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

This form to be used for reporting civil and public aircraft accidents and incidents

BASI	NECEMA	TION	Г		1-2-55			eghagita saa					ret solkä et et	
BASIC INFORMATION Accident/Incident Location							Accident/Incident Date/Time							
Nearest City/Place: Carson City State: NV						1V								
ZIP: 89706 Country: US							Dat		9/11/ 1/dd/yy		Lo	ocal lime: _	1210PM	
Latitude: N39d 11.5' Longitude: W119d 45.96'											Ti	me Zone: _	Pacific	
			egrees:minutes:sec				Co	llision wi	th Ot	her Air	craft. () Midair	On-groun	d None
								maion wi	th Ot	MUI FIN	Ciait. (Oon-groun	d Grone
AIRCRAFT INFORMATION									4144444	Art - articles				
Registration Number: N289MM							☐ IFR-Equipped and Certified							
Manufacturer: Ronald G Maier							☐ Commercial Space Flight ☐ Unmanned Aircraft							
Model:	Vans RV 8						Maximum Gross Weight: 1800 lbs							
Serial N	lumber: 8193	4								-		dent: 164		lbs
Year of	Manufacture:	2006											ew Seats: 1	_
Amateu	ır-Built: O Yes	If Yes:	Kit/Plans Mal	e: Vans R	RV 8			bin Crew S					Seats: 1	
	ONo		Original Design		ımber of	_								
Catego	ry of Aircraft	Type of A	irworthiness Ce	rtificate		Landing Ge	ar				Engin	e Type (Se	lect one)	
AirplaBallo		(Check all the Standard			}	(Check all tha	hat apply)			• Reciprocating OLiquid R				
	on Dirigible	☐ Norma	l 🗖 Restric	eted		☐Tricycle	Retractable		rhaal	O Turbo Shaft O Turbo Prop OHybrid				
O Glide		☐ Aeroba ☐ Balloo							_		OTurbo Jet ONone			
O Gyroplane ☐ Balloon ☐ Provis OHelicopter ☐ Commuter ☐ Specia			al Flight				∃High ∃Skid		kid OTurbo Fan OUnknown OElectric		iown			
O Powe		☐ Transp☐ Utility				□Float □Hull	□Ski							
				mental Light-Sport						Fuel System Type (Reciprocating) OCarburetor Fuel-Injecte		_		
OUnkn	own			or Waiver (COA)		_	unch/Recovery System		Ocare	ouretor	• Fuel-	injected		
		None		Jnknown	l	□ None	-т		Unk			I.m.		
			Engine		Manuf	acturer's	ļ	Date of Mfg.		ted Pow Horse	er power or	Total Time	Inspection	Since: Overhaul
Engine	Engine Manufa	cturer	Model/Series			Number	\dashv	mm/dd/yyy	-	lbs of	Thrust	(hours)	(hours)	(hours)
Eng. 1 Eng. 2	Titan		IO-361 A4M		106007		+	0 <u>6/26/200</u> 6/26/3		80		1141.8	34	1141.8
Eng. 3							\dashv	Ψ/4.4/ -	~~~					
Eng. 4														
Last In	spection Type			Propeller 1				. Diant		Prop	eller 2	•	Fixed Pitch	Diant.
О 100-Н	our O Cont	inuous Airwo		OControlls OGround			Ilable Pitch I Adjustable O Controllable Pitch O Ground Adjustable							
O AAIP O Annu		ditional Inspec	etion	Manufacturer: Sensenich			Manufacturer:							
			040	Model: unknown			Model:							
Date L	ast Inspection:	06/12/2 mm/dd/yy		ELT Installed: •Yes •No					Additional Equipment (Check all that apply)					
Airfran	ne Total Time:	1108.5	hrs	If Yes:					☐ ADS-B☐ Airframe Parachute					
	rs measured at (S	_ ′		ELT Manufacturer: Ameri-King Model or Part No.: A-450 AFAT				Angle of Attack Indicator						
TSO No.: OC91					(SO No.: OC91 (121.5 MHz) OC91a (121.5 MHz)			viHz)	Autopilot Data Recorder					
_					OC126 (406 MHz)			ŀ	☐ Electronic Flight Bag or Handheld Device					
[9] (onditional / Amateur-built only)				Was ELT still mounted in aircraft? OYes ONo Was ELT still connected to antenna? OYes ONo				☐ Electronic Multifunction Display ☐ Electronic Primary Flight Display						
	facturer's Inspect		(A A ID)			nected to anter ? O Yes O		e Ores C	INO	☑ Handheld GPS				
_	nuous Airworthin	-	(AAIF)	If activa	ated:		☐ Heads Up Display ☐ Onboard Weather							
	, specify:					ocating Aircra	ft:	OYes O	No	No Satellite Tracking Device				
Descrip None	otion of Fire Ex	tinguishing	System	If not ac Indicate		☐ Impact Dar	man	e.	☐ Stall Warning System ☐ Video Recording Device					
O Spec						Fire Damas	ge				er, Specif			;
				☐ Battery Expired/Damaged ☐ Unknown										

