## NATIONAL TRANSPORTATION SAFETY BOARD NTSB Form 6120.1 PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT

Email the pilot/operator aircraft accident/incident report to the investigator-in-charge of your accident/incident. If email is not available, mail the report per the instructions below.

If your accident/incident occurred in Maine, Vermont, New Hampshire, Massachusetts, Connecticut, Rhode Island, New York, New Jersey, Pennsylvania, Maryland, Delaware, Virginia, West Virginia, Kentucky, Tennessee, North Carolina, South Carolina, Mississippi, Alabama, Georgia, Florida, the District of Columbia, Puerto Rico, or the US Virgin Islands, send the form to: NTSB, ERA, 45065 Riverside Parkway, Ashburn, VA 20147.

If your accident/incident occurred in Ohio, Michigan, Indiana, Wisconsin, Illinois, Minnesota, Iowa, Missouri, Arkansas, Louisiana, North Dakota, South Dakota, Nebraska, Kansas, Oklahoma, Texas, Colorado, or New Mexico, send the form to: NTSB, CEN, 4760 Oakland Street, Suite 500, Denver, CO 80239.

If your accident/incident occurred in Montana, Wyoming, Idaho, Utah, Arizona, Nevada, Washington, Oregon, California, Hawaii, or the territories of Guam or American Samoa, send the form to: NTSB, WPR, 505 South 336th Street, Suite 540, Federal Way, WA 98003.

If your accident/incident occurred in Alaska, send the form to: NTSB, ANC, 222 West 7th Avenue, Room 216, Box 11, Anchorage, AK 99513.

Rules pertaining to notification of aircraft accidents and incidents, as well as overdue aircraft are found in 49 *Code of Federal Regulations* (CFR) Part 830 http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&tpl=/ecfrbrowse/ Title49/49cfr830\_main\_02.tpl. These rules state the authority of the NTSB, define accidents, incidents, injuries, and other terms, and provide procedures for initial and immediate notification of accidents and incidents by aircraft pilots/operators.

#### A. APPLICABILITY

The pilot/operator of an aircraft shall send a report to the office listed above, based on accident/incident location; immediate notification is required by 49 CFR 830.5(a). The report shall be filed within 10 days after an accident for which notification is required by Section 830.5, or after 7 days if an overdue aircraft is still missing.

An aircraft accident, as defined in 49 CFR 830.2, is determined as an occurrence that involves a fatality or serious injury, or substantial damage to the aircraft. For occurrences that do not involve a fatality, the determination that the occurrence is an accident can be appealed by writing to the Director, Office of Aviation Safety, NTSB, 490 L'Enfant Plaza, S.W., Washington, D.C. 20594.

The NTSB uses this form for aircraft accident prevention activities and for statistical purposes. NTSB regulations (49 CFR Part 830) require that **ALL** questions be answered completely and accurately. Completion of this form will take approximately 60 minutes. The NTSB does not guarantee the privacy of any information provided in this form. You need not complete this form unless it displays a valid OMB control number, in accordance with 5 C.F.R. § 1320.5(b), which applies to this collection of information.

#### **B. DEFINITIONS**

1. "Aircraft Accident" means an occurrence associated with the operation of an aircraft that takes place between the time any person boards the aircraft with the intention of flight and all such persons have disembarked, and in which any person suffers death, or serious injury, or in which the aircraft receives substantial damage. For purposes of this form, the definition of "aircraft accident" includes "unmanned aircraft accident," as defined at 49 CFR 830.2.

2. "Substantial Damage" means damage or failure that adversely affects the structural strength, performance or flight characteristics of the aircraft, and that would normally require major repair or replacement of the affected component. NOTE: Engine failure or damage limited to an engine if only one engine fails or is damaged, bent fairing or cowling, dented skin, small puncture holes in the skin or fabric, ground damage to rotor or propeller blades, and damage to landing gear, wheels, tires, flaps, engine accessories, brakes, or wing tips are not considered "substantial damage" for purposes of this report.

3. "Operator" means any person who causes or authorizes the operation of an aircraft, such as the owner, lessee, or bailee of an aircraft.

4. "Fatal Injury" means any injury that results in death within thirty (30) days of the accident.

5. "Serious Injury" means any injury that (1) requires hospitalization for more than 48 hours, commencing within 7 days from the date the injury was received; (2) results in a fracture of any bone (except simple fracture of fingers, toes, or nose); (3) causes severe hemorrhages, nerve, muscle, or tendon damage; (4) involves injury to any internal organ; or (5) involves second- or third-degree burns, or any burns affecting more than 5 percent of the body surface.

# INSTRUCTIONS TO PILOTS/OPERATORS FOR COMPLETING THIS FORM It is necessary that ALL questions on this report be answered completely and accurately. If more space is needed, continue on a blank sheet of paper.

*Nearest City/Place:* Use the name of the nearest community in the state where the accident/incident occurred.

*DateDime*: Indicate the date and local time of the event. Be sure to indicate the time zone.

*Phase of Operation:* Indicate the phase of operation during which the accident/incident occurred.

Aircraft Information: Enter aircraft make and model information as indicated on the aircraft registration certificate, including series. If the involved aircraft is certified as "amateur-built," include the name of the producer of the kit or plans, unless an NTSB employee instructs otherwise.

*Maximum Gross Weight:* Enter the certificated maximum gross weight for the aircraft involved in the occurrence. This should be the same as the maximum gross weight indicated on the aircraft weight and balance documents.

*Engine:* Enter engine make and model information as indicated on the engine data plate.

*Type of Fire Extinguishing System:* If a fire extinguishing system was used to fight an aircraft fire, specify the type(s) of extinguishing system(s) used. Examples include handheld extinguisher, engine fire bottle, cargo/baggage compartment fire suppression system, or airport emergency ground equipment.

*Owner/Operator Information:* Enter the owner information as shown on the registration certificate. Commercial operators, enter the operator information, including "doing business as" when applicable, as shown on the operator certificate.

*Revenue Sightseeing Flight:* Indicate whether the accident aircraft was conducting **revenue** sightseeing operations under 14 CFR Part 91 at the time of the accident.

Air Medical Flight: Indicate whether the accident flight was being conducted for the purpose of carrying medical personnel, patient(s), or organs.

*Public Aircraft:* Federal, state or local government flight operations such as official travel, law-enforcement, low-level observation, aerial application, firefighting, search and rescue, biological or geological resource management, or aeronautical research. Indicate whether the flight was conducted by the armed forces, federal, state, or local government.

*Purpose of Flight: 14 CFR Parts 91, 103, 133, 136, and 137*: Indicate the type of operation that was being conducted at the time of the occurrence using the following definitions:

AERIAL APPLICATION--Operations using an aircraft to perform aerial application or dispersion of any substance. Examples include agricultural, health, forestry, cloud seeding, firefighting, insect control, etc.

AERIAL OBSERVATION--These flights include aerial mapping/ photography, patrol, search and rescue, hunting, highway traffic advisory, ranching, surveillance, oil and mineral exploration, criminal pursuit, fish spotting, etc.

AIR DROP--Aerial operations, other than aerial application, that are intended to release items in flight.

AIR RACE/SHOW--Includes any flight operations conducted as part of an organized air race or public demonstration.

BUSINESS--includes all personal flying without a paid professional crew for reasons associated with furthering a business, including transportation to and from business meetings or work. This does not include corporate/executive operations, air taxi, or commuter operations.

EXECUTIVE/CORPORATE--Company flying with a paid, professional crew.

FERRY--Non-revenue flight under a special flight or "ferry" permit. Refer to 14 CFR 21.197 for details of special flight permit issuance.

FLIGHT TEST--Flight for the purpose of investigating the flight characteristics of an aircraft/aircraft component or evaluating an applicant for a pilot certificate or rating.

INSTRUCTIONAL--Flying while under the supervision of a flight instructor or receiving air carrier training. Personal proficiency flight operations and personal flight reviews, as required by federal air regulations, are excluded.

OTHER WORK USE--Miscellaneous flight operations conducted for compensation or hire such as construction work (not 14 CFR Part 135 operation), parachuting, aerial advertising, towing gliders, etc.

PERSONAL--Flying for personal reasons (excludes business transportation) including pleasure or personal transportation. This also includes practice or proficiency flights performed under flight instructor supervision and not part of an approved flight training program.

POSITIONING--Non-revenue flight conducted for the primary purpose of relocating the aircraft. Examples include moving the aircraft to a maintenance facility or to load passengers or cargo etc.

UNKNOWN--Use only if the primary purpose of flight is not known.

Other Aircraft--Collision: For all accidents involving a collision with another aircraft, including parked aircraft, check "Collision with other aircraft" under Basic Information and complete this section indicating details about the OTHER aircraft involved in the collision.

Airport Information: Complete this section if the accident/incident occurred on approach, landing, takeoff, departure, or within 3 statute miles of an airport. Please refer to the FAA Airport/Facility Directory or other official source for airport information.

Airport Identifier: Provide the official 3 or 4 character airport identifier number.

 $\it Runway:$  Indicate the number of the runway used, including L, R, or C if applicable.

*Runway/Landing Surface*: Indicate the type of intended runway/landing surface (do not indicate surface conditions). If the surface type was mixed, check all that apply.

*Condition of Runway/Landing Surface:* Indicate the condition of the intended runway/landing surface. If multiple conditions existed at the time of the accident, check all that apply.

Weather Information at the Accident/Incident Site: Indicate the weather conditions reported at the accident/incident site at the time of occurrence. If no weather reporting was available for the accident/incident site, indicate the reported conditions at the nearest reporting site. Specify the weather reporting site identifier, the observation time, and distance from the accident/ incident.

*Sky/Lowest Cloud Condition*: Indicate the height above ground level of the lowest cloud condition present at the time of the accident/incident and whether coverage was reported as few, scattered, broken or overcast. Also indicate the height above ground level and coverage of the lowest cloud ceiling present at the time of the accident/incident (reported as broken or overcast).

