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

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<u>ersattatum</u>						de de la la				
Accident/Incident Location			_,	Date/Time						
Nearest City/Place: Haskell		Sta	te: IX	Date: June 8,		al Time: <u>1</u> :	55pm			
ZIP: 79521 Cou	ntry: USA	<del></del>		mm/dd/yy	/ <i>///</i> //	o Zone. Cl	)T			
Latitude:(dd		(dd	d:mm:ss E/W)							
Phase of Operation				Collision with (	Other Aircraft	Altitude (	of In-Flight			
Standing Takeoff (in	ncl. initial climb) 🔲 Cruis		Hover	☐ Midair		Occurren	ice			
☐ Taxi ☐ Climb ☐ Descent ☑ Landing	∐ Man □ Appi		Other Unknown	On-ground  None				ft MSL		
Descent V Landing			1	_						
the state of the state of the		制制技術性學學學學								
Manufacturer: Meyers				1	Veight:					
Model: OTW 165					me of Accident/In			30 <u>0</u> (bs		
Serial Number: 80				Location of	Center of Gravity					
Registration Number: 34	1335	Amateur-built	: 🔲 Yes 🗹 N	o		_	or datu			
	unio		•	-or-			ynamic Cord			
1	Type of Airworthiness	Certificate	Number of	Seats:		ng Gear	Retrac			
1 <u>1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 </u>	(Check all that apply) Standard Spec	nia!	If Large Airc	raft, how many seats		any addition uration that	nal landing go	tar		
I ==	7	estricted	_				••	ailwhcel		
Glider	Utility L	imited	1	rew:	<del></del>	cycle				
Gyrocraft Helicopter		rovisional xperimental	Cabin Cı	rew:	—   HAT	nphibian ærgency Flo		igh Skid <sub>kid</sub>		
☐ Powered IIII	☐ I ransport ☐ E	cecial Flight	Passenge	ers:	—   □ Fk	xat	□ sı	ki		
Ultralight Unknown		lght Sport				ili known	☐ SI	ki/Wheel		
		T - 4 -			T		05 100 1000			
Type of Maintenance Pro	ıgram	Last Inspec			Date Last Inspec	tion:	U5/20/2005 m/dd/yyyy	<u>'</u>		
Annual Conditional (Amateur-buil	t only)	☐ 100 Hour☐ AAIP		ous Airworthiness onal Inspection		mmidal yyyy				
Manufacturer's Inspection	Program	Annual	Unknow		Airframe Total Time: hrs					
Other Approved Inspection Continuous Airworthiness	n Program (AAIP)				hours measure					
Other, specify:					Last Inspec	ion 🔲 T	ime of Accid	ent/Incident		
IFR Equipped		Stall Warnir	ig System Inst	alled	Type of Fire Extinguishing System					
☐ Yes ☑ No ☐ Unkno	nwn '	Yes Z	lo Unknov	ava.	None None					
				Specify						
I	T Activated	ELT Manuf	acturer: Emer	rgency Beacon (	Corp.					
☑ Yes □ No ☑	Yes No	Model/Series	EBC-102A			*****				
ELT Aided in Locating A	ccident/incident	Serial Numb	er:							
☐ Yes ☑ No		Battery Type	e:		Batte	ry Exp. Da	ıte:			
Engine Type	Reciprocatir		ropeller	<u> </u>		-				
Reciprocating Turb	System Type	÷	<b>x</b>	0						
☐ Turbo Shaft ☐ Turb	o Fan 🛮 💆 Carburetor		Fixed Pitch		turer:					
☐ Turbo Prop ☐ Unki	lown   Fael Injects	- L	Controllable P	Model:			<u> </u>			
				ĺ	Engine Rated Power Measured					
		l		Date	as (check one)	Tetal	Time Since	Time Since		
	Engine		ufacturer's	of Mfg.	Horsepower of	Time	Inspection	Overbaul		
Engine Manufactur		Seri	al Number	mm/dd/yyyy	Ibs of Thrust	(hours)	(hours)	(bours)		
Eng. 1 Warner	1650				165	-				
Eng. 2			<u></u>			<del>                                     </del>	-			
Eng. 3		<del></del>		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	-				
Eng. 4	<u> L</u>				L	1	<u> </u>			