"FLIGHT CREWMEMBER 1" INFORMATION										
"Flight Crewmember 1" Responsibilities at the Time of Accident/Incident Pilot O Co-Pilot O Student Pilot O Flight Instructor O Check Pilot O Flight Engineer O Other Flight Crew										
"Flight Crewmember 1" was pilot flying										
"Flight Crewmember 1" Iden	tification									· · · · · · · · · · · · · · · · · · ·
First Name: Ronald				(lity of Res	idence: W	/estbrook			
Middle Initial: G	Middle Life L. C									
Last Name Main										
Country. Go										
Age at time of A	ccident/Incide		_		1937		m/dd/yyyy			
			ertificate Num							
Degree of Injury	Seat Occup				traint Ty	pe		[]	Inflatable I	Restraints
O None O Fatal O Left O Front O Unknown O Serious O Center O Single					Available Used O None O None I Not Inst O Lap only O Lap only					
Pilot Certificate(s) (Check all t	hat apply)				O Lap on		OLap on	y	☐ Not De	
☐ None ☐ Flight Ins		Commercial	☐ US M	ilitary	O 4-point	i	O 4-point		Deploy	ed
☑ Private ☐ Recreation	nal 🔲	Airline Transp	ort 🔲 Foreig		O 5-point O Unkno	-		vn	Unknown	
☐ Student ☐ Sport	Ц	Flight Enginee	r		Onano	*****	0			
Principal Occupation M	edical Certific	cate		Med	dical Cert	ificate Va	lidity		Date of Las	t Medical
O Pilot	None (Class 3		Ov	Vithout lim	itations/wai	vers OU	nknown		
	Class 1	Driver's Lice	ense (Sport Pilot	only)		ions/waiver:	O N	/A	06/11/2018 mm/dd/yyyy	
_ · · · · · · · · · ·-		Unknown			pecial Issu	ance				· · · · · · · · · · · · · · · · · · ·
Medical Certificate Limitatio	иs									
Must Wear Corrective Lenses										
Medical Certificate Special Is	suance									
none										
Date of Last Flight Review		Fligh	t Review Airc							,
or Equivalent, Including				лад						
FAR 121/135 Checks:	7/26/2017	3	: Vans							
	mm/dd/yyyy		l: RV 8							
B	Other Aircra (Check all that a	0,,		ent Rating(s) I that apply))	(Check all	r Rating(s)			
None □ None	None	*PP'97	□ None	і інаі арріу)	☐ None ☐ Instrument Air					Airolane
_ • •	☐ Airship		☐ Airpla		[☐ Airplane Single-Engine ☐ Instrument Helicop			-	
l 🚍 Y	☐ Balloon ☐ Glider		☐ Helico		1		e Multi-Engi	_	Helicopter	
	Graci Gyroplane		LI FOWEI	ed Liit		☐ Gyropla ☐ Powere] Glider] Sport	
	Helicopter		l		1				-	
Type Ratings	☐ Powered Lif	ι				Student I	ndorsame	ats (Include	datas	
							indoi schici	its (manae)	autes)	
N/A					1	N/A				
Ļ										
Flight Time (Enter appropriate		TL:- NF-1-	Airplane	Airplane	1	Inst	rument			Lighter
number of hours in each box)	All Aircraft	This Make & Model	Single Engine	Airpiane Multiengine	Night	Actual	Simulated	Rotorcraft	Glider	Than Air
Total Time	3,800	1,142	3,800		ϵ					
Pilot in Command (PIC)	3,800	1,142	3,800		6					
Time as Instructor										
This Make/Model					6					
Last 90 Days	32	32	32							
Last 30 Days	12	12	12		<u> </u>	<u> </u>	ļ		ļ	
Last 24 Hours	7		7						<u> </u>	