NOTAMS (*D* and FDC), AIRMETs, SIGMETs, PIREPs: Describe all NOTAMS (distant (D) or Flight Data Center (FDC), if known), AIRMETs, SIGMETs, and PIREPs in effect near the accident/incident.

Flight Crewmember Information: Indicate the category that best describes the capacity served by this flight crewmember at the time of the accident. The designators "Flight Crewmember 1" and "Flight Crewmember 2" do not refer to a specific pilot position or responsibility. If more than one pilot is aboard, they may be entered in any order and their capacity entered as appropriate.

*Degree of Injury:* See Definitions on the top half of Page 1 of the instructions. Minor injury is not defined. If an injury does not meet the criteria for another injury category, select Minor.

*Date of Last Flight Review or Equivalent:* Enter the date of the most recent flight review, or equivalent, completed by this pilot. Refer to 14 CFR 61.56 for accepted equivalents.

*Type Ratings:* List all type ratings on the pilot certificate. If the pilot holds no type ratings indicate "none." If the pilot holds a pilot certificate other than student and was flying an aircraft requiring an endorsement, enter the type and date of any logbook endorsement(s) for that aircraft. See 14 CFR 61 for examples of required endorsements.

Student Endorsements: If the pilot holds a student pilot certificate, enter all solo endorsements and dates on the student pilot certificate.

*Flight Time*: Complete the flight time matrix. Solo flight time should be included as "Pilot-in-Command (PIC)" and all dual flight instruction given should be included as "Time as Instructor."

Additional Flight Crewmembers: Complete this section if there were more than two required flight crewmembers on the aircraft. This also includes a check airman performing official duties but does not include cabin crew. State the capacity served by each included crewmember at the time of the accident.

Passenger(s)/Other Personnel: Enter identification and injury severity information for all passengers, cabin crew, and other personnel involved in the accident. See Page 1 of the instructions for the official definition of injury levels.

Several questions throughout the form allow for multiple responses; when appropriate, choose all responses that apply.

These instructions only pertain to major issue areas covered by NTSB Form 6120.1 *Pilot/Operator Aircraft Accident/Incident Report.* For additional definitions of questions and responses, please refer to www.ntsb.gov.

NTSB Form 6120.1 (rev. 9/2013). This form replaces 6120.1/2.

