## 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

BASIC INFO	RMATION											
Accident/Incident Location  Nearest City/Place: Atlanta/ KATL airport  ZIP: 30354 Country: USA  State: Georgia					e: Georgia	Date/Time           Date:         06/11/2009         Local Time:         1840           mm/dd/yyyy           Time Zone:         Eastern						
Latitude: 33:38:08	8 N (dd:mm:ss	N/S) Longitude: <u>84</u>	:25:22 W	_ (ddc	d:mm:ss E/W)			,	ime Zone:			
Phase of Operation         ☐ Standing       ☐ Takeoff (incl. initial climb)       ☐ Cruise       ☐ Hover         ☐ Taxi       ☐ Climb       ☐ Maneuvering       ☐ Other         ☐ Descent       ☑ Landing       ☑ Approach       ☐ Unknown						Collision with Other Aircraft  ☐ Midair ☐ On-ground ☐ None  Altitude of In-Flight Occurrence  2,700 ft MSL						
AIRCRAFT	<u>NFORMATI</u>	ON										
Manufacturer: <u>E</u>							Max Gross W	Veight:	53,000 lbs			
Model: <u>CL-600-</u>							Weight at Ti	ne of Accident/	ncident:	41,4	106 lbs	
Serial Number:		<del></del>				- 1	Location of C	Center of Gravit				
Registration Nur	nber: N857AS		Amateur-	built	Yes 🗹 No	)	-or-			or		
Category of Airc	eraft Type o	of Airworthiness	Certificate		Number of 6	 C			ling Gear	Retrac		
	1	all that apply)			Number of S	эеа	nts:	<del></del>	Ü	nal landing ge		
Balloon Blimp/Dirigible	Standa				If Large Aircra	aft,	how many seats		iguration that			
Glider	Nor Util		estricted imited		Flight Cre	ew:		2 🛛	Tricycle	☐ Ta	ailwheel	
☐ Gyrocraft ☐ Helicopter	Acr	obatic 🔲 Pi	ovisional		Cabin Cre	ew:			Amphibian		igh Skid	
Powered lift	☑ Tran		xperimental pecial Fligh		Passenger	rs: _			Emergency Float	oat 🔲 SI		
Ultralight Unknown			ight Sport	Sport Hull Ski/Wheel								
Type of Mainten	ance Program		I oct In	enoot	ion Tyme	Date Last Inspection: 06/01/2009					<del></del> -	
Annual	ance i rogram			Last Inspection Type ☐ 100 Hour ☐ Continuous Airy			(11)					
Conditional (Am			AAIP		Condition	nal l	Inspection					
☐ Manufacturer's l☐ Other Approved	Inspection Program	m um (AAIP)	Annual Unknown				Airframe Total Time: 22,266 hrs					
Continuous Airv Other, specify:						hours measu	•	<i>one)</i> Fime of Accid	ent/Incident			
IFR Equipped			Stall W	Stall Warning System Installed			Type of Fire E					
	Unknown		Yes No Unknown			<u> </u>						
			]	✓ Specify C					oit - Portable	Halon -1211	Water	
****				_				and l	lalon - 1211	Extinguisher	s, #	
ELT Installed	ELT Acti		ELT M	anufa	cturer: Artex							
Yes No	Yes Y		Model/S	Series	: 110-4 Part #	# 4 <u>53-</u> 0152						
ELT Aided in Lo	ocating Accider	t/Incident	Serial N	umb	er: <u>60366</u>							
Yes No			1	Туре	: Alkaline	<u>Saline</u> <u>Battery Exp. Date: 09/18/2009</u>						
Engine Type		Reciprocation System Type		P	ropeller							
Reciprocating Turbo Shaft	☐ Turbo Jet  ✓ Turbo Fan	Carburetor			Fixed Pitch	Fixed Pitch Manufacturer:						
Turbo Prop	Unknown	☐ Fuel Inject	ed		Controllable Pi	itch						
		1			<u> </u>			Engine Rated				
							Doto	Power Measured as (check one)	Total	Time Since	Time Since	
Engine Manufacture					Date of Mfg.	Horsepower	or Time	Inspection	Overhaul			
Eng. 1 General Electr	anufacturer	Model/Series CF34-3B2		Seria 872456	al Number		mm/dd/yyyy . 10/18/1998	☑ lbs of Thrust	(hours) 29 21,788	(hours) 975	(hours) 975	
Eng. 2 General Elect		CF34-3B2		950389			04/25/2005		29 6,676	<del></del>	6,676	
Eng. 3		<u>†</u>	-		· · · · · · · · · · · · · · · · · · ·		+			-		
Eng. 4												

OWNER/OPERATOR INFO	RMATION										
Registered Aircraft Owner		Owner Address									
Name: US Bank NA Trustee		City: 1 Federal St.									
