ OOn Instrument Ap □ MLS □ Practice □ LDA □ GPS	proach, la Distand Directi Airpor Conditie Dry Holes Ice Ce Roug Slush- proach	anding, takeoff, ice From Airpo ion From Airp rt Elevation: ion of Runway, s covered covere	ort Center: 1.2 NM (1.38 SM)_sm ort: West degrees true 236' MSL ft. msl /Landing Surface (Check all that apply) Snow-Compacted Water-Calm Snow-Crusted Water-Choppy Snow-Pry Water-Glassy Snow-Wet Wet Soft Unknown OLow Approach Go Around OAborted Landing (after touchdown) OUnknown *k all that apply) Stop and Go
AIRPORT INFORMATION (Fill in Airport Name: Columbia Metropolitan Airport Identifier: CAE / KCAE Proximity to Airport: O Off Airport/Airstri Runway Information Runway ID: Runway ID: (L/R/C) Length: Runway/Landing Surface (Check all that that	O Yes O No If accident/Incident occurred on ap Airport p O On Airport/Airstrip ON/A ft Width:ft apply) adam □ Water I/Wood v □ Unknown) COOn Instrument Ap OLanding DMLS □Practice	proach, la Distand Directi Airpor Conditie Dry Holes Lee Cc Rougg Rubbe Slush- proach VFR Ag None Traffie Straig Ualley Go Ar	anding, takeoff, ice From Airpo ion From Airpo rt Elevation: ion of Runway, s covered ber Deposits covered covered ber Deposits Covered covered covered ber Deposits covered covered per Deposits covered _	ort Center: 1.2 NM (1.38 SM)_sm ort: West
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"FLIGHT CREWME	MBER 1" INFO	RMATIO	N								
"Flight Crewmember 1" R				ident				_			
● Pilot O Co-Pilot		O Flight In:		Check P	liot	O Fligh	t Engineer	O Other I	Flight Crew		
"Flight Crewmember 1" w	vas pilot flying 🛛	Yes 🗖 No	D								
"Flight Crewmember 1" I	dentification										
First Name: Robert				<u> </u>	Cit	ty of Re	sidence:	Columbia			
Middle Initial: <u>R</u>					Sta	ate: <u>S</u>	SC		ZIP: <u>2922</u>	23	
Last Name: Russell, Jr.					Co	untry:	United S	States			
	of Accident/Incident:	85	Date of B	sirth:				m/dd/yyyy			
			rtificate Num								
Degree of Injury	Seat Occupied				Resti	raint Ty	pe			Inflatable F	Restraints
O None O Fatal		• Front	O Unknow	vn		-	-	Used			
O Minor O Unknown		O Rear	_		Available O None		5	ONone		✓ Not Ins	
O Serious		O Single				O Lap of		OLap onl	y	□ Installe □ Not De	
Pilot Certificate(s) (Check						O 3-poir ⊙ 4-poir		O 3-point ⊙ 4-point		Deploy	ed
 □ None □ Fligh □ Private □ Recrete 		mmercial line Transpo	ort 🛛 Foreig	-		O 5-poir		O 5-point		Unknov	vn
Student Sport		ght Engineer				O Unkno	own	OUnknow	vn		
P i i i l O m d'an	M. P. I.C. de . 4				Mad		4: Conto V	1:1:4.		Date of Las	t Medical
Principal Occupation	Medical Certificate						tificate Va nitations/wai		nknown	Date of Las	, meurear
O Pilot O Other	•	lass 3 river's Licer	nse (Sport Pilot	only)			tions/waiver		/A		
O Unknown	• •	nknown	O Special Issuance						mm/dd/yy	<i>vyy</i>	
Medical Certificate Limita	ations										
Medical Certificate Specia	al Issuance						An Arit 10, 10, 10, 10, 10, 10, 10, 10, 10, 10,				
Date of Last Flight Review	v	Flight	Review Aire	craft						(
or Equivalent, Including FAR 121/135 Checks:		Make:	Make:								
	mm/dd/yyyy	— Model:									
Airplane Rating(s)	Other Aircraft F	Rating(s)	Instrum	ent Rat	ating(s) Instructor Rating(s)						
(Check all that apply)	(Check all that appl	ly)	(Check al	l that app	ply)	1	(Check all	that apply)			
☐ None ☑ Single-Engine Land	☑ None ☑ Airship		□ None				✓ None				1
☐ Single-Engine Sea	Balloon		Airpla			1	Airplan Airplan	e Single-Eng e Multi-Engi	ne L	Instrument Helicopter	Helicopter
Multiengine Land	Glider		D Power				Gyropia			Glider	
Multiengine Sea	Gyroplane Gyropter						Powere	d Lift		Sport	
	Powered Lift										
Type Ratings							Student H	Indorsemen	ts (Include	dates)	