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

Accident/Incident Location       State: AL	DACK			sed for rep	orting						ns an			
Nearest Caty Place:       Ture 2012       Laster 27.1       State: AL         ZIP:       35401       Country:       United:       State: AL         Latitude:       32.200275       Longitude:       77.1       State: AL         Calision with Other Aircraft:       O Midair       On-ground       © Non-         ARCRAFT INFORMATION       Registration Number:       Date:       Older:       Collision with Other Aircraft:       O Midair       On-ground       © Non-         Anatour-Registration Number:       N27205K       Collision with Other Aircraft       Collision with Other Aircraft       Date:       Older:       Date:       Older:       Date:       Collision with Other Aircraft       Date:       Older:       Date:	BASIC INFORMATION									Level Decker/7	<b>D*</b>			
ZIP. 35401       Country. United States				viewel Airment				-						
Latitude:       33.2206273       Longitude:       97.6114015         Callision with Other Aircraft:       O Midair       One-ground       © Near         AIRCRAFT INFORMATION       Callision with Other Aircraft:       O Midair       One-ground       © Near         Manufacture:       Being       Commercial Space Flight       Immanded Vircraft       Immanded Vircraft       Immanded Vircraft         Model:       722.286       Manufacture:       197.7       Naminum Gross Veright:       194.800       Ibs         Year of Manufacture:       1977       Calanding Cear       One-ground       Number of Scats:       7       Flight Cross Scatt:       0         Onigitude:       Orseinal Design       Manufacture:       Number of Scats:       7       Flight Cross Scatt:       0         Onigitude:       One-ground       Restricted       Clock all thar sprity:       Clock all thar sprity:<						_ State: <u>A</u>		Dat	te: $01/2$	28/2019	Lo	cal Time:	20:15	
(Enter in decimal degrees or degrees:minutes:seconds)           Collision with Other Aircraft: O Midnir OOn-ground © Non             AIRCRAFT INFORMATION           Registration Number: N720CK           BIPR-Equipped and Certified         Commercial Space Flight         Control Corew Scats: 2         Passenger Scats: 0         Number of Seats: 7         Cathor Corew Scats: 2         Passenger Scats: 0         Number of Seats: 7         Cathor Corew Scats: 2         Cathor Corew Scats					3114015				mm/ac	u yyyy	Ti	me Zone: 🧕	Central	
Control find Colspan="2">Control find Colspan="2"Colspan="2"Colspan="2">Control find Colspan="2"Colspan	Latitude							~						
Registration Number: N720CK		(Enter in decima	i degrees or d	iegrees.minutes.set	lonus)			Co	ollision with	Other Air	craft: C	) Midair	OOn-groun	d <b>O</b> None
Manufacturer: Boeing	AIRCRAFT INFORMATION													
Manufacturer:       Boling         Model:       227-2B6         Scrial Number of Seats:       2         Passenger Seats:       0         Organ Design       Number of Seats:       7         Category of Aircraft       Type of Airworthiness Certificate (Check all that apph)       Imateur-Built:       O'reginal Design         Category of Aircraft       Type of Airworthiness Certificate (Check all that apph)       I.anding Gear       Passenger Seats:       0         Oligiandon       Standard       Special       Balloon       Dirwite Special       Engine Type (Kelet one)         OGilder       Commuter       Especimental       Bestricted       Ambibian       Dirayid Recket         Official Provisional       Braine Anderd       Special Flight       Bestricted       Dirub Fan       Olishown         Official Provisional       Certificate of Autorization or Waiver (COA)       Balloon       Dirub Fan       Olishown         Olinknown       Certificate of Autorization or Waiver (COA)       Balloon       Skid       Bated Power       Tital       Tital       Time Since:         Olinknown       Greating Matherity       JTBD-15       656652       0218/19469       J5.500       77692.8       525.1       525.1       525.1       525.1       525.1	Registr	ation Number:	N720CK											
Serial Number: 21298       Wight at Time of Acciden/Incident: 145049       Ibs         Year of Manufacture: 1977	Manufa	acturer: Boeing	g							1	ght			
Serial Number: 21288       Weight at Time of Accident/Incident: 145049       Ibs         Year of Manufacture: 1977	Model:	727-2B6						М	aximum Gr	oss Weigh	t: 194,8	00	lbs	
Amateur-Built: OYes       If Yes: OKit/Plans Make:	Serial N	Number: <u>21298</u>	3							-				lbs
Amateur-Built: Over	Year of	Manufacture:	1977					Nı	umber of Se	ats: 7		Flight Cre	ew Seats: 5	
Original Design     Number of Engines: 3       Category of Aircraft Ø Airplane     Type of Airworthiness Certificate (Check all that apply)     Landing Gear (Check all that apply)     Engine Type (Select one)       Ø Bilmp/Dirigible Gidder     Acrobatic     Limited     [Check all that apply]     Desciprocating (Check all that apply)     Desciprocating (Check all that apply)     Oluquid Rocket O Turbo Shaft     Oslid Rocket O Turbo Prop     Oluquid Rocket O Turbo Prop       O'Holicopter     Commuter     Special Light-Sport     Energency Float     Skid       O'Harlinght     Certificate of Authorization or Waiver (COA)     Other Launch/Recovery System     Other Special Flight       O'Unalight     Certificate of Authorization or Waiver (COA)     None     Outensport       None     Indianow     Indianow     None     Carbot or Green Overhau       O'Unknown     Certificate of Authorization or Waiver (COA)     None     None     Time Sinece:       Ing. I     Pratt & Whitney     JT8D-15     656689     09/08/1967     15.500     T7622.8     525.1	Amateu	<b>ir-Built:</b> OYes	If Yes: (	OKit/Plans Mal	ke:									
O Aimpane Balloon       (Check all that apply) Standard       (Check all that apply) Standard       (Check all that apply) Balloon       (Check all that apply) (Check all that apply)       (Check all that apply) Balloon       (Check all that apply) (Check all that apply)       (Check all that apply)		•No	(	Original Design										
ÖBalicon       Standard       Special       Electronic Standard       Special         ÖBimp/Drigible       Okromal       Restricted       Trinico Standard       Okromal         ÖBimp/Drigible       Okromal       Provisional       Provisional       Trinico Standard       Okromal         ÖHelicopter       Commuter       Special Light-Sport       Experimental       Experimental       Ski       Okrowa         ÖUtnalight       Otter Launch/Recovery System       Okrowa       Okrowa       Okrowa       Okrowa         Engine       Engine Manufacturer       Model/Series       Manufacturer's       Date ondel/Series       Rated Power       Trinic Standard       Inseries         Eng. 1       Pratt & Whitney       JTBD-15       6564689       09/08/1967       15,500       8587.98       27.4	Catego	ry of Aircraft			rtificate						Engine	e Type (Se	elect one)	
OBImprDirigible OGlider       □Normal       □Bestricted       □Tricycle       □Tailwheel       OTarbo Prop       OHybrid Rocket         Opowered Lift OPowered Lift ORocket       □Commuter       □Special Flight Desperimential       □Experimential       □Skid       □High       OTarbo Prop       OHybrid Rocket         OUthalight OUthalight       □Certificate of Authorization or Waiver (COA)       □Other Launch/Recovery System       □Other Launch/Recovery System       OCarburetor       OF are Single         Engine       Engine       Engine       Manufacturer's       Manufacturer's       Bated Power       Total       Time Since:         Imaultation       JTBD-15       654689       09/08/1967       15,500       85879.8       274       274         Eng. 1       Pratt & Whitney       JTBD-15       6556052       02/18/1969       15,500       37692.8       525.1       525.1         Eng. 3       Pratt & Whitney       JTBD-15       656052       02/18/1969       15,500       37692.8       525.1       525.1         Eng. 4       Inspection       OControllable Pitch       OControllable Pitch </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>-</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>								-						
OGlider OGyrophane DHelicopter OWvered Lift Orwered	-				ted			Reti		ailwihaal				
Order       Order <t< td=""><td>OGlide</td><td>r</td><td></td><td></td><td></td><td></td><td>_</td><td></td><td>_</td><td></td><td><b>⊙</b> Turb</td><td>o Jet</td><td>-</td><td></td></t<>	OGlide	r					_		_		<b>⊙</b> Turb	o Jet	-	
Opwored Lift Okocket OUtratight OUnknown       Transport Experimental Light-Sport Decrificate of Authorization or Waiver (COA) Done       Experimental Light-Sport Duknown       Ski Wheel Hull       Ski Wheel Ski Wheel Other Launch/Recovery System       Fuel System Type (Reciprocating) OCarburetor         Engine       Engine Manufacturer       Engine Manufacturer       Engine Manufacturer's Model/Series       Manufacturer's Serial Number       Date       Rated Power Other Spower       Total Other Launch/Recovery System         Eng. 2       Pratt & Whitney       JT8D-15       654689       09/08/1967       15.500       8557.8.       274       274         Eng. 3       Pratt & Whitney       JT8D-15       656052       02/18/1969       15.500       33459.2       1159.2       1159.2         Eng. 4       Propeller 1       OFixed Pitch OControllable Pitch OControllable Pitch OControllable Pitch       Propeller 2       OFixed Pitch OControllable Pitch       Ofixed Pitch OControllable Pitch         Date Last Inspection Type OLast Inspection       OTime of Accident/Incident       Manufacturer: Model:       Manufacturer: Model:       Manufacturer: Model:       Manufacturer: Model:       Additional Equipment (Check all that apply)         Additional (Amateu-built only)       OTime of Accident/Incident       TSO No: OCO11215 MHz)       OCO1215 (406 MHz)       Additional Equipment (Check all that apply)         Manufacturer': Honeywell <td></td> <td></td> <td colspan="4"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>OUnkn</td> <td>lown</td>													OUnkn	lown
OUltralight OUnknown       □ Certificate of Authorization or Waiver (COA) □ None       □ Other Launch/Recovery System       □ Ochrone       □ Ochrone <td colspan="4">OPowered Lift</td> <td></td> <td><i>з</i>у г і</td> <td></td> <td></td> <td>OFfec</td> <td>unc</td> <td></td> <td></td>	OPowered Lift					<i>з</i> у г і			OFfec	unc				
OUnknown       □Certificate of Authorization or Waiver (COA)       □Other Launch/Recovery System       OCarburetor       OFuel-Injected         Engine       Engine Manufacturer       Engine Manufacturer       Engine Manufacturer's Model/Series       Date of Mfg. mm/dd/3yyy       Rated Power       Total (hours)       Time Since: Inspection (hours)         Eng. 1       Pratt & Whitney       JT8D-15       654689       09/08/1969       15,500       8587.8       274       274         Eng. 2       Pratt & Whitney       JT8D-15       656052       02/18/1969       15,500       77692.8       525.1       159.2       1159.2					Hull			ki/Wheel	Fuel Sy	stem Type	(Reciprocation	ng)		
Image: Construction of Waiver (COA)       Image: None       Image: Construction of Waiver (COA)         Engine       Engine       Engine       Manufacturer's       Date of Mfg.       Rated Power of Mfg.       Total Disservice       Time Since: (hours)         Engine       Engine       Made/Series       Serial Number       mm/dd/yyp.       Date of Mfg.       Rated Power O Horsepower of Diss of Thrust       Total Time (hours)       Time Since: (hours)         Eng. 1       Pratt & Whitney       JT8D-15       654689       09/08/1967       15,500       85879.8       274       274         Eng. 2       Pratt & Whitney       JT8D-15       656052       02/18/1969       15,500       77692.8       525.1       526				-	Cther Lau	unch	Recovery Sys	stem	OCarb	uretor	O Fuel-	Injected		
Engine         Engine         Manufacturer's         Date of Mfg. mm/dd/yppy         Rated Power of Morespower of mm/dd/yppy         Total Horsepower of 0         Total Inspection         Time Since: Inspection           Eng. 1         Pratt & Whitney         JT8D-15         654689         09/08/1967         15,500         85879.8         274         274           Eng. 2         Pratt & Whitney         JT8D-15         656052         02/18/1969         15,500         33459.2         1159.2         1159.2           Eng. 3         Pratt & Whitney         JT8D-15         656052         02/18/1969         15,500         33459.2         1159.2         1159.2           Eng. 4         Doe         Ocontinuous Airworthiness         Propeller 1         OFixed Pitch OControllable Pitch OControllable Pitch OControllable Pitch OControllable Pitch         Propeller 2         OFixed Pitch OControllable Pitch OControllable Pitch           Model:						(COA)	□ None		<b>□</b> U	Inknown				
Engine         Engine         Engine Manufacturer         Model/Series         Serial Number         mn/dd/yyyy         © Ibs of Thrust         (hours)									Date			Total	Time	Since:
Eng. 1       Pratt & Whitney       JT8D-15       654689       09/08/1967       15,500       85879.8       274       274         Eng. 2       Pratt & Whitney       JT8D-15       656052       02/18/1969       15,500       77692.8       525.1       525.1       525.1         Eng. 3       Pratt & Whitney       JT8D-15       700734       03/13/1981       15,500       33459.2       1159.2       1159.2       1159.2         Eng. 4       0       OControllable Pitch       OControllable Pitch<								0						
Eng. 2       Pratt & Whitney       JT8D-15       656052       02/18/1969       15,500       77692.8       525.1       525.1         Eng. 3       Pratt & Whitney       JT8D-15       700734       03/13/1981       15,500       33459.2       1159.2       1159.2         Eng. 4       Propeller 1       OFixed Pitch OControllable Pitch OControllable Pitch OControllable Pitch OControllable Pitch       Propeller 2       OFixed Pitch OControllable Pitch         Date Last Inspection:       01/20/2019 mm/dd/yyyy       Manufacturer:       Model:       Manufacturer:       Model:       Model:       Model:       Manufacturer:         Model or Part No.:       01/20/2019 mm/dd/yyyy       Installed:       OYes       No       Manufacturer:       Model:       Manufacturer:         Model or Part No.:       1151324-1       Model or Part No.:       1151324-1       Malter Parchute       Additional Requipment (Check all that apply)         Ø Conditional (Amateur-built only)       Ø Conditional (Amateur-built only)       Was ELT still mounted in aircraft?       Ø Yes       No         Ø Conditional (Amateur-built only)       Was ELT still connected to antenna?       Ø Yes       No       Electronic Flight Bag or Handheld Device         Ø Conditional (Amateur-built only)       Manufacturer's Inspection Program       Was ELT still connected to antenna? <td< td=""><td></td><td></td><td></td><td colspan="3"></td><td></td><td></td><td></td><td></td><td>1 III ust</td><td></td><td>· · · · ·</td><td>· · · · · ·</td></td<>											1 III ust		· · · · ·	· · · · · ·
Eng. 4       Propeller 1       OFixed Pitch OControllable Pitch OControllable Pitch OGround Adjustable       Propeller 2       OFixed Pitch OControllable Pitch OGround Adjustable         Maufacturer:       Manufacturer:       Manufacturer:       Manufacturer:       Model:         Model:       Model:       Model:       Model:         Model or Part No.:       1151324-1       Additional Equipment (Check all that apply)         If Yes:       ELT Installed:       OYes ONO         O Last Inspection       Trime of Accident/Incident       Model or Part No.:       1151324-1         Model or Part No.:       CO120 (406 MHz)       Data Recorder       Autopilot         O Conditional (Amateur-built only)       Was ELT still mounted in aircraft?       OYes ONO       Electronic Flight Bag or Handheld Device         Manufacturer's Inspection Program (AAIP)       Other, specify:       Did ELT Activate?       OYes ONO       Handheld GPS         O ther, specify:       Did ELT Activate?       OYes ONO       Handheld GPS       Heads Up Display         O ther, specify:       Did ELT Activate?       OYes ONO       Satellite Tracking Device						656052					525.1	525.1		
Last Inspection Type       Propeller 1       OFixed Pitch       Propeller 2       OFixed Pitch         0100-Hour       OContinuous Airworthiness       OGround Adjustable       Manufacturer:       OGround Adjustable         0AAIP       OConditional Inspection       Manufacturer:       Model:       OGround Adjustable         Date Last Inspection:       01/20/2019 mm/dd/yyyy       Model:       Model:       Model:         Airframe Total Time:       57.932.1       hrs       hrs       Model or Part No.:       1151324-1         Nouss measured at (Select one)       OLast Inspection       Time of Accident/Incident       Model or Part No.:       1151324-1       Additional Equipment (Check all that apply)         Of Conditional (Amateur-built only)       OConditional (Amateur-built only)       OC126 (406 MHz)       Øres ONo       Data Recorder         Other Approved Inspection Program       (AAIP)       Ores ONo       If activated:       Doata Recorder         Other, specify:       Did ELT Activate? OYes ONo       If activated:       Onboard Weather       Batellite Tracking Device	Eng. 3	Pratt & Whitney		JT8D-15		700734			03/13/1981	15,500	15,500 33459.2 1159.			1159.2
Last Inspection Type       Ocontrollable Pitch       Ocontrollable Pitch       Ocontrollable Pitch         Oldo-Hour       Oconditional Inspection       Ocontrollable Pitch       Ocontrollable Pitch         OAAIP       Oconditional Inspection       Ocontrollable Pitch       Ocontrollable Pitch         OAAnnual       OUnknown       Manufacturer:       Manufacturer:       Model:         Date Last Inspection:       01/20/2019       Model:       Model:       Model:         Model:       Version       Model:       Model:       Model:         Model or Part No:       1151324-1       Model or Part No:       1151324-1         Type of Maintenance Program (Select one)       Ocontional (Amateur-built only)       Ocon:       Ocorol (121.5 MHz)       Ocorol (212.5 MHz)         O Annual       Ocontrollable Pitch       Ocontrollable Pitch       Additional Equipment (Check all that apply)         Model or Part No:       1151324-1       Model or Part No:       12151324-1         Tso No:       Ocorol (212.5 MHz)       Ocorol (212.5 MHz)       Data Recorder         © Conditional (Amateur-built only)       Was ELT still mounted in aircraft?       Ores ONo       Electronic Flight Bag or Handheld Device         O Continuous Airworthiness       O other, specify:       Did ELT Activate?       Ores ONo       Hadd	Eng. 4													
O100-Hour       O Continuous Airworthiness       O Ground Adjustable       O Ground Adjustable         O AAIP       O Conditional Inspection       Manufacturer:       Manufacturer:       Manufacturer:         Date Last Inspection:       01/20/2019       Model:       Model:       Model:         Date Last Inspection:       01/20/2019       Model:       Model:       Model:         Model:       Model:       Model:       Model:       Model:         O Last Inspection       Time of Accident/Incident       If Yes:       Angle of Attack Indicator         Type of Maintenance Program (Select one)       OC126 (406 MHz)       OC911 (121.5 MHz) OC91a (121.5 MHz)       OC91a (121.5 MHz)         O Annual       Conditional (Amateur-built only)       Was ELT still mounted in aircraft? OYes ONo       Electronic Flight Bag or Handheld Device         O Annual       O Conditional Kaiworthiness       Did ELT Activate? OYes ONo       Electronic Primary Flight Display         O Other, specify:       Did ELT Atid in Locating Aircraft: OYes ONo       Handheld GPS	Last Inspection Type													
O Annual       O Unknown       Mainteened:       Model:       Model:         Date Last Inspection:       01/20/2019 mm/dd/yyyy       Model:       Model:       Model:         Airframe Total Time:       57,932.1       hrs       If Yes:       Additional Equipment (Check all that apply)         O Last Inspection       © Time of Accident/Incident       If Si	O100-Hour OContinuous Airworthiness				•				•					
Date Last Inspection:       01/20/2019 mm/dd/yyyy         Airframe Total Time:       57,932.1 hrs hours measured at (Select one) OLast Inspection       hrs o Time of Accident/Incident         Type of Maintenance Program (Select one) O Last Inspection I Time of Accident/Incident       ELT Installed:       O Yes       No         Model:					Manufacturer:					Manu	facturer:			
mm/dd/yyyy       Airframe Total Time: 57,932.1 hrs hours measured at (Select one)       If Yes:       Additional Equipment (Check all that apply)         O Last Inspection O Time of Accident/Incident       If Yes:       Annual       Additional Equipment (Check all that apply)         O Annual       O Conditional (Amateur-built only)       O Conditional (Amateur-built only)       O Conditional (Amateur-built only)       Was ELT still mounted in aircraft? OYes ONo       Description Origram (AAIP)         O Continuous Airworthiness       O ther, specify:       Did ELT Activate? OYes ONo       If activated:         O ther, specify:       Did ELT Aid in Locating Aircraft: OYes ONo       If activated:					Model:									
Airframe Total Time: 57,932.1       hrs         hours measured at (Select one)       If Tes.         O Last Inspection       Time of Accident/Incident         Type of Maintenance Program (Select one)       Model or Part No.: 1151324-1         O Annual       Select one)         O Conditional (Amateur-built only)       O Conditional (Amateur-built only)         O Manufacturer's Inspection Program       Was ELT still mounted in aircraft? OYes ONo         O Other Approved Inspection Program (AAIP)       If activated:         O Other, specify:       Did ELT Activate? OYes ONo         If activated:       Did ELT Aid in Locating Aircraft: OYes ONo         O Other, specify:       Did ELT Aid in Locating Aircraft: OYes ONo	Date La	ast inspection.								t apply)				
hours measured at (Select one)       OLast Inspection Time of Accident/Incident         Model or Part No.:       1151324-1         Type of Maintenance Program (Select one)       Model or Part No.:         O Annual       OC126 (406 MHz)         O Conditional (Amateur-built only)       Was ELT still mounted in aircraft?       OYes ONo         O Manufacturer's Inspection Program       Was ELT still connected to antenna?       OYes ONo         O Other Approved Inspection Program (AAIP)       If activated:       Did ELT Activate?       OYes ONo         If activated:       Did ELT Aid in Locating Aircraft: OYes ONo       Batellite Tracking Device				hrs						chute				
Type of Maintenance Program (Select one)       TSO No.: OC91 (121.5 MHz) OC91a (121.5 MHz)       Data Recorder         O Annual       OC126 (406 MHz)       Electronic Flight Bag or Handheld Device         O Conditional (Amateur-built only)       Was ELT still mounted in aircraft? OYes ONo       Electronic Multifunction Display         O Conditional (Amateur-built only)       Was ELT still connected to antenna? OYes ONo       Electronic Primary Flight Display         O Other Approved Inspection Program (AAIP)       If activate?       OYes ONo         O Other, specify:       Did ELT Aid in Locating Aircraft: OYes ONo       Integer on biological in the original in the oris the original in the original in the origin										☐ Ang	gle of Atta		r	
Type of Maintenance Program (Select one) <ul> <li>O C126 (406 MHz)</li> <li>C Electronic Flight Bag or Handheld Device</li> <li>E Electronic Flight Bag or Handheld Device</li> <li>E Electronic Multifunction Display</li> <li>E Electronic Multifunction Display</li> <li>E Electronic Program (AAIP)</li> <li>O Continuous Airworthiness</li> <li>O Other, specify:</li> </ul> Was ELT still mounted in aircraft: OYes ONo Manufacturer's Inspection Program (AAIP)           O Continuous Airworthiness              Jf activated: Did ELT Aid in Locating Aircraft: OYes ONo               Heads Up Display Onboard Weather Satellite Tracking Device														
○ Conditional (Amateur-built only)       ○ Manufacturer's Inspection Program         ○ Other Approved Inspection Program (AAIP)       ○ Continuous Airworthiness         ○ Other, specify:			Program (Se	elect one)							vice			
O Manufacturer's Inspection Program       O Manufacturer's Inspection Program         O Other Approved Inspection Program (AAIP)       Did ELT Activate? OYes ONo         O Continuous Airworthiness       If activated:         O Other, specify:       Did ELT Aid in Locating Aircraft: OYes ONo         If activated:       Did ELT Aid in Locating Aircraft: OYes ONo					Was ELT still mounted in aircraft? OYes ONo									
O Other Approved Inspection Program (AAIP)       Did ELT Activate? OYes ONo       □ Handred OFS         O Other Approved Inspection Program (AAIP)       If activate?       OYes ONo       □ Heads Up Display         O Other, specify:	O Manufacturer's Inspection Program				Was ELT still connected to antenna? OYes ONo									
O Other, specify:					Heads Up Display									
					~		ocating Aircra	oft: (	OYes ONo				_	
Lescription of Fire Extinguisning System 11 not activated:	Description of Fire Extinguishing System								<b>_</b>				5	
O None     Indicate Reason: Impact Damage     Indicate Reason: Video Recording Device	O None	9	0 0	•					e	□Vid	eo Record	ing Device		
	• Spec	ify: Hand held	halon extin	guishers					1/0 1	□Oth	er, Specify	/:		
□ Battery Expired/Damaged □ Unknown									a/Damaged					