Registered Aircraft Owner		Owner Address			
Name: Richard P. Ashbach and Airshipp LI	<u>_C</u>	City: Forest Lake			
Fractional Ownership Aircraft: 🗌 Yes 🛂 N	State:         MN         ZIP:         55025           Country:         USA				
Operator of Aircraft Same As Regis	Operator Address Same As Registered Owner				
		City:			
Doing Business As:	Tode):	Country:			
		Revenue Sightseeing Flight			
Regulation Flight Conducted Under	cial Flight Public Use (select type)	Yes No			
☐ FAR 91 ☐ FAR 129 ☐ FAR 91 Spe ☐ FAR 103 ☐ FAR 133 ☐ Non-US, Co ☐ FAR 121 ☐ FAR 135 ☐ Non-US, No ☐ FAR 125 ☐ FAR 137 ☐ Armed Force	ommercial	Air Medical Flight			
	Revenue Operation	Type of Commercial Operating Certificate Held			
Purpose of Flight for FAR 91, 103, 133, 137 (Select one)	for FAR 121, 125, 129, 135 (Select one)	(Check all that apply)			
Personal Business Executive/Corporate Other Work Use Instructional Ferry Positioning	Scheduled or Commuter Non-Scheduled or Air Taxi  Domestic or International Domestic International	None     Flag Carrier Operating Certificate (121)     Supplemental     Air Cargo     Foreign Air Carriers (129)     Commuter Air Carrier (135)     On-Demand Air Taxis (135)			
Aerial Application	Cargo Operation	Large Helicopter (127)			
Aerial Observation Air Drop	Passenger/Cargo	Rotorcraft External Load (133)			
Air Race / Show	Passenger How many?	Agricultural Aircraft (137)			
☐ Flight Test ☐ Public Use ☐ Unknown	Mail	Other Operator of Large Aircraft			
Aircraft Registration Number   Manufactu	rer:	Damage to Other Aircraft			
	rer:	Damage to Other Aircraft  Destroyed Minor Substantial None			
1 -	rer;	☐ Destroyed ☐ Minor			
Registered Owner of Other Aircraft First Name:		☐ Destroyed ☐ Minor☐ Substantial ☐ None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:	City:State:	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:	City:State:	☐ Destroyed ☐ Minor☐ Substantial ☐ None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:	City:	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:	City:	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial:	City: State: Country:  City: State:	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name:	City:   City:   City:   City:   State:   Country:   Country:	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	Destroyed Minor Substantial None  ZIP:			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name:	City: State: Country:  City: State: Country:  Yes No Unknown	Destroyed   Minor   None			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	Destroyed   Minor   None			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	Destroyed   Minor   None			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	Destroyed   Minor   None			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	ZIP:  ZIP:  Total Time/Cycles On Part  Hours  Cycles  Time Since This Part			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure	City: State: Country:  City: State: Country:  Yes No Unknown	ZIP:  ZIP:  Total Time/Cycles On Part  Hours  Cycles  Time Since This Part Inspected/Overhauled			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Widdle Initial: Last Name:  Was there Mechanical Malfunction/Failure (If yes, list the name of the part, manufacturer, part)	City: State: Country:  City: State: Country:  State: Country:  P	ZIP:  ZIP:  Total Time/Cycles On Part  Hours  Cycles  Time Since This Part Inspected/Overhauled			
Registered Owner of Other Aircraft  First Name: Middle Initial: Last Name: Pilot of Other Aircraft  First Name: Middle Initial: Last Name: Was there Mechanical Malfunction/Failure (If yes, list the name of the part, manufacturer, part)	City:	Destroyed   Minor   None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:  Middle Initial:  Last Name:  Was there Mechanical Malfunction/Failure (If yes, list the name of the part, manufacturer, part)  Aircraft Damage  None  Substantial  Minot  Destroyed	City:	ZIP:  ZIP:  Total Time/Cycles On Part  Hours  Cycles  Time Since This Part Inspected/Overhauled			