	······································	·····									
Flight Time (Enter appropria	ate All T	his Make	Airplane Single	Airpl	ane		Inst	rument			Lighter
number of hours in each box)	Aircraft &	& Model	Engine	Multier	ngine	Night	Actual	Simulated	Rotorcraft	Glider	Than Air
Total Time											
Pilot in Command (PIC)											
Time as Instructor		Sector States and Pla							and and the second of		No. Construction
This Make/Model											
Last 90 Days											
Last 30 Days Last 24 Hours											
Last 24 Hours								2 2			

"FLIGHT CREWMEMBER 2" INFORMATION											
"Flight Crewmember 2" Res OPilot OCo-Pilot	ponsibilities at t O Student Pilot	he Time of OFlight I		c ident OCheck Pi	ilot	O Flig	ht Engineer	O Other I	light Crew		
"Flight Crewmember 2" was	pilot flying	Yes 🗆	No				a dana a dana a				
"Flight Crewmember 2" Ide	ntification										
First Name: <u>- N/A -</u>					City	of Re	sidence:				
Middle Initial:											
								/ 1 1/			
Age at time of A	.ccident/Incident						<i>m</i> r	n/dd/yyyy			
Degree of Injury	Seat Occupie		ertificate Num	ber:	Restra	int T				Inflatable F	loctuainto
O None O Fatal	OLeft	OFront	OUnknow	wn						innatable r	CSU AIIIIS
O Minor O Unknown	Minor O Unknown O Right O Rear Available					Used O None		□Not Ins	talled		
O Serious	OCenter	OSingle			č	Lap o	only	O Lap only	y	Installe	ł
Pilot Certificate(s) (Check all			_) 3-poi		O 3-point O 4-point		□ Not Dep □ Deploy	
□ None □ Flight Ir □ Private □ Recreati		ommercial irline Transp	US M ort D Foreig		y O 4-point O 5-point			O 5-point		Unknov	
Student Sport		light Enginee		,11	C) Unkr	nown	O Unknov	/n		
		-			N/ ··			1:		Date of Las	t Medical
	ledical Certifica						rtificate Va	-		Date of Las	a wieuicai
•		Class 3 Driver's Lice	ense (Sport Pilot	t only)	•		mitations/wai ations/waiver	-	nknown /A		
		Unknown	× 1	57	Ō Spee					mm/dd/yy	<i>уу</i>
Medical Certificate Limitation	ons						Photo field				
							and a resource of the second				
Madical Cartificate Special I							Maria Anales Maria - 1				
Medical Certificate Special I	ssuance										
Data of Last Elight Deview		1 534 1									
Date of Last Flight Review or Equivalent, Including		_	t Review Airc								
FAR 121/135 Checks:		Make:		-							
	mm/dd/yyyy	Model	l:								
Airplane Rating(s)	Other Aircraft		Instrum		ating(s) Instructor Rating(s)						
(Check all that apply) \square None	(Check all that ap	ply)	(Check al.	l that app	ly)			that apply)			
☐ None ☐ Single-Engine Land	 None Airship 		□ None □ Airpla	ne			□ None	Single-Engin		Instrument A Instrument H	
□ Single-Engine Sea	Balloon						Airplane	Multi-Engine		Helicopter	encopter
 Multiengine Land Multiengine Sea 	☐ Glider ☐ Gyroplane		D Power	ed Lift			Gyropla			Glider	
	Helicopter						D Powered	Lift	Ц	Sport	
	Powered Lift										
Type Ratings							Student E	ndorsement	s (Include d	lates)	
							rai - Handricka (A				
							no atau Assis				
Flight Time (Enter appropriate			Airplane				Inst	rument	-	1	
number of hours in each box)	All Aircraft	This Make & Model	Single Engine	Airpla Multien		Night	Actual	Simulated	Rotorcraft	Glider	Lighter Than Air
Total Time			a		- -	81					
Pilot in Command (PIC)							a cumunda a				
Time as Instructor							1				
This Make/Model											
Last 90 Days											
Last 30 Days							A BALLER AND A				
Last 24 Hours							and a second second				
				6							

ADDITIONAL FLIC	GHI CREWME	<u>MBERS (</u>	Exclusiv	<u>e of cabin cr</u>	ew. complete	e the followin	g information)		-	
Crew Name and Add	ress						Seat Occupie	ed	Injury	
First Name:							O Left	O Front O Rear	O None O Minor	
Middle Initial:		State	.e:	·	ZIP:		O Center O Right	O Rear O Single	O Minor O Serious	