OWNER/OPERATOR INFORMATION										
Registered Aircraft Owner		City: Ypsilanti								
Name: Kalitta Charters II LLC		State: <u>MI</u> ZIP: <u>48198</u>								
Fractional Ownership Aircraft: <b>O</b> Yes <b>G</b>	<b>)</b> No	Country: United States								
<b>Operator of Aircraft</b> Same As Re	egistered Owner	Same Address as Registered Owner								
Name:		City:								
Doing Business As:										
Air Carrier/Operator Designator (4 Charact	er Code): K11A	Country:								
<b>Operating Certificates Held</b> (Check all that apply)	Regulation Flight Conducted Un									
<ul> <li>None</li> <li>Flag Carrier Operating Certificate (FAR 121)</li> <li>Supplemental</li> <li>Air Cargo</li> <li>Foreign Air Carriers (FAR 129)</li> <li>Rotorcraft External Load (FAR 133)</li> <li>Commuter Air Carrier (FAR 135)</li> <li>On Demond Air Tarrier (FAR 135)</li> </ul>	OFAR 91 OFAR 129 OFAR 4 OFAR 103 OFAR 133 OFAR 4 OFAR 121 OFAR 135 OFAR 4 OFAR 125 OFAR 137 OFAR 4 OFAR 91 Special Flight ONon-US, Commercial ONOn-US, Non-commercial	4 431     Non-Scheduled or Air Taxi     International								
<ul> <li>On-Demand Air Taxi (FAR 135)</li> <li>Commercial Air Tour (FAR 136)</li> <li>Agricultural Aircraft (FAR 137)</li> <li>Pilot School (FAR 141)</li> <li>Certificate of Authorization or Waiver (COA)</li> <li>Commercial Space Transportation Experimental Permit</li> <li>Commercial Space Transportation License</li> <li>Other Operator of Large Aircraft</li> </ul>	OPublic Aircraft (Select one) O Armed Forces	Purpose of Flight for FAR 91, 103, 133, 137         (Select one)         O Aerial Application       OFirefighting       OUnknown         O Aerial Observation       OFlight Test       OGlider Tow         O Air Drop       OGlider Tow       OInstructional         O Banner Tow       OOther Work Use       OPersonal         O Executive/Corporate       OPositioning								
Revenue Sightseeing Flight	Air Medical Flight	O External Load O Skydiving								
O Yes O No	O Yes ⊙ No									
AIRPORT INFORMATION (Fill in	if accident/incident occurred on app	oproach, landing, takeoff, departure, or within 3 miles of an airport)								
Airport Name: Tuscaloosa Regional A		Distance From Airport Center:sm								
Airport Identifier: KTCL		Direction From Airport: degrees true								
Proximity to Airport: O Off Airport/Airstri	ip On Airport/Airstrip ON/A	Airport Elevation: 170 ft. msl								
Runway Information		<b>Condition of Runway/Landing Surface</b> (Check all that apply)								
Runway ID: 04       (L/R/C) Length: 64         Runway/Landing Surface       (Check all that all th	adam 🔲 Water	Image: Compacted image: Co								
Approach/Departure Segment (Select one)										
OTaxi OTakeoff OInitial Climb	Cedure/Clearance	pproach ODownwind OLow Approach OBase OGo Around OFinal OAborted Landing (after touchdown) OCrosswind OUnknown								
<b>IFR Approach</b> (Check all that apply)		VFR Approach (Check all that apply) ☑None								
ADF/NDBPARSDFSidestepVOR/TVORILSVOR/DMELocalizer OnlyTACANLOC-back courseRNAV	MLSPracticeLDAGPSASRVisualContactCircling	Traffic PatternStop and GoStraight-InTouch and GoValley/Terrain FollowingSimulated Forced LandingGo AroundForced LandingFull StopPrecautionary LandingUnknown								