Fractional Ownership Aircraft:	Yes ☑ No	State: MA ZIP: 02110 Country: USA									
Operator of Aircraft Same	e As Registered Owner	Operator Address Same As Registered Owner									
Name: Atlantic Southeast Airlines			City: Atlanta								
Doing Business As: Atlantic Southe		0200		IP: <u>30354</u>							
Air Carrier/Operator Designator (4 C		0290	Country: USA	P. 1.4							
Regulation Flight Conducted Unde	r AR 91 Special Flight	Public Use (select type)	Revenue Sightseeing F	iignt ✓ No							
☐ FAR 103 ☐ FAR 133 ☐ N  ☑ FAR 121 ☐ FAR 135 ☐ N	on-US, Commercial on-US, Non-commercial rmed Forces	☐ Federal ☐ State ☐ Local ☐ Unknown	Air Medical Flight ☐ Yes	☑ No							
Purpose of Flight for FAR 91, 103, 133, 137 (Select one)		e <b>Operation</b> 121, 125, 129, 135 (Select one)	Type of Commercial O (Check all that apply)	perating Certificate Held							
Personal Business Executive/Corporate Other Work Use Instructional Ferry Positioning Aerial Application	□ Non-S	uled or Commuter cheduled or Air Taxi  or International stic	None   Flag Carrier Operating Certificate (121)   Supplemental   Air Cargo   Foreign Air Carriers (129)   Commuter Air Carrier (135)   On-Demand Air Taxi (135)   Large Helicopter (127)								
Aerial Observation	Cargo O <sub>I</sub>		Rotorcraft External Loa	d (133)							
☐ Air Drop ☐ Air Race / Show	Passer	nger/Cargo ngerHow many?	or -								
Flight Test	│ □ Cargo	lbs	Agricultural Aircraft (137)								
☐ Public Use ☐ Unknown	☐ Mail		Other Operator of Large Aircraft								
OTHER AIRCRAFT - COL	ISION (If air or oro	und collision occurred complete t	 this section for other airc	am							
			D	amage to Other Aircraft							
			<u>L</u>	Destroyed Minor Substantial None							
Registered Owner of Other Aircraft											
First Name:		City:									
Middle Initial:			ZIP:								
Last Name:		Country:									
Pilot of Other Aircraft		a.									
First Name:Middle Initial:		City: State:	ZIP:								
Last Name:		Country:									
MECHANICAL MALFUNCT	TION/FAILURE (I	f more space is needed, continue o	on separate sheet)								
Was there Mechanical Malfunction (If yes, list the name of the part, manufact)	/Failure?  Yes	] No 🔲 Unknown		Total Time/Cycles On Part							
There was a failure of the left main land		• /	normal and alternate								
extension methods. The aircraft was pl	aced on jacks and the s	ystem then operated normally. At thi	s point we cannot identify	Hours							
where the failure occurred. Time/cycles	s are not included as we	are unable to determine which part t	alled.	Cycles							
				Time Since This Part Inspected/Overhauled							
			Hours								
		DAMAGE TO AIRCRAFT AND OTHER PROPERTY									
DAMAGE TO AIRCRAFT A	ND OTHER PRO	<b>IPERTY</b>									
DAMAGE TO AIRCRAFT A Aircraft Damage	ND OTHER PRO	PERTY	Aircraft Explosion								

Description of Damage to Aircraft and Other Property (use additional sheet if necessary)									
Due to contact with runway surface, there	was damage to the main la	anding gear tire	es and the left outboard main who	eel. Both left wing flap panels and one					
flap actuator fairing sustained damaged and will be replaced. There is a minor scrape to the left wing near the tip.									
AIRPORT INFORMATION (IF	the accident/incident occ	curred on app	roach, takeoff or within 3 miles	of an airport, complete this section)					
Airport Identifier: KATL	and the state of t		Distance From Airport Cen						
Airport Name: Hartsfield-Jackson At	lanta International		Direction From Airport:						
Proximity to Airport  Off Airport/A		On Airstrip	Airport Elevation:	1,026 ft. MSL					
	issuip V On Amport	J On Ansurp	Airport Elevation:	it. Wist					
Approach Segment (Select one)  ☐ On Instrument Approach ☐ Lar	ding 🗆 n.	se leg	☐ Final	☐ Go Around					
		w Approach	Aborted Landing						
IFR Approach (Check all that apply)	takes -	* * -	VFR Approach (Check all th						
□ None □ PAR	☐ MLS	Practice	None	☐ Stop and Go					
☐ ADF/NDB ☐ Sidestep ☐ ILS	□ LDA □ ASR	☐ GPS ☐ Loran	☐ Traffic Pattern ☐ Straight-In	Touch and Go					
☐ VOR/TVOR ☐ Localizer Only	==	Unknown	Valley/Terrain Following	☐ Simulated Forced Landing☐ Forced Landing					
VOR/DME LOC-back cours			Go Around	Precautionary Landing					
TACAN RNAV	Circling		Full Stop	Unknown					
Runway Information	44.740 0	450 0		ng Surface (Check all that apply) 7-Compacted					
Runway ID: 27R (L/R/C) Length:	11,740_ft Width:	150_ft		-Crusted Water-Choppy					
Runway/Landing Surface (Check all th			☐ Ice Covered ☐ Snow						
·	facadam Water	m	Rough Snow Rubber Deposits Soft	∕-Wet ☐ Wet ☐ Unknown					
☐ Concrete ☐ Gravel ☐ Metal/Wood ☐ Unknown ☐ Rubber Deposits ☐ Soft ☐ Unknown ☐ Dirt ☐ Ice ☐ Snow ☐ Slush Covered ☐ Vegetation ☐ Unknown									
FLIGHT ITINERARY INFORM									
		Destination	1	Type Flight Plan Filed					
FLIGHT ITINERARY INFORM	Time of Departure	Destination Airport ID:		Type Flight Plan Filed  None  VFR/IFR					
FLIGHT ITINERARY INFORM Last Departure Point	ATION		KATL	Type Flight Plan Filed  ☐ None ☐ VFR/IFR ☐ Company VFR ☐ IFR					