Last Name:		Cou	intry:			_		OUnknown	O Fatal O Unknown	
Pilot Certificate(s) (C	Check all that apply)						Restraint Ty		Inflatable	
□ None	Flight Instructor	r 🗖 Cor	mmercial		Military		Available O None	Used O None	Restraints	
Private	Recreational	🗖 Airl	line Trans		reign		O Lap Only	O Lap Only	☐ Not Installed ☐ Installed	
□ Student	□ Sport	Li Fiig	ght Engine	er			O 3-point O 4-point	O 3-point O 4-point	Not Deployed	
Type Rating/Endorse	ement for		Total F	light Time a	t the Time		O 5-point	O 5-point	Deployed Unknown	
Accident/Incident Aircraft? Yes No of this Accident/Incident					ident:	hrs	OUnknown	O Unknown		
Crew Name and Add	iress						Seat Occupi	Injury		
First Name:		City	of Reside	ence:			OLeft	OFront	O None	
Middle Initial:					ZIP:		OCenter ORight	O Rear O Single	O Minor O Serious	
	Last Name: Country:							OUnknown	O Fatal O Unknown	
Pilot Certificate(s) (Check all that apply)							Restraint Ty	- 1	Inflatable	
□ None	□ None □ Flight Instructor □ Commercial □ US Military						Available O None	Used O None	Restraints	
Private	Recreational	Airl	line Trans		reign		O Lap Only	O Lap Only	□ Not Installed	
Student	□ Sport	L Flig	ght Engine	er	,		O ³ -point	O 3-point O 4-point	☐ Installed ☐ Not Deployed	
Type Rating/Endorse Accident/Incident Air				light Time a Accident/Inc		hrs	O 4-point O 5-point O Unknown	 Deployed Unknown 		
Accident/Incident Aircraft? Yes No of this Accident/Incident: hrs O Unknown O Unknown PASSENGER(S) / OTHER PERSONNEL (Include cabin crew; continue on separate sheet if necessary)										
raddenger(3)/	UTHER PERS	ONNEL (Include o				t if necessary)			
	UTHER PERS	ONNEL (Include (cabin crew; c	ontinue on s	eparate shee	And a local	Inflatable		
Name and Address	UTHER PERS	ONNEL ((Include (eparate shee Restraint T	уре	Inflatable Restraints	Age	
				cabin crew; c Scat	ontinue on s Injury	eparate shee Restraint T Available	ype Used	Restraints		
Name and Address	City :			cabin crew; c	ontinue on s	Restraint T Available ONone OLap Only	ype Used O None O Lap Only	Restraints	Under 5 years	
Name and Address	City : State:	ZIP:		Seat OLeft OCenter ORight	ONone OMinor OSerious	eparate shee Restraint T Available O None O Lap Only O 3-point	Ype Used O None O Lap Only O 3-point	Restraints	Under 5 years	
Name and Address First Name: Middle Initial:	City : State:	ZIP:		Seat	ONONE OMinor	eparate shee Restraint T Available O None O Lap Only O 3-point O 4-point	Ype Used O None O Lap Only O 3-point O 4-point O 5-point	Restraints	Under 5 years	
Name and Address First Name: Middle Initial: Last Name:	City : State: Country:	_ ZIP:		Scat OLeft OCenter ORight OUnknown Row:	ONone ONone OMinor OSerious OFatal OUnknown	eparate shee Restraint T Available ONone OLap Only O3-point O4-point O5-point OUnknown Available	ype Used O None O Lap Only O 3-point O 4-point O Unknown Used	Restraints Not Installed Installed Not Deployed Deployed	☐ Under 5 years If Under 5, O Child Restraint O Lap-Held O Unknown	
Name and Address First Name: Middle Initial: Last Name: OCrew	City : State: Country: OPassenger City :	ZIP: O Ot	ther	Seat Seat OLeft OCenter ORight OUnknown	ONone OMinor OSerious OFatal	eparate shee Restraint T Available ONone OLap Only O3-point O4-point O5-point OUnknown Available ONone OLap Only	Ype Used O None O Lap Only O 3-point O 4-point O 4-point O Unknown Used O None O Lap Only	Restraints Not Installed Installed Not Deployed Unknown Not Installed	☐ Under 5 years <i>If Under 5,</i> O Child Restraint O Lap-Held	