"FLIGHT CREWMEMBER 1" INFORMATION										
"Flight Crewmember 1" Responsibilities at the Time of Accident/Incident O Pilot O Co-Pilot O Student Pilot O Flight Instructor O Check Pilot O Flight Engineer O Other Flight Crew										
"Flight Crewmember 1" w	as pilot flying	Yes I	No							
"Flight Crewmember 1" Id	lentification									
First Name: Greg City of Residence:										
Middle Initial: A										
Last Name:       Jones       Country:       United States         Age at time of Accident/Incident:       60       Date of Birth:       mm/dd/yyyy										
Age at time o	I Accident/Incide				m	т/аа/уууу				
	~ ~		ertificate Nun							
Degree of Injury	Seat Occup				straint Ty	pe		]	Inflatable R	lestraints
<ul> <li>None</li> <li>Fatal</li> <li>Minor</li> <li>Unknown</li> <li>Serious</li> </ul>	<ul> <li>Left</li> <li>Right</li> <li>Center</li> </ul>	O Front O Rear O Single	<b>O</b> Unknov	wn	Available O None O Lap or		Used ONone OLap only	v	✓ Not Inst ☐ Installed	
Pilot Certificate(s) (Check a	ll that apply)				O 3-poir	ıt	O <sup>3</sup> -point	,	□ Not Dep	oloyed
	Instructor	Commercial	🗖 US M		O 4-poir		O 4-point		Deploye	
Private Recrea		Airline Transp		n	⊙ 5-poir O Unkno		O 5-point O Unknov	vn		11
Student Sport		Flight Enginee			0		Ũ			
Principal Occupation	Medical Certifi	cate		Me	dical Cer	tificate Va	lidity		Date of Las	t Medical
• Pilot		Class 3				itations/wai		nknown	10/00/00	
O Other			ense (Sport Pilot		With limita Special Issu	tions/waivers	s ON	/A	<u>10/23/20</u> mm/dd/yy	
O Unknown Medical Certificate Limita	-	Unknown		0.	Special Isse	lance				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Must Wear Corrective Lenses										
Medical Certificate Special Issuance NONE										
Date of Last Flight Review		Fligh	t Review Airo	eraft						
or Equivalent, Including										
FAR 121/135 Checks: _										
mm/dd/yyyy         Model: -200           Airplane Rating(s)         Other Aircraft Rating(s)         Instrument Rating(s)         Instructor Rating(s)										
(Check all that apply)	(Check all that a			l that apply)	,,	(Check all				
□ None	□ None		□ None	11 57		None	11		Instrument A	Airplane
☐ Single-Engine Land ☐ Single-Engine Sea	Airship		Airpla Airpla				e Single-Eng		Instrument I	Helicopter
✓ Single-Engine Sea ✓ Multiengine Land	☐ Balloon ☐ Glider		☐ Helico ☐ Power			□ Airplane Multi-Engine □ Helicopter □ Gyroplane □ Glider				
☐ Multiengine Sea	Gyroplane 🛛			eu Ent		Powered Lift Sport				
	<ul> <li>Helicopter</li> <li>Powered Lif</li> </ul>	2								
Type Ratings Student Endorsements (Include dates)										
B727, B737, B757, B767						Stutint	senier	its (include)	uutes)	
, -, -, -										
			Airplane			Inst	rument			
Flight Time (Enter appropriat number of hours in each box)		This Make	Single	Airplane Multionging	Night			Dotononoft	Glider	Lighter
Total Time	Aircraft 23,700	& Model 6,800	Engine 350	Multiengine	Night	Actual	Simulated	Rotorcraft 0	Gilder	Than Air 0
Pilot in Command (PIC)	23,700	0,800	300			+		0		0
Time as Instructor								0		0
This Make/Model						+				
Last 90 Days		104				+		0	0	0
Last 30 Days		6				1		0		0
Last 24 Hours	6	6		6	; (	0 0	0	0		0
	-	L Š	1		1			, v		

"FLIGHT CREWMEMBER 2" INFORMATION												
<ul> <li>"Flight Crewmember 2" Responsibilities at the Time of Accident/Incident</li> <li>OPilot OCo-Pilot OStudent Pilot OFlight Instructor OCheck Pilot OFlight Engineer OOther Flight Crew</li> </ul>												
"Flight Crewmember 2" was pilot flying Yes No												
"Flight Crewmember 2" Identification												
First Name: Matthew City of Residence:												
Middle Initial:     T     State:												
Last Name:     Sheflin       Country:     United States												
Age at time of A	Accident/Inciden	nt· 46	Date of Bi		Junu y		/dd/yyyy					
	leendent/ merden		tificate Numb									
Degree of Injury	Seat Occup				traint Ty	vpe		I	nflatable R	estraints		
• None • • • • • • • • • • • • • • • • • • •	OLeft	OFront	OUnknow	m	•	-	Usod	-		coti unito		
O None     O None       O None     O None       O Serious     O Center     O Single												
Pilot Certificate(s) (Check all	that apply)				O 3-poi	nt	O 3-point	,	□ Not Dep	loyed		
□ None □ Flight Ir		Commercial	US Mi		<ul> <li>○ 4-poin</li> <li>○ 5-poin</li> </ul>		<ul><li>O 4-point</li><li>● 5-point</li></ul>		□ Deploye □ Unknow			
□ Private □ Recreati		Airline Transpo Flight Engineer		1	<b>O</b> Unkn		O Unknow	vn				
		0 0										
· ·	Iedical Certific					tificate Va	-		Date of Las	t Medical		
•		) Class 3 ) Driver's Lice	nse (Sport Pilot	-		nitations/waiv tions/waivers		nknown /A	10/31/20 <sup>-</sup>	18		
•		Unknown	lise (sport i not		pecial Iss				mm/dd/yy			
Medical Certificate Limitati	ons											
None												
Madical Contificate Special Isournes												
Medical Certificate Special Issuance None												
Date of Last Flight Review		Flight	Davian Aina	naft								
or Equivalent, Including		U	Review Airc	rait								
FAR 121/135 Checks:         12/01/2018         Make:         B727           mm/dd/yyyy         Model:         -200												
$\mathbf{A}^{*} = \mathbf{D} = \mathbf{C} = \mathbf{C}$	<i>mm/dd/yyyy</i> Other Aircraf		1	<b>D</b> (1)		T	<b>D</b> = (1 <sup>2</sup> )					
Airplane Rating(s) (Check all that apply)	(Check all that a	0,		ent Rating(s) that apply)		Instructor (Check all th						
□ None	□ None			intar apply)		□ None	an apply)		Instrument A	irplane		
☑ Single-Engine Land □ Airship □ Airplane □ Airplane Single-Engine □ Instrument F □ Single-Engine Sea □ Balloon □ Helicopter □ Airplane Multi-Engine □ Helicopter												
✓ Multiengine Land						Gyroplan			Glider			
☐ Multiengine Sea	Gyroplane					D Powered			Sport			
	<ul> <li>Helicopter</li> <li>Powered Lift</li> </ul>											
Type Ratings	—					Student Er	ndorsement	ts (Include da	ates)			
B727												
			Airplane			Inst	rument					
<b>Flight Time</b> (Enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Single Engine	Airplane Multiengine	Night	Actual	Simulated	Rotorcraft	Glider	Lighter Than Air		
Total Time	1,850	105	112	810			286	0	0	0		
Pilot in Command (PIC)	535	0	13	338			114	0		0		
Time as Instructor	0	0	0	0	1	0 0	0	0	0	0		
This Make/Model					6	9 10	0					
Last 90 Days	91	91	0	91	6	2 8	0	0	0	0		
Last 30 Days	22	22	0	22		2 1	0	0	0	0		
Last 24 Hours	6	6	0	6		2 1	0	0	0	0		