FLIGHT ITINERARY INFORM Last Departure Point Airport ID: KCSG	Time of Departure	Airport ID:	KATLta	Type Flight Plan Filed  None  VFR/IFR					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus	Time of Departure	Airport ID: L	KATL ta rgia	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA	Time of Departure Time: 1705 Time Zone: Eastern	Airport ID:	KATL ta rgia	Type Flight Plan Filed					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec	Time of Departure Time: 1705 Time Zone: Eastern	Airport ID: L City: Atlant State: Geor Country: US	ta  rgia  GA  VFR Flight Follow	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec   None   Special VF   VFR	Time of Departure Time: 1705 Time Zone: Eastern  k all that apply)  R	Airport ID: L City: Atlant State: Geor Country: US	KATL ta rgia	Type Flight Plan Filed  ☐ None ☐ VFR/IFR ☐ Company VFR ☐ IFR ☐ Military VFR ☐ Unknown ☐ VFR Activated? ☐ Yes ☐ No					
ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Check of the Columbus)  We will be a service of the Columbus of	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: L City: Atlant State: Geor Country: US cial IFR Con Top	KATL ta  glia  SA  VFR Flight Follow  Traffic Advisory	Type Flight Plan Filed  None					
ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec   None   Special VF   VFR   IFR  Airspace where the accident/incident of Class A   Class E	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: L City: Atlant State: Geor Country: US cial IFR C On Top (pply) ohibited Area	KATL ta  gia  SA  VFR Flight Follow Traffic Advisory  Jet Training	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Cruise Unknown / NA					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec   None   Special VF   VFR   V   IFR  Airspace where the accident/incident of Class A   Class E   Class G   Class G   Class C   Demo Area	Time of Departure Time: 1705 Time Zone: Eastern  k all that apply) R	Airport ID: L City: Atlant State: Geor Country: US cial IFR t On Top ohibited Area estricted Area ilitary Operation	ta  rgia  SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA s Area (MOA)  FAR 93	Type Flight Plan Filed  None					
ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Check Control Check Check Control Check Control Check Control Check Control Check	Time of Departure Time: 1705 Time Zone: Eastern  k all that apply) R	Airport ID: L City: Atlant State: Geor Country: US cial IFR t On Top contibited Area estricted Area	ta  rgia  SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA s Area (MOA)  FAR 93	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Cruise Unknown / NA  Area Special Air Traffic Control Area					
FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Check of the color	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: L City: Atlant State: Geor Country: US cial IFR C On Top pply) ohibited Area stricted Area ilitary Operation rport Advisory A	KATL ta  gia  SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA s Area (MOA) FAR 93  Area	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Cruise Unknown / NA  Area Special Air Traffic Control Area					
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ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Check Composition)  VFR Special VFR  Airspace where the accident/incident of Class A Class E Class G Class G Class C Demo Area Class D Warning A  Aircraft Load Description (Check all to None Towing Glass C Towing Glass C Class C Check Class C Class C Check Class C Check Class C Class C Check Class C Check Class C Class C Class C Check Class C Class C Check Class C Class C Check Class C Check Class C Check Class C Class C Class C Class C Check Class C Class	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: L City: Atlant State: Geor Country: US cial IFR t On Top ohibited Area estricted Area ilitary Operations rport Advisory A	KATL ta  rgia  6A  VFR Flight Follow  Traffic Advisory  Jet Training  TRSA s Area (MOA) FAR 93  Area  Livestock  Unknown	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Cruise Unknown / NA  Area Special Air Traffic Control Area					
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FLIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec None Special VF IFR  Airspace where the accident/incident of Class A Class B Class G Class B Class G Class D Warning A  Aircraft Load Description (Check all the Company of Check all the Check all the Company of Check all the	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: LCity: Atlant State: Geor Country: US  sial IFR On Top  pply) ohibited Area stricted Area ilitary Operation rport Advisory A  rachutists ater hemical/Fertilizer	KATL ta  rgia SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA s Area (MOA) FAR 93  Area  Livestock Unknown  JP3 JP3 JP4	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Truise Unknown / NA  Area Special Air Traffic Control Area Unknown					
ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec   None   Special VF   IFR  Airspace where the accident/incident   Class