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Name and Address First Name: Middle Initial: Last Name: OCrew First Name: Middle Initial:	City : State: Country: OPassenger City : State:	ZIP: O Ot ZIP:	ther	Seat OLeft OCenter ORight OUnknown Row: OLeft OLeft OLeft OLeft OCenter	ONone OMinor OSerious OFatal OUnknown	eparate shee Restraint T Available ONone OLap Only O3-point O4-point O5-point OUnknown Available ONone OLap Only	Ype Used O None O Lap Only O 3-point O 4-point O 4-point O Unknown Used O None O Lap Only	Restraints Not Installed Installed Not Deployed Deployed Unknown	☐ Under 5 years If Under 5, O Child Restraint O Lap-Held O Unknown ☐ Under 5 years If Under 5, O Child Restraint O Lap-Held	
Name and Address First Name: Middle Initial: Last Name: OCrew First Name: Middle Initial: Last Name: OCrew	City : State: OPassenger City : State: Country: OPassenger	ZIP: O Ot	ther	abin crew; c Scat OLeft OCenter ORight OUnknown Row: OLeft OCenter ORight OLeft OCenter ORight OLeft OCenter ORight OUnknown Row:	ONONE ONONE OMinor OSerious OFatal OUnknown ONone OMinor OSerious OFatal	eparate sheet Restraint T Available ONone OLap Only O3-point O4-point O5-point OUnknown Available ONone OLap Only O3-point OVerallable ONone OLap Only O3-point O4-point O5-point O4-point O5-point OUnknown Available	ype Used O None O Lap Only O 3-point O 4-point O Unknown Used O None O Lap Only O 3-point O 4-point O 5-point O 4-point O 5-point O Unknown Used	Restraints Not Installed Installed Deployed Unknown Not Installed Installed Dinstalled Deployed Unknown	☐ Under 5 years If Under 5, O Child Restraint O Lap-Held O Unknown ☐ Under 5 years If Under 5, O Child Restraint	
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Name and Address First Name: Middle Initial: Last Name: OCrew First Name: Middle Initial: Last Name: OCrew First Name: OCrew	City : State: Country: OPassenger City : State: OPassenger City : OPassenger	ZIP: O Ot ZIP: O Ot ZIP: O Ot	ther ther ther	Seat OLeft OCenter ORight OUnknown Row: OLeft OLeft OLeft OLeft OLeft OLeft	Ontinue on s Injury ONone OMinor OSerious OFatal OUnknown OSerious OFatal OUnknown OSerious OFatal OUnknown OSerious OFatal OUnknown ONone OMinor OSerious OFatal OUnknown ONone OMinor OSerious OFatal OUnknown	eparate shee Restraint T Available ONone OLap Only O3-point O4-point O4-point OUnknown Available ONone OLap Only O3-point O4-point O4-point O5-point OUnknown Available ONone OLap Only O3-point O4-point O5-point OUnknown Available ONone OLap Only O3-point O4-point O4-point O5-point OUnknown Available ONone OLap Only O1-point O1-p	Yype Used None O Lap Only O 3-point O 4-point O Unknown Used O None O Lap Only O 3-point O 4-point O 4-point O 5-point O Unknown Used O None O Lap Only O 3-point O 4-point O 5-point O Unknown Used O None O Lap Only O 3-point O 4-point O	Restraints Not Installed Not Deployed Deployed Not Installed Installed Not Deployed Unknown Not Installed Not Deployed Unknown Not Installed Not Deployed Not Deployed Not Deployed Not Not Installed Not Deployed Not Installed Not Deployed Not Installed Not Deployed Not Installed	□ Under 5 years If Under 5, ○ Child Restraint ○ Lap-Held ○ Unknown □ Under 5 years If Under 5, ○ Child Restraint ○ Lap-Held ○ Unknown □ Under 5 years If Under 5, ○ Child Restraint ○ Lap-Held ○ Unknown □ Lap-Held ○ Unknown □ Lap-Held ○ Unknown	

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FLIGHT ITINERARY	INFORMATIO	N							
Last Departure Point	Tin	e of Departure	Destinatio	n			Type Fligh	t Plan I	
Airport ID: CAE	Tim	e: 09:14 AM	Airport ID:				O None	VED	O VFR/IFR
City: West Columbia		00.14740	City:	Asheville			O Company O Military		O IFR O Unknown
State: SC	Time	e Zone: EDT	State:	NC			• VFR		-
Country: United States			Country: U	Inited States			Activated?	OYes	ONo OUnknown