		HDEILO I	PVOIDSIAG				g information)		
Crew Name and Add	ress						Seat Occupie	d	Injury
First Name: Middle Initial: Last Name:		Stat	e:	2	ZIP:		O Left O Center O Right	O Front O Rear O Single O Unknown	O None O Minor O Serious O Fatal O Unknown
Pilot Certificate(s) (C	□ US Military sport □ Foreign eer Flight Time at the Time Accident/Incident: hrs			Restraint Typ Available 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 5-point O Unknown	Inflatable Restraints Not Installed Installed Not Deployed Deployed Unknown			
Accident/Incident Ai	rcraft?	□ No	of this A	Accident/Inci	dent:	hrs	J 0 122111 0 1122		
Crew Name and Add	ress						Seat Occupie		Injury
Middle Initial: State:				ZIP:			OLeft OCenter ORight ORight OFront ORear OSingle OUnknown		O None O Minor O Serious O Fatal O Unknown
Pilot Certificate(s) ((☐ Flight Instructo ☐ Recreational ☐ Sport	☐ Air	mmercial line Transp ght Enginee	ort For			Restraint Typ Available O None O Lap Only O 3-point O 4-point	Used O None O Lap Only O 3-point O 4-point	Inflatable Restraints ☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed
Type Rating/Endors Accident/Incident Ai		□No		light Time at accident/Inci		hrs	O 5-point O Unknown	O 5-point O Unknown	☐ Unknown
PASSENGER(S)	OTHER PERS	ONNEL (Include o	abin orew; o	ontinue on se	eparate shee	t if necessary)		
Name and Address				Seat	Injury	Restraint T	уре	Inflatable Restraints	Age
First Name:	City :								
Last Name:				OLeft OCenter ORight OUnknown Row:	ONone OMinor OSerious OFatal OUnknown	Available ONone OLap Only O3-point O4-point O5-point OUnknown	Used O None O Lap Only O 3-point O 4-point O 5-point O Unknown	☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	
i .	OPassenger City: State:	OO	ther	OCenter ORight OUnknown	OMinor OSerious OFatal	ONone OLap Only O3-point O4-point O5-point	O None O Lap Only O 3-point O 4-point O 5-point	☐ Installed ☐ Not Deployed ☐ Deployed	If Under 5, O Child Restraint O Lap-Held O Unknown Under 5 years If Under 5, O Child Restraint O Lap-Held
Crew First Name: Middle Initial: Last Name:	Country: Country: City : State: Country: OPassenger City : State:	ZIP:	ther	OCenter ORight OUnknown Row: OLeft OCenter ORight OUnknown	O Minor O Serious O Fatal O Unknown O None O Minor O Serious O Fatal	ONone OLap Only O3-point O4-point O5-point OUnknown Available ONone OLap Only O3-point O4-point O5-point	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 5-point O Unknown Used O None O Lap Only O 3-point O 4-point O 5-point O 1-point	Installed Not Deployed Deployed Unknown Not Installed Installed Not Deployed Deployed	If Under 5, O Child Restraint O Lap-Held O Unknown Under 5 years If Under 5, O Child Restraint O Lap-Held O Unknown

DAMACE			SPERTY					
DAMAGE Aircraft Dam	TO AIRGRAFT AI	Aircraft Fire	VEENT)	Aircraft Explosion				
O None O Minor	O Substantial O Destroyed O Unknown	None In-Flight On-Ground	O Both Ground and In-Flight O Fire at Unknown Time O Unknown	None In-Flight On-Ground	O Both Ground and In-Flight O Explosion at Unknown Time O Unknown			
Description o	f Damage to Aircraft a	nd Other Property	Use additional sheet if necessary)		W-1			
section dama Fuselage dar other skin wri places forwar position. The mount and fir	Left wing bent upward at root, left flap and aileron heavily damaged. Wing skin wrinkled and bent especially near center section. Center section damaged and deformed and left landing gear strut pushed upward into foot well area in cockpit. Landing gear tower damaged. Fuselage damaged especially lower left side near wing attach point. Left wheel pant heavily damaged. Left gear strut broken. Numerous other skin wrinkles and structure damage. From the front seat forward the fuselage is bent left and up. The cockpit floor is bent in several places forward of the center section. The cockpit fuel lines and fuel selector damaged and displaced. The windshield is pushed up out of position. The composite canopy to windshield seal fairing cracked. The propeller bent at tips and engine suffered prop strike. Engine mount and firewall both damaged and deformed. The right wheel and tire damaged. The tail wheel has light damage.							
	E HISTORY OF FLI		<u> </u>					
wreckage dist destination. P	ribution sketch if pertine rovide as much detail as	ent. Attach extra sheet possible.	g circumstances leading to and nates if needed. State departure time and	and location, services	s obtained, and intended			
touchdown a	ircraft settled left wing	low and turned 45 c	r fast. Airplane became airborne degrees right and departed runwa rcraft gave zero reaction and conf	y, crossing taxiway a	and slid to stop in dirt. Of			

Use this space if additional space	e is needed for any answers.		
LUEDEDV CEDTIEV THAT TO	HE ABOVE INFORMATION IS COMPL	ETE AND ACCURATE TO THE BES	TOE MY KNOW! EDGE
l l	Pilot/Operator: Ronald G Maier		
09/17/2018 Signatur	Check here to electronically sign this	_	
Mailed 9/24/21/8-or-	Check here to electronically sign this	document	
If a Person Other than Pilot/Op	perator is Filing Report		
Name:		Title:	
	o electronically sign this document		
	4	HCE ONLY	
NUTCO A		USE ONLY Name of Investigator	Date Report Received
NTSB Accident/Incident No. GAA18CA548	Reviewed by NTSB Regional Office GAA	Eleazar Nepomuceno	10/1/2018
OLLUTIOOLLOTO		T DICAZAL INCOUNTUCCIO	4 111/1/2011X