Description of Damage to Aircr	aft and Ot	her Property (use a	dditional sheet if i	iecessary)			
Aircraft: Left landing gear collapsed wings are in tact. Engine is Intact a airframe aft of the firewall may have	under lead nd one pro	ing edge of wing and	l right landing ge	ar collapsed outv	vard. The spar appear to be ok	appears to be ay, and some	e fine on left wing. The minor damage to the
	N (Hutter)						
Airport Identifier: 15F		·		Distance Fron	n Airport Cen	ter:	SM
Airport Name: Haskell				Direction Fro	m Alrport:		degrees MAG
Preximity to Airport Off Al	τροτι/Airsuij	p 🛮 On Airport 📗	On Airstrip	Airport Eleva	ition:		ft. MSL
Approach Segment (Select one)	_			_			_
☐ On Instrument Approach ☐ Crosswind	✓ Landing □ Downwi		lase leg ow Approach		borted Landing		Go Around
IFR Approach (Check all that app	(b)	French	r=1 =	VFR Approac	h (Check all th	- · · · —	
None		MLS LDA ASR Visual Contact Circling	☐ Practice ☐ GPS ☐ Loran ☐ Unknown	☐ None ☐ Traffic Patter ☐ Straight-In ☐ Valley/Terrai ☐ Go Around ☑ Full Stop		To To	top and Go ouch and Go rmulated Forced Landing orced Landing recautionary Landing nknown
Runway Information					-	_	(Check all that apply)
Runway ID: 18 (L/R/C) L	ength:	3,400 ft Width:	75 ft	☑ Dry Holes		-Compacted -Crusted	<ul><li>☐ Water-Caltn</li><li>☐ Water-Choppy</li></ul>
Runway/Landing Surface (Chec	ck all that ap	oply)		Ice Covered	☐ Snow	-Dry	☐ Water-Glassy
	☐ Macad ☐ Metal/ ☐ Snow		Wn	Rough Rubber Depos Slush Coveres			☐ Wet ☐ Unknown
The state of the s							
Last Departure Point		Time of Departure	Destination			Type Fligh	t Plan Filed
Airport ID: KDUC		m 11-55	Airport ID:	(BPG	_	Z None	☐ VFR/IFR
City: Duncan		Time: 11:55	City: Big St	orings		Company Military	
State: OK	1	Time Zone: CDT	State: TX			☐ VFR	
Country: USA			Country: US	<u> </u>		Activated?	Yes No
Type of ATC Clearance/Service	(Check all	that apply)					
□ VFR. □ IFR		□ vr	ecial IFR R On Top		R Flight Follow affic Advisory	ng	Cruise Unknown/NA
Airspace where the accident/inc							
Class A Z Class Class B Class	ss E ss G		rohibited Area estricted Area		☐ Jet Training☐ TRSA	Area	☐ Special ☐ Air Traffic Control Area
Class C Den	no Area		filitary Operations		□ FAR 93		Unknown
	ming Area		irport Advisory A	rea			
Aircraft Load Description (Che.	<i>ck an that ap</i> ving Glider		arachutists		☐ Livestock		
Passengers Tow	ving Banner	□ w	/ater		Unknown		
	er External	MARKET TO A SECURITION OF SECU	hemical/Fertilizer	Seeds			
HUEL & SENING BY INFO				<b>国际选择制度</b>	HAST HARRE		<b>自己的证据,但不是一个人的证明</b>
Fuel on Board at Last Takeoff (convert from pounds, as necessary)		Fuel Type	☐ 11 <i>5</i> /145	☐ JP3	□ Only	er, specify	
24	Tallans	100 Low Lead	🔲 Jet A	□ JP4	ي نام ال	or, apoenty	
	Gallons ————————————————————————————————————	100/130	Automotive	; □ JP5			

Other Services, if Any, Prior to Departure

Added 3qts of Aeroshell 100 oil

Verification of the second										
Was an emergency evacuation					No					
Method of Exit - Describe ho	w the occupants	xited and	now m	any occupants e	vacuated each	location				
•		6	:							
	enamentaria de la composition della composition									
Weather Observation Facilit			Sour	ce of Weather 1	nformation		Method of Briefing (Check all that apply)			
Facility ID:		_		e <i>k all that apply)</i> ational Weather Se	rvice	Company	In Person			
Observation Time:			🔲 Fl	ight Service Statio	D.	Military	Teletype			
Time Zone:			$  \prod_{A_1}^{T}$	V/Radio utomated Report		☑ Internet ☐ Unknown	✓ Telephone/Computer  Aircraft Radio			
Distance from Accident Site:			<b>☑</b> c	ommercial Weathe	r Service (DUA'		TV/Radio Unknown			
Direction from Accident Site:		ees MAG	¥ 2_¥.	4 Candistan			Visibility			
Briefing Type/Completeness	□ Abbreviate	ad	Ligh	t Condition awn 🔲 D	usk	☐ Dark Night	-			
☐ Full ☐ Partial / Limited By Pilot	Unknown		<b>Z</b> D D			Bright Night	15_ miles			
Partial / Limited By Briefer	Not Pertin					☐ Not Reported				
Sky/Lowest Cloud Condition	l l Thin Broken	Ceiling None	(alaar)	Пон	wcured	Restriction to Visibility  None	y (Check an inai appiy) ☐ Fog			
Clear Z Few	Thin Overcast	☐ Broke		☐ In-	definite	Blowing Dust	Ground Fog			
Partial Obscuration	Unknown	Overc	ast	□ Uı	known	☐ Blowing Sand ☐ Blowing Snow	Haze Ice Fog			
Scattered  Lowest Cloud Condition Hei		Ceiling	Height			Blowing Spray	Smoke			
Towest Cloud Condition Her	ft AGL	Clining	noigu.		ft AGL	☐ Dust	☐ Unknown			
Wind Direction	Wind Speed	-l		Wind Gusts		Type of Turbulence (C	heck all that apply)			
✓ Indicated:	Velocity:	KTS		Velocity:	KTS	☑ None ☐ In Cl ☐ Clear Air ☐ Vicin	louds nity of Thunderstorm			
180 degrees MAG	-or-					Severity of Turbulence	·			
☐ Variable	Calm Light and Vari	able		☐ Gusting ☐ Not Gusting		Extreme Mod				
variable	J. Digitalia					Severe Moderate Chop				
NOTAMs (D, L and FDC	), AIRMETs, S	IGMETs	, PIR	EPs in effect a	t the time of	the accident/incident				
	1 1.	ing Forec	99+			Type of Precipitati	On (Check all that apply)			
Temperature:(C)	19	Amoui	ıt		Туре	1	Drizzle			
or(F)	17	None Trace		Moderate Severe	☐ Rime ☐ Clear		Ice Pellets Spow Pellets			
Altimeter Setting:	n. HG	Light	<u></u> ,		Mixed	☐ Hail	Snow Grains			
or1	T	ing Actua	·I	<u></u>	<del></del>	Rain Showers  Freezing Rain	☐ Ice Crystals ☐ Ice Pellets Shower			
Density Altitude:	"	Amour	st		Туре		Freezing Drizzle			
Dew Point:(C) or(F)		None Trace		Moderate Severe	☐ Rime ☐ Clear	Intensity of Precipi	tation			
· ,		Light			Mixed		oderate			
	i					-				

IPEONIA MEDANAMENTALISTA DE LA COMPANIA DE LA COMPANIA DE LA CONTRACTORIA DE LA CONTRACTORIA DE LA COMPANIA DE											
Pilot "A" Responsibilities at the Time of Accident/Incident    Pilot   Co-Pilot   Student Pilot   Flight Instructor   Check Pilot   Flight Engineer   Other Flight Crew											
	Student Pilot	Flight	instructor L	_ Check Pilot		t Engineer	□ Omer	Flight Clew			
Pilot "A" Identification					Eoron	+ Lako					
First Name:         Richard         City:         Forest Lake           Middle Initial:         State:         MN         ZIP:         55025											
Last Name: Ashbach Country: USA											
Age at time of Accident/Incident: 52 Date of Birth: Certificate Number:											
1160 at 11110 01 710010011011101			mm/dd/y	איני							
Degree of Injury	Seat Occup	_		T	t Belt	F-7	<b></b>	Shoulder 1			
☑ None ☐ Fatal ☐ Minor ☐ Unknown	☐ Left ☐ Right	Front Rear	Unkao				□ No	Used Available	✓ Yes	□ No	
☐ Minor     ☐ Unknown     ☐ Right     ☑ Rear     ☐ Available     ☐ Yes     ☐ No     Available     ☐ Yes     ☐ No											
Pllot Certificate(s) (Check a	ll that apply)			_		_	_		_		
☐ None ☐ Stud ☑ Private ☐ Flig	lent ht Instructor	Rect	reational +	Conumero Airline To			] Flight Engi ] U.S. Milita		Foreign [		
	Medical Certifi					tificate Vi			ast Medic	al	
* ^ -		Class 3		I		itations/wa	-		/2009		
7 Other	Class 1	Driver's Lic	ense (Sport Pilo	,		tions/waive	rs				
Unkno\vn	Class 2	_ Unknown			Inknown			mmidl	<b>4</b> 595957		
Medical Certificate Limitat	ions										
Must possess glasses for near vision	on .										
Medical Certificate Waiver	<u> </u>										
					•						
Date of Last Flight Review or Equivalent, Including		1 -	it Review Air	eraft							
FAR 121/135 Checks:	01/12/2008	1	Cessna								
	mm/dd/yyyy		ı: <u>175A</u>	<u></u>					·····		
Airplane Rating(s)	Other Aircra	9.1		ient Rating(s) U that apply)	)		r Rating(s)				
(Check all that apply)	None	арріу)	Z None	2.2.		(Check all None	інат арріу)	_	Instrument	Airolane	
Single-Engine Land	Airship		Airpla 🔲	unc		Airplan	e Single-Eng	ine 🗀	Instrument		
☐ Single-Engine Sea ☐ Multiengine Land	☐ Free Balloot ☐ Glider	3	Helice Power	opter red Lift	1	☐ Aimlan ☐ Gyropl:	e Multi-Engi	пе 🗀	] Helicopter ] Glider		
☐ Multiengine Sea	Gyroplane			igu Lik		Powere	d Lift		Sport		
	☐ Helicopter☐ Powered Lif	<b>.</b>							٠		
Type Ratings	T 10 MOTER TH			<del> </del>		Student I	Indorseme	nts (Include	dates)		
- A Extra non-complex								,			
•											
	· <del>1</del>		Airplane		T	- ·				I	
Flight Time (enter appropriate		This Make	Single	Airplane	Wr-t.		rument	D-to	CHA	Lighter	
number of hours in each box)	Aircraft 800	& Model 60	Engine 800	Multiengine	Night 8	Actual	Simulated	Rotorcraft	Glider	Than Air	
Total Time Pilot in Command (PIC)	750	60	75D		8	<del> </del>				<del> </del>	
Time as Instructor	1 '3				<u> </u>						
This Make/Model										77.00	
Last 90 Døys			A The second decision in the second second								
Last 30 Days	25	20									
Last 24 Hours	5	5									

Piler   Class 1   Driver's License (Sport Pilot only)   Without limitations/valvers   Instrument   Instrume	☐ Pilot ☐ Co-Pilot				Sec. 1991 (1991)			行和批析的指言		property and property and	TATOLICA CONTRACTOR
First Name:   State:					ck Pilot 🗔	l Flicht F	Ingineer	C Other	Flight Crew		
First Name:   City:   State:   ZIII:		Student Pilot		Stractor LI Che	CK FILOL	Lugari	sugmee:		I IIgiat CICW		
Age at time of Accident/Incident:	Pilot "B" Identification										
Age at time of Accident/Incident:	First Name:				City: _			· · · · · · · · · · · · · · · · · · ·			
Age at time of Accident/Incident:	Middle Initial:				State: _		<u> </u>	IP:			
Degree of Injury											
Degree of Injury	Age at time of Accident/Inci	dent:	Date of Birt	h:	Certific	cate Nu	mber:				
Paid		T	<u> </u>	mm/dd/yyyy	Sant Da	1+			Shoulder I	Harness	
Minor   Unknown   Sight   Rev   Available   Yes   No   Available   Yes   Yes   No   Available   Yes   Yes   No   Available   Yes   Yes   No   Available   Yes	At -			Helmovan			lv <sub>eo</sub> I	T No			□ Nn
Serious				Chanown	3						
None   Student		Center									
Private   Pight Instructor   Sport   Alfilm Transport   U.S. Military	Pilot Certificate(s) (Check of	ill that opply)									
Principal Occupation   None   Class 3   Class 3   Class 3   Class 1   Class 1   Class 1   Class 2   Class		dent								Foreign	
Pilot   Class 1   Driver's License (Sport Pilot only)   With huntinitations/waivers   mm/dd/yyyy	,			<u> </u>							
Collect   Coll	Principal Occupation								Date of 1	Last Medic	au
College   Certificate Limitations	☐ Pilot			ea (Sport Pilot palv							
Medical Certificate Limitations    Medical Certificate Waivers		Class 2	Unknown	se (Sport r not omy	Unkn		EG Walfes	•	mm/dd	<i>איניני</i>	
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:	United by the second se										
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mm/dd/yyyy	Medical Certificate Limita	tions									
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mm/dd/yyyy											
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mm/dd/yyyy											
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mm/dd/yyyy											
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mm/dd/yyyy	Medical Certificate Waiver	· · · · · · · · · · · · · · · · · · ·		···							
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mindddyppy	Medical Coldinate it allo										
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:    mindddyppy											
Make:											
Make:	1										
Make:											
Make:   Model:   Mo	Data of Last Flight Baylaw		Flight I	Review Aircraft						- www.	
Airplane Rating(s)  Other Aircraft Rating(s)  (Check all that apply)  (Airplane Supplements (Picle of Airplane Supplement			1 -								Mar
Check all that apply	Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:		Make:_								
None	or Equivalent, Including	mm/dd/yyyy	Make: _ Model: _			1					
Single-Engine Land	or Equivalent, Including FAR 121/135 Checks:  Airplane Rating(s)	mm/dd/yyyy Other Aircraf	Make: Model: it Rating(s)	Instrument l	Rating(s)	In	structor	Rating(s)			
Single-Engine Sea   Free Balloon   Helicopter   Gyroplane   Glider   Powered Lift   Gyroplane   Glider   Powered Lift   Fowered Lift   Gyroplane   Glider   Powered Lift   Sport    Type Ratings   Student Endorsements (Include dates)    Flight Time (enter appropriate number of hours in each box)   All Aircraft   All Aircraft   Air	or Equivalent, Including FAR 121/135 Checks:  Airplane Rating(s) (Check all that apply)	mm/dd/yyyy Other Aircraf (Check all that a	Make: Model: it Rating(s)	Instrument l	Rating(s)	In:	structor heck all th	Rating(s)			
Multiengine Land	or Equivalent, Including FAR 121/135 Checks:  Airplane Rating(s) (Check all that apply)	mm/dd/yyyy  Other Aircraft (Check all that a	Make: Model: it Rating(s)	Instrument I	Rating(s)	In:	structor heck all th None	Rating(s) at apply)		Instrument A	Airplane
Helicopter   Powered Lift	or Equivalent, Including FAR 121/135 Checks:  Airplane Rating(s) (Check all that apply)  None Single-Engine Land	mm/dd/yyyy  Other Aircraft (Check all that at None Airship	Make:Model:t Rating(s)	Instrument I (Check all that	Rating(s)	In: (C)	structor heck all th None Airplane	Rating(s) at apply) Single-Engin	ne 📙	Instrument A	Airplane Helicopter
Type Ratings  Student Endorsements (Include dates)  Flight Time (enter appropriate number of hours in each box)  All Aircraft & Model Engine Multiengine Night Actual Simulated Rotorcraft Glider Than Air Potal Time  Pilot in Command (PIC)	or Equivalent, Including FAR 121/135 Checks:  Airplane Rating(s) (Check all that apply)  None Single-Engine Land Multiengine Land Multiengine Land	mm/dd/yyyy  Other Aircraft (Check all that and the control of the	Make:Model:t Rating(s)	Instrument I (Check all that  None Airplane Helicopter	Rating(s) apply;	In: (C,	structor heck all th None Airplane Airplane Gyroplan	Rating(s) at apply) Single-Engin Multi-Engine	ne 🔲	Instrument A Instrument H Helicopter Glider	Airplanc Helicopter
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## NARRATIVE HISTORY OF FLIGHT (Flame open public line)

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 time and point of departure, intended destination, and services obtained.

Departed KDUC at approximately 11:55am CDT with weather and flight operations enroute normal. I entered left base for 18 based on other traffic and the windsock. The wind was light and variable and mostly out of the south.

The transition of altitude on final to the threshhold was normal and when over the threshhold the aircraft was lined up with the runway. The wheel landing was fine with no change of attitude. Once stabilized, I removed the remaining power and used rudder pedals to maintain runway heading. As the tailwheel lowered to the ground I felt the tail going to the left and applied full left rudder and brake. The aircraft did not straighten out and continued to veer off to the right. Just after leaving the runway I applied the right brake to slow down the airplane and the right brake grabbed harder than the left and spun the aircraft around.

## RECOMMERIDATION (now could this accreminates and nave been presented)

Operator/Owner Safety Recommendation

With the slow speed and the aircraft heading to the right side of the runway and a ditch beyond I felt it best to use the brake to try and stop the ground loop. If not successful, then I would slow the aircraft down as much as possible to reduce impact of occupants and aircraft.

I felt giving it power at the speed, aircraft attitude, and direction of travel would be quite risky if the heading wouldn't change immediately a greater impact would have occurred for the occupante and the aircraft.

If not stabilized on approach and landing I would have given power and aborted the landing.

ADDITIONAL IN							
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