Type of ATC Clearance/Se	rvice (Check all that	apply)							
VFR C	Special VFR	□ VĒ	ecial IFR FR On Top		□ VFR Flig □ Traffic A			Crui	se nown / NA
Airspace where the accider					_			Altitu	de of In-Flight
	Class G Demo Area		litary Operations	· /	□ Special □ Air Traffi	ic Contr	ol Area	Occu	rrence:
	Warning Area	Jet	Training Area	ica			of Alea		ft msl
	Prohibited Area								
	Restricted Area					The second second		1000 AC 1000	and the second
WEATHER INFORM Source of Pilot Weather In		EACCIDEN	I/INCIDEN	Veather Obs	amustion F	acility		1. S. S.	Signation and the second
(Check all that apply)	Jornation					-			
National Weather Service	Con	npany		Facility ID:					
☐ Flight Service Station ☐ TV/Radio	🗖 Mili	~		Observation Ti					
Automated Report	☐ Inte ☐ Non			Time Zone:					
Commercial Weather Service	e (DUATS) Unk			Distance from A	1				
On-Board Weather				Direction from	Accident Site	e:		degrees	s true
Basic Conditions		Light Condit		• - ·		.			
OVMC OIMC		ODawn ODay	ODusk ONight	ODark OBrigh	Night nt Night	OUnk	cnown		
OUnknown		Obuy	ONgit	Obligi	n rugin				
Sky/Lowest Cloud Condition	0 n	Ceiling			Tempera	ature:		(C) or	(F)
	O Thin Broken	O None (Clear) 0	Obscured	_			_	
	O Thin Overcast O Unknown	O Broken	-	Indefinite	Dew Poi	nt:	(C) or	(F)
O Scattered	Unknown	O Overcast O Unknown			Altimeter Setting: in. Hg				
Lowest Cloud Condition H	leight	Ceiling Height					or	ME	3
	ft agl			ft agl	a demo alever, a				
Wind Direction	Wind Speed		Wind Gusts		Visibilit				
□ Variable			□ Not Gustin		V ISIDIII	•			
	Light and Varia	able		g	the second second				
-or-	-or-		-or-			RVV:		miles	
Direction:degrees true			Speed:	kts	Density A	Altitud	e:		_ft
Intensity of Precipitation	••				Restrictio	on to V	visibility (Cl	neck all t	hat apply)
O Light O Moderate	None	Drizzle	G Freezing	g Rain	□ None				
OHeavy	□ Rain □ Snow	Ice Pellets Snow Pellet	Snow Sł s Ice Pelle		Blow Blow			round Fo	og
ON/A	🗖 Hail	Snow Grain	s 🗖 Freezing		Blow	ing Sno	w 🗖 Ic	e Fog	
OUnknown	□ Rain Showers	Ice Crystals			□ Blow □ Dust	ing Spra		noke	
Icing Forecast		Icing Actual			Turbulen			nknown	
Amount Type		Amount	Туре				that apply)	Sev	verity
 None N/A Trace Rime 		O None O Trace	O N/A		□None				Light
O Light O Clear		O Light	O Rime O Clear		□Clear □Terrai		ed		Moderate Severe
O Moderate O Mixed		O Moderate	O Mixed	l			urbulence		Extreme
O Severe O Unknow O Unknown	vn	O Severe O Unknown	O Unkno	own					
	IDMPT OVER								
NOTAMs (D and FDC), A	AIRIVIE IS, SIGN	LE IS, PIREPS	s in effect at t	he time of the	e accident	/incide	ent:		
			8						

DAMAGE	TO AIRCRAFT A	ND OTHER PR	OPERTY		dat de la companya d						
Aircraft Dam		Aircraft Fire		Aircraft Explosion	O D d d d d d d d d d d						
O None O Minor	 Substantial Destroyed 	 None In-Flight 	O Both Ground and In-Flight O Fire at Unknown Time	 None In-Flight 	O Both Ground and In-Flight O Explosion at Unknown Time						
O Minor	O Unknown	O In-Fright O On-Ground	O Unknown	O On-Ground	O Unknown						
Description		•	nan 100 dat man output	1							
Description	of Damage to Aircraft	and Other Property	(Use additional sheet if necessary)								
NARRATIV	E HISTORY OF FL	GHT (Please type o	r print in ink	terre and the set of the set of the	In the second						
	NARRATIVE HISTORY OF FLIGHT (Please type or print in ink) Describe what occurred in chronological order, including circumstances leading to and nature of accident/incident. Describe terrain and include										
wreckage dis	stribution sketch if perti-	ent. Attach extra shee	ets if needed. State departure time an	d and location, service	s obtained, and intended						
destination. I	Provide as much detail a	s possible.									