ADDITIONAL FLIGHT CREWMEMBERS (Exclusive of cabin crew, complete the following information)										
Crew Name and Addr	·ess						Seat Occupie	d	Injury	
First Name: <u>Alix</u> Middle Initial: Last Name: <u>Clermor</u>		State		nce: _			O Left O Center O Right	O Front O Rear O Single O Unknown	<ul> <li>None</li> <li>Minor</li> <li>Serious</li> <li>Fatal</li> <li>Unknown</li> </ul>	
Pilot Certificate(s) (Cl None Private Student Type Rating/Endorser Accident/Incident Air	Flight Instructor     Recreational     Sport ment for	Airl		ort DFor er light Time at		) <u>0 h</u> rs	Restraint Ty 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	
Crew Name and Addr	·ess						Seat Occupie	d	Injury	
First Name: Middle Initial: Last Name:		State	:	2	ZIP:		OLeft OCenter ORight	O Front O Rear O Single O Unknown	O None O Minor O Serious O Fatal O Unknown	
Pilot Certificate(s) (Cl None Private Student Type Rating/Endorser Accident/Incident Air		Airl Flig	of this A	ort For For light Time at Accident/Inci	t the Time dent:		Restraint Ty Available O None D Lap Only O 3-point O 4-point O 5-point O Unknown	vee: 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	
PASSENGER(S) /	OTHER PERSO	ONNEL (I	nclude c	abin crew; c	ontinue on s	eparate shee	t if necessary)	1 0 4 11		
Name and Address				Seat	Injury	Restraint T		Inflatable Restraints	Age	
First Name: <u>Michael</u> Middle Initial: <u>F</u> Last Name: <u>Zwark</u> OCrew	State: Country: Ur			OLeft OCenter ORight OUnknown Row:	<ul> <li>None</li> <li>Minor</li> <li>Serious</li> <li>Fatal</li> <li>Unknown</li> </ul>	Available ONone OLap Only O3-point O4-point O5-point OUnknown	O 3-point O 4-point O 5-point	<ul> <li>✓ Not Installed</li> <li>☐ Installed</li> <li>☐ Not Deployed</li> <li>☐ Deployed</li> <li>☐ Unknown</li> </ul>	☐ Under 5 years <i>If Under 5,</i> O Child Restraint O Lap-Held O Unknown	
First Name: Middle Initial: Last Name: OCrew	State:	ZIP:		OLeft OCenter ORight OUnknown Row:	O None O Minor O Serious O Fatal O Unknown	Available ONone OLap Only O3-point O4-point O5-point OUnknown	O 3-point O 4-point O 5-point	□ Not Installed □ Installed □ Not Deployed □ Deployed □ Unknown	☐ Under 5 years <i>If Under 5,</i> O Child Restraint O Lap-Held O Unknown	
First Name: Middle Initial: Last Name: OCrew	State:	ZIP:		OLeft OCenter ORight OUnknown Row:	O None O Minor O Serious O Fatal O Unknown	Available ONone OLap Only O3-point O4-point O5-point OUnknown	O 3-point O 4-point O 5-point	☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	Under 5 years	
First Name: Middle Initial: Last Name: OCrew	State:	ZIP:		OLeft OCenter ORight OUnknown Row:	O None O Minor O Serious O Fatal O Unknown	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	Under 5 years	

Last Departure Voint         Time of Departure View 11260         Time of Departure View 12826         Time 200 Central View 2	FLIGHT ITINERARY INFORMATION									
Cuy:       Lando       Time:       19:28       Cuy:	Last Departure Point	Tim	e of Departure	Destinatio	n		Type Fligh	t Plan F	iled	
City: Life200       Time Zone: Central       City: Life20083       Sinting VFR       Strahoven         Country: United States       Time Zone: Central       Country: United States       State: AL       Activated?       OVe       Ove       Ove       Ove       Ove       Ove       Activated?       Ove	Airport ID: KLRD	<b>T</b> .	18.26	Airport ID:	KTCL					
State: Toxas       Time Zone: Uetital       State: AL       Q.VER         Country: United States       Q.VER       Activated?       @Ves       ONO       QUinhnown         Type of ATC Clearance/Service (Check all that apply)       Special UFR       Bysecial UFR       Country: United States       Q.VER       Cruise       Unitanown / NA         Airspace where the accident/incident occurred       Check all that apply       Bysecial UFR       Bysecial UFR       Country: United States       Airing and Tup-Fright Following       Cruise         Class A       Class B       Demo Area       Airport Advisory Area       Air Traffic Central Area       Airinde of Tup-Fright Occurrence:         Class B       Demo Area       If XA       Cruise       Airing and Tup-Fright Operations Area (MOA)       Air Traffic Central Area       Airing and Country and Area <td< td=""><td>City: Laredo</td><td>11me</td><td>. 10.20</td><td>City: Tusc</td><td>aloosa</td><td></td><td></td><td></td><td></td></td<>	City: Laredo	11me	. 10.20	City: Tusc	aloosa					
Type of ATC Clearance/Service (Check all that apply)       [] Type of ATC Clearance/Service (Deck all that apply)       [] Cruise       []	State: Texas	Time	Zone: Central	State: AL				VI K	Clinkinowin	
□ None       □ Special IPR       □ Special IPR       □ VFR       □	Country: United States			Country: U	nited States		Activated?	€Yes	ONo OUnknown	
□ VFR       □ IR       □ VFR On Top       □ Traffic Advisory       □ Unknown / NA         Airspace where the accident/incident occurred       Clock of the apply       □ Mitingry Operations Area (MOA)       □ Special       □ Altitude of In-Flight         Class A       □ Class G       □ Winning Area       □ Bit Training Area       □ Unknown       □ Altitude of In-Flight         Class F       □ Restricted Area       □ FR 93       □ Bit Training Area       □ Unknown       □ Altitude of In-Flight         Source of Plot Weather Information       □ Company       □ Restricted Area       □ FR 93       □ Company       □ Restricted Area       □ FR 93         Weather Chores Station       □ Minaud       □ Company       □ Company       □ Distance from Accident Site: >1										
□ Class A       □ Class B       □ Class B       □ Class B       □ Class B       □ Class A       □ Class A       □ Class A       □ Class A       □ Class B       □ Class B       □ Class A       □ Class B       □ Class B       □ Class A       □ Class B       □ Class A       □ Class B       □ Class B       □ Class A       □ Class B	VFR     IFR     VFR On Top     Traffic Advisory     Unknown / NA									
□ Class A       □ Class G       □ Mintary Operations Area (MOA)       □ Special       Occurrence:         □ Class C       □ Warming Area       □ Lit Training Area       □ Lit Training Area       □ Lit Training Area       □ Class D       □ Class D </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Altitu</td> <td>de of In-Flight</td>								Altitu	de of In-Flight	
□ Chas C       □ Kas C       □ Kas A       □ Li Training Area       □ Unknown       ① media         □ Chas D       □ Robibited Area       □ FAR 93       □ Manual Area							ol Area		-	
□ Class E       □ Restricted Area       □ FAR 93         WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE         Source of Pilot Weather Information (Check all that apply)       □ Graphy       Weather Observation Facility Facility ID: KTCL ASOS         □ Hitting       □ Milling       □ Distance from Accident Site: ≥1					ica		of Alea		ft msl	
WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE         Source of Pilot Weather Information (Check all that apply)         Basic Conditions       Company Diffugation Service Station       Company Diffugation Service Station       Weather Observation Facility Facility (D: KTCL ASOS         Distance from Accident Stervice Station       Distance from Accident Stervice (DUATS)       Distance from Accident Stervice / Information Distance from Accident Stervice / Information       One         Basic Conditions       Light Condition ODawn       Downe (Clear) ODawn       ODark (Split)       Outknown         Sky/Lowest Cloud Condition O Clear       Ceiling Height Box Condition Height       Ceiling Height Box Condition Height       Ceiling Height Box Condition Height       Temperature: 13 (C) or (F)         Wind Direction       Wind Speed       Wind Gusts or       Visibility       10 miles Density Altitude: 48 ft         Or       Speed:       Main       Freezing Rain Snow Shower       Freezing Rain Snow Shower       Freezing Rain Snow Shower         Olicity Of Precipitation       None       Directed Direction Precipitation       Freezing Atta       Turbulence         Outleavent       Bane Meant       Directed Direction Precipitation       None       Directed Direction Precipitation       Ceiling Actual Anount       Directed Treezing Prizzle       None       Directed Displashower       None       Displashower </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>										
Source of Pilot Weather Information (Check all that apply)         Weather Observation Facility           Mational Weather Service (Dummercial Weather Service (DUATS)         Company (Duknown         Company (Duknown           Observation Time: 19:53         Time Zone: Central Distance from Accident Site: >1 (Duknown         nm Direction from Accident Site: >1 (Duknown           Basic Conditions OVMC OUnknown         Observation Facility (Duknown         Ouknown Obseured Obseured         Ouknown Obseured Overcast         Ouknown Obseured Overcast         Ouknown Obseured Overcast         Ouknown Obseured Overcast         Ouknown Obseured Overcast         Temperature: 13 (C) or (F) Dew Point: 3 (C) or (F)           Wind Direction Or         Variable Calim Calim Overcast         Obseured Overcast         Not Gusting (F agl)         Temperature: 13 (C) or (F)         (C) or (F) Dew Point: 3 (C) or (F)           Wind Direction Or         Variable Calim Calim Overcast         Obseured Overcast         Not Gusting (F agl)         Temperature: 13 (C) or (F)         Not (F)           Wind Direction Or         Variable Calim Calim Overcast         Overcast         Visibility 10 (Clight Overcast         miles (F eezing Rain Cor         Not (F)           Intensity of Precipitation Overcast         Type of Precipitation (Check all that apply)         None (F eezing Rain Check all that apply)         None (F eezing Rain Conderate         None (F eezing Rain Conderate         Freezing Rain Conderate         None (F eezing R										
(Check all that apply)              Grompany             Military						convotion Easility				
□ Animal Weather Service       □ Company       □ Company       □ Distance from Accident Site: 21						•				
Implication Condition       Internet         Ornel-Board Weather       Done         Basic Conditions       Unknown         O'NAC       Obawn         O'Nac       O'Nac         O'Nac	National Weather Service									
□ Automated Report □ Commercial Weather Service (DUATS)       □ None □ Unknown       Distance from Accident Site: >1n m         Basic Conditions ○ VMC       □ Dawn ○ Daw										
Conhadra Weather       Direction from Accident Site: Unknown degrees true         Basic Conditions       ODawn ODusk ODark Night OUnknown       Obark Night OBark Night OBark Night OBark Night OBark Night OBark Night Otherwards Obscured OBark Obscured OBark Night Otherwards Obscured OBark Night Otherwards Obscured OBark Night Otherwards Obscured OBark Night Otherwards Obscured OBark Night Obscured OBark Night Otherwards Obscured OBark Night Otherwards Obscured OBark Night Obscured OBark Night Obscured OBark Night Otherwards Obscured OBark Night Obscured OBark Night Otherwards Obscured OBark Night Obscured Obscured OBark Night Obscured Obscured Obscured OBark Night Obscured Obscured OBark Night Obscured Obscure Obscured Obscured Obsc	Automated Report	🗖 Non								
Basic Conditions       Light Condition         Ø VMC       ODawn       ODusk       ODark Night         Ø VMC       ODay       Ø Night       OBright Night         Ø VMC       ODawn       ODawn       ODark Night       OUnknown         Sky/Lowest Cloud Condition       O Thin Broken       O None (Clear       O Obscured       Dew Point: 3       (C) or(F)         Ø Clear       O Thin Broken       O None (Clear)       O Obscured       Dew Point: 3       (C) or(F)         Ø Seattered       O Unknown       O Overcast       O Unknown       Ceiling Height       Dew Point: 3       (C) or(F)         Mind Direction       It agl       Ceiling Height       O Unknown       Ceiling Height       Intensity of Precipitation       MB         Variable       Calm       Calm       Kts       Speed:		e (DUATS) 🔲 Unk	nown					_	4	
One       O			Light Conditi	on	Direction from	Accident Site. OTK	nown	_ degrees	liue	
ONC       ODay       ONight       OBright Night         Sky/Lowest Cloud Condition       Ceiling       One (Clear)       O obscured       O broken       O bascured         O Partial Obscuration       O Unknown       O train O vercast       O overcast       O obscured       Dew Point: 3       (C) or(F)         O scattered       O ndefinite       O vercast       O unknown       O unknown       O unknown         Variable       ft agl       Ceiling Height       Ood       ft agl       Itimeter Setting: 29.94       in. Hg         Variable       Calm       Variable       O are       ft agl       Not Gusting       RVR:			0		ODark	Night <b>O</b> Un	known			
Sky/Lowest Cloud Condition       Ceiling       Obscured       Temperature: 13 (C) or (F)         O Clear       O Thin Broken       O None (Clear)       O Obscured       Deveration         O Partial Obscuration       O Unknown       O Overcast       O Unknown       O Indefinite         O Scattered       O Unknown       O Overcast       O Unknown       Attimeter Setting: 29.94 in. Hg         Lowest Cloud Condition Height       Ceiling Height       Ceiling Height       MB         Overcast       O Mone (Clear)       MB       MB         Variable       Calm       Wind Speed       MB       Not Gusting         -or-       or-       Speed:       kts       Speed:       Kts         O Light       O None       Drizzle       Freezing Rain       None       Blowing Stand       Haze         O Moderate       Rain       Ice Pellets       Snow Howers       Freezing Drizzle       Blowing Stand       Haze         O None       N/A       Hail       Snow Grains       Freezing Drizzle       Blowing Stand       Haze         Blowing Stand       Haze       Snow Grains       Freezing Drizzle       Blowing Stand       Haze         O None       N/A       Snow Grains       Freezing Drizzle       Dust			-							
Oclear       O Thin Broken       O None (Clear)       O Obscured         O Few       O Thin Overcast       O None (Clear)       O Obscured         O Partial Obscuration       O Unknown       O Vercast       O Unknown         O Scattered       O Unknown       O Vercast       O Unknown         Lowest Cloud Condition Height       Ceiling Height       Ceiling Height       Attimeter Setting: 29.94       in. Hg         Wind Direction       Wind Speed       Wind Gusts       Visibility       10       miles         Variable       Calm       Note Gusting       RVR:feet       feet         or-       Speed: 04       kts       Speed:kts       Speed:feet         O'Light       O None       Done       Drizzle       Freezing Rain         O'Light       None       Done       Freezing Drizzle       Freezing Drizzle         O'Unknown       Snow Grains       Freezing Drizzle       Freezing Drizzle       Blowing Snow       Ce Fog         Blowing Snow       Ice Pellets       Snow Kower       Blowing Snow       Snoke       Dust       Unknown         O'Unknown       Rain Showers       Ice Crystals       Freezing Drizzle       Freezing Drizzle       Blowing Snow       Ice Fog       Blowing S										
O Few       O Thin Overcast       O Broken       O Indefinite       Dew Point: 3 (C) or(F)         O Partial Obscuration       O Unknown       O Overcast       O Unknown       Attimeter Setting: 29.94 in Hg         Lowest Cloud Condition Height       ft agl       Ceiling Height       O       Attimeter Setting: 29.94 in Hg	-		0	•	<u>.</u>	Temperature:	13	(C) or _	(F)	
O Partial Obscuration       O Unknown       O Overcast       O Unknown         O Scattered						<b>Dew Point:</b> <u>3</u> (C) or(F)				
Lowest Cloud Condition Height       Ceiling Height       orMB        f agl       000       ft agl         Wind Direction       Wind Speed       Wind Gusts       Visibility 10miles        or      or      or      feet        or      or      or	O Partial Obscuration	-								
Lowest Cloud Condition Height       Centing Height         ft agl       8000       ft agl         Wind Direction       Calm       It agl         Variable       Calm       Not Gusting         -or-       or-       or-         Direction:       220       degrees true       Speed:	•	r.•. <b>r</b> .	Calling Haigh	4		Additional Sett				
Wind Direction       Wind Speed       Wind Gusts       Visibility       10       miles         Orange       Calm       Calm       Section       Not Gusting       RVR:feet      feet         orr       -or-       Speed:kts       Speed:kts       Density Altitude: 48       ft         Intensity of Precipitation       Type of Precipitation (Check all that apply)       Restriction to Visibility (Check all that apply)       Restriction to Visibility (Check all that apply)         OLight       None       Drizzle       Freezing Rain       Snow Shower       Blowing Sand       Haze         OModerate       Rain       Ice Pellets       Snow Shower       Ice Pellets Shower       Blowing Snow       Ice Fog         OUnknown       Rain Showers       Ice Crystals       Freezing Drizzle       Turbulence       Type (Check all that apply)         Cing Forecast       Icing Actual       Amount       Type       ON/A       One       ON/A         O Trace       Rime       O Light       O Clear       O Light       O Clear Air       Moderate         O Light       O Clear       O Light       O Clear Air       O Moderate       E Clear Air       E Convective Turbulence         Amount       Type       O Moderate       O Mixed <td>Lowest Cloud Condition E</td> <td>0</td> <td></td> <td></td> <td>ft agl</td> <td></td> <td></td> <td></td> <td></td>	Lowest Cloud Condition E	0			ft agl					
□ Variable       □ Calm       □ Not Gusting       RVR:feet         □ or-       or-       or-       rection:       220         Direction:       220       degrees true       Speed: 04       kts       Speed:kts       Density Altitude: 48       ft         Intensity of Precipitation       Type of Precipitation (Check all that apply)       Restriction to Visibility (Check all that apply)       Restriction to Visibility (Check all that apply)         ○ Light       □ None       □ Drizzle       □ Freezing Rain       □ Snow Shower         ○ Moderate       □ Rain       □ Ice Pellets       □ Snow Shower       □ Blowing Dust       □ Ground Fog         ○ N/A       □ Hail       □ Snow Grains       □ Freezing Drizzle       □ Blowing Snow       □ Ice Fog         □ Unknown       □ Rain Showers       □ Ice Crystals       □ Freezing Drizzle       □ Blowing Snow       □ Unknown         Icing Forecast       Icing Actual       Amount       Type       Moderate       O N/A       □ Drizce       Turbulence         Amount       Type       ○ None       ○ N/A       ○ Ilight       ○ Clear       □ Clear Air       □ Moderate         ○ Moderate       ○ Mixed       ○ Moderate       ○ Mixed       ○ Convective Turbulence       □ Extreme <td></td> <td></td> <td>0000</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>			0000							
-or-       □ Light and Variable       -or-       -or-       RVV:	Wind Direction	Wind Speed		Wind Gusts		Visibility	10	miles		
-or-       speed:       or-       speed:       _or-       RVV:miles         Direction:       220 degrees true       Speed:       _dts       Speed:       _kts       Density Altitude: <u>48</u> ft         Intensity of Precipitation       Type of Precipitation (Check all that apply)       Restriction to Visibility (Check all that apply)       Restriction to Visibility (Check all that apply)         OLight       □       None       □       Drizzle       □       Freezing Rain         OModerate       □       Rain       □       Ice Pellets       Snow Shower       □       Blowing Dust       □       Ground Fog         ON/A       □       Hail       □       Snow Grains       □       Ice Prezing Drizzle       □       Blowing Snow       □       Ice Fog         □ Unknown       □       Rain Showers       □       Ice Crystals       □       Turbulence       Type (Check all that apply)       Severity         O None       N/A       □       O N/A       □       O None       N/A       □       □       Icing Actual         Amount       Type       O None       O N/A       □       O Nice       O Ni/A       □       □       □       □       □       □       □       □       □ <td>□ Variable</td> <td></td> <td>- 1-</td> <td>Not Gustin</td> <td>ng</td> <td>RVR</td> <td>·</td> <td>feet</td> <td></td>	□ Variable		- 1-	Not Gustin	ng	RVR	·	feet		
Direction:       220_degrees true       Speed:	-or-	-	able	-0r-		RVV	:	miles		
O Light       Image: Solution of the second se	Direction: 220 degrees true	Speed: <u>04</u>	kts		kts	Density Altitue	de: <u>48</u>		_ft	
OModerate       Rain       Ice Pellets       Snow Shower         OHeavy       Snow       Snow Pellets       Ice Pellets Shower       Blowing Dust       Ground Fog         ØN/A       Hail       Snow Pellets       Ice Pellets Shower       Blowing Snow       Ice Fog         ØN/A       Hail       Snow Grains       Freezing Drizzle       Blowing Snow       Ice Fog         ØUnknown       Rain Showers       Ice Crystals       Freezing Drizzle       Blowing Spray       Smoke         Icing Forecast       Icing Actual       Amount       Type       Type (Check all that apply)       Severity         ØNone       N/A       O Ni/A       O None       O Ni/A       Icing trace       Rime       Clear Air       Moderate         ØLight       O Clear       O Light       O Clear       O Mixed       Severe       Evere       Evere         ØModerate       Mixed       ØSevere       O Unknown       O Severe       O Unknown       Extreme	Intensity of Precipitation	Type of Precipit	ation (Check all t	hat apply)		Restriction to	Visibility (C	heck all ti	hat apply)	
O Heavy       Snow       Snow       Snow Pellets       Ice Pellets Shower         O MA       Hail       Snow Grains       Freezing Drizzle       Blowing Sand       Haze         O Unknown       Rain Showers       Ice Crystals       Freezing Drizzle       Blowing Snow       Ice Fog         Icing Forecast       Icing Actual       Turbulence       Unknown         Amount       Type       Amount       Type       Severity         O None       N/A       O N/A       None       N/A         O Trace       Rime       O Trace       Rime       Clear         O Light       O Clear       O Light       O Clear       Clear         O Moderate       O Mixed       O Moderate       O Mixed       Severe         O Severe       O Unknown       O Severe       O Unknown       Eterme		✓ None								
• N/A         OUnknown           Hail         Rain Showers           Snow Grains         Ice Crystals           Freezing Drizzle           Blowing Snow         Ice Fog         Blowing Spray         Blowing Spray         Dust           Smoke         Dust          Icing Forecast           Icing Actual           Mmount           Type           Turbulence          Amount         O N/A           O None           N/A           O None           O N/A           Severity          O Light           O Clear           O Moderate           O Mixed           O Moderate           O Mixed          O Severe           O Unknown           O Severe           O Unknown           Description           Description									g	
Icing Forecast     Icing Actual     Turbulence       Amount     Type     Amount     Type       O None     O N/A     O None     O N/A       O Trace     O Rime     O Trace     O Rime       O Light     O Clear     O Light     O Clear       O Moderate     O Mixed     O Moderate     O Mixed       O Severe     O Unknown     O Severe     O Unknown	● N/A □ Hail □ Snow Grains □ Freezing Drizzle □ Blowing Snow □ Ice Fog									
Icing Forecast     Icing Actual     Turbulence       Amount     Type     Amount     Type       O None     O N/A     O None     O N/A       O Trace     O Rime     O Trace     O Rime       O Light     O Clear     O Light     O Clear       O Moderate     O Mixed     O Moderate     O Mixed       O Severe     O Unknown     O Severe     O Unknown	OUnknown	□ Rain Showers	□ Ice Crystals							
AmountTypeAmountTypeType (Check all that apply)SeverityO NoneO N/AImage: NoneO N/AImage: NoneImage: LightImage: LightO TraceO RimeO TraceO RimeImage: Clear AirImage: ModerateO LightO ClearO LightO ClearImage: Clear AirImage: Clear AirO ModerateO MixedO ModerateO MixedImage: Clear AirImage: Clear AirO ModerateO ModerateO MixedImage: Convective TurbulenceImage: ExtremeO SevereO UnknownO SevereO UnknownImage: Convective TurbulenceImage: Extreme	Icing Forecast		Icing Actual							
O Trace       O Rime       O Trace       O Rime       Clear Air       Moderate         O Light       O Clear       O Light       O Clear       Terrain-Induced       Severe         O Moderate       O Mixed       O Moderate       O Mixed       Convective Turbulence       Extreme         O Severe       O Unknown       O Severe       O Unknown       O Severe       O Unknown	Amount Type					Type (Check a	ll that apply)			
O Light       O Clear       O Light       O Clear       Terrain-Induced       Severe         O Moderate       O Mixed       O Moderate       O Mixed       Convective Turbulence       Extreme         O Severe       O Unknown       O Severe       O Unknown       O Severe       O Unknown				-						
O Severe O Unknown O Severe O Unknown							iced			
O Severe O Unknown O Severe O Unknown	O Moderate O Mixed		-				Furbulence		Extreme	
	O Severe O Unkno O Unknown	wn	O Severe O Unknown	<b>U</b> Unkr	iown					
NOTAMs (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident:										
See also K11A Flight Release:										
KTCL A0194/18 (09/030) 20SEP1829-31JAN2000 2019 EST RWY 04 ALS U/S; KTCL A0224/18 (8/3948) 16OCT1416-28MAY1415 2019	KTCL A0194/18 (09/030) 2	0SEP1829-31JA								
EST ILS OR LOC RWY 4, AMDT 14FRDR OR ADF REQUIRED FOR PROC ENTRY EXC FOR ACFTEQUIPPED WITH SUITABLE										
RNAV SYSTEM WITH GPSMISSED APCH: CLIMB TO 800 THEN CLIMBING RIGHT TURN TO 2500 DIRECT OKW VORTAC AND HOLD,LDK VOR OUT OF SVC; KTCL A0228/18 (8/5400) 17OCT1448-29MAY1448 2019 EST ILS OR LOC RWY 4, AMDT										
14F TERMINAL RTE EM MOVIL INT TO TO LOM NOT ALITH TERMINAL RTE EM ELITAW INT TO TO LOM NOT ALITH ' NEW TO	14F TFRMINAI RTF FM	MOVIE INT TO T	CION NOT A	ITH TERMIN	AI RTF FM F	LITAW INT TO T			I · NFW TCI	

### DAMAGE TO AIRCRAFT AND OTHER PROPERTY

O Destroyed

O Unknown

Aircraft Da	mage
O None	0
O Minor	0

**Aircraft Fire** O Substantial O None O In-Flight O On-Ground

O Both Ground and In-Flight **O** Fire at Unknown Time **O** Unknown

**Aircraft Explosion** O None

O In-Flight

O On-Ground

**O** Both Ground and In-Flight O Explosion at Unknown Time **O** Unknown

**Description of Damage to Aircraft and Other Property** (Use additional sheet if necessary)

Damage to aircraft includes nose gear doors and lower fuselage forward and aft of the nose gear doors. Both areas contacted the runway surface after main gear touchdown. The fuselage area beneath the forward accessory compartment was also damaged and the pressure vessel compromised in this same area.

The damaged area is 45" wide by 143" long, from STA 360 to 219.8 and from SL LSL 26 to RSL 26.

2.A. BS 227 from LSL 26 to RSL 26 Ground down 2". It bent back a 1/2 inch to keep the FWD Nose Gear door from closing all the way. The skin from BS 227 to BS 277 on left and right of AFT doors looks ok. Just doors are bad.

### 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 distribution sketch if pertinent. Attach extra sheets if needed. State departure time and and location, services obtained, and intended destination. Provide as much detail as possible.

Aircraft N720CK (flight number KFS720) was carrying automotive cargo to the destination airport of Tuscaloosa, Alabama (KTCL) with a flight crew of three and one A&P mechanic. The aircraft took off from Laredo, Texas (KLRD) at 0026z where it cleared U.S. Customs from a previous arrival from Queretaro, Mexico (MMQT) and refueled. The flight proceeded uneventfully until the approach to KTCL. On a visual approach to KTCL RWY 04, the Captain (PF) called for the landing gear to be lowered. The First Officer (PM) lowered the landing gear lever accordingly. The crew collectively observed an abnormal (red) indication for the nose landing gear, and normal (green) indications for the left and right main landing gear. The Captain continued the approach, declining suggestions from the First Officer and Flight Engineer to cycle (raise and lower) the landing gear and further declining suggestions to go-around. On selection of landing flaps, the gear horn sounded continuously. After approximately 10 seconds (as reported by the crew) the Flight Engineer silenced the gear horn by pulling the associated circuit breaker. The crew reported TAWS alerts for "Too Low. Gear" sounding until touchdown. The aircraft touched down main gear first. As the nose of the aircraft was lowered, the forward lower fuselage contacted the runway. The nose landing gear had remained in the retracted position. The aircraft was stopped on RWY 04. The Captain shut all three engines down via the cutoff levers. The crew secured the aircraft electrical system and then evacuated the aircraft without injury via the L1 door. Airport Rescue and Fire Fighting responded to the aircraft and applied foam in the area of the nose gear.

<b>RECOMMENDATION</b> (How could this	accident/incident h	ave been prevente	d?)		
Operator/Owner Safety Recommendation					
Currently under operator review for furthe	er action.				
MECHANICAL MALFUNCTION/	FAILURE (If mo	re space is needed	l. continue on sep	arate sheet)	
Was there Mechanical Malfunction/Failur					Total Time/Cycles
(If yes, list the name of the part, manufacturer, par		escribe the failure.)			On Part
The nose landing gear did not extend no			s submitted, the c	ause of the failure	Hours
has not been established, and the aircra	int remains on the g	round at KICL.			Cycles
					Time Since This Part Inspected/Overhauled
					Hours
FUEL & SERVICES INFORMATI	<b>UN</b> Fuel Type				
(Convert from pounds, as necessary)	O 80/87	O 115/145	O Jet B	O Other, specify	
_7612 Gallons	O 100 Low Lead O 100/130	O Jet A O Jet A-1	O JP8 O Automotive		
Other Services, if Any, Prior to Departure	•	<b>O</b> Jet A-1	• Automotive		
, , , , , , , , , , , , , , , , , , ,					
EVACUATION OF AIRCRAFT					
Was an emergency evacuation of the aircr		□ Yes □ N			
Method of Exit – Describe how the occupar				l	
All occupants (three flight crew, one med	chanic) evacuated t	the aircraft via the	L1 door.		
<b>OTHER AIRCRAFT – COLLISIO</b>	N (If air or ground	collision occurred	, complete this se	ction for other aircraf	t)
Aircraft Registration Number Manufact	urer:				nage to Other Aircraft
Model:					Destroyed I Minor ubstantial None
Registered Owner of Other Aircraft		Pilo	t of Other Aircraf		
Name:		Nan	ne:		
City:		City	:		
State:ZIP:		Stat Cou	e:	ZIP:	
		000	····· J ·		

# ADDITIONAL INFORMATION (Please type or print in ink)

Use this space if additional space is needed for any answers.

Pilot Greg Jones reported his logbooks were lost in a natural disaster. As such, he was unable to provide further information on Page 5 flight times.

Date of this Report	Name of I	Pilot/Operator:		·						
02/08/2019	Signature	:								
mm/dd/yyyy	or									
If a Person Other than Pilot/Operator is Filing Report										
Name:         Carl V. Barnes         Title:         Director of Safety										
Signature:										
or Check here to electronically sign this document										
FOR NTSB USE ONLY										
NTSB Accident/Incid	lent No.	Reviewed by NTSB Regional Office	Name of Investigator	Date Report Received						