				n de venero en							
				2 W -							
				Ver valente (-) ette							
				Long Monte Mag							

RECOMMENDATION (How o		ccident/incident ha	ve been prev	ented?)					
Operator/Owner Safety Recommer	ndation								
						The contract of the second			
						and a second			
						the second second second			
1 N									
						New York Street			
						an La Lundo Subando			
						and the second			
MECHANICAL MALFUN	CTION/E		re snace is no	eded con	tinue on senar	ate sheet)	harden og handerede	see (or , doord)	ar an the second second second
Was there Mechanical Malfunct							Tot	al Time	/Cycles
(If yes, list the name of the part, manuf			scribe the failu	·e.)			On	Part	
									Hours
									Cycles
							Tin	1e Since	This Part
						and in free statements			Overhauled
									Hours
FUEL & SERVICES INFO	DRMATIC	N			CONTRACTOR STREET	Harrison (C.C. Strands et al.	94) - S. (1946) - 2634 (19		agent in the most start agent
Fuel on Board at Last Takeoff		Fuel Type			_				
(Convert from pounds, as necessary)		O 80/87 O 100 Low Lead	O 115/145 O Jet A		O Jet B O JP8	O Other, spec	ify		
	Gallons	O 100/130	O Jet A-1		O Automotive	1			
Other Services, if Any, Prior to I	Departure					The second se			
EVACUATION OF AIRCR	RAFT					1			
Was an emergency evacuation of	f the aircra	ft performed?	□ Yes	🗖 No		And a second secon			
Method of Exit – Describe how the	ne occupant	s exited and how m	any occupants	evacuated	each location				
OTHER AIRCRAFT – CO						ion for other a		- ·	
		rer:				-	Damage 1		r Aircraft
							□ Substar		□ None
Registered Owner of Other Airc					Other Aircraft				
Name:	······································			Name:		nt months a			
City:ZIP:ZIP:				State:		ZIP:			
Country:				Country:					

ADDITIONAL INFORMATIO	ON (Please type or print in ink)							
Use this space if additional space	is needed for any answers.							
Deeped Operator) fueling record	in the weeks prior to the 05/23/2015 acci ds. Based on those records, spanning 03 pre-flight prep for corresponding flights fro	/U9/2015 Infoudh 05/23/20	JID, IL CALL DE SUIT					
Monday 03/09/15 66 Gals Jet A Including PR	IST							
Tuesday 03/17/15 55 Gals Jet A Including PR	IST							
Tuesday 03/24/15 53 Gals Jet A Including PR	IST							
Thursday 04/02/15 39 Gals Jet A Including PR	IST							
Monday 04/27/15 93 Gals Jet A Including PR	IST							
Friday 05/01/15 59 Gals Jet A Including PR	IST							
Saturday 05/25/15 CAE>AV 40 Gals Jet A Including PF	IST							
Landmark Aviation, the Field above period, implying that al	Base Operator at Asheville Airport (AVL) fuelings occurred at CAE.	confirmed that no refuleing	gs occurred at AV	L for N42BR during the				
No other originations/destinat	ons than CAE/AVL were discovered for N	142BR during this period.						
Eagle Aviation (CAE):								
Landmark Aviation (AVL):								
		TE AND ACCURATE TO	THE BEST OF N	IY KNOWLEDGE				
	Pilot/Operator: <u>Robert R. Russell, Jr.</u>							
<u>07/02/2015</u> <u>mm/dd/yyyy</u> or								
If a Person Other than Pilot/O	perator is Filing Report							
Name: Robert R. Russel			Son of Robert R	. Russell, Jr. (pilot)				
or Check here to electronically sign this document								
	FOR NTSB			Data Danant Dassing J				
NTSB Accident/Incident No. ERA15FA221	Reviewed by NTSB Regional Office Ashburn, VA	Name of Investigator Monville		Date Report Received 7/2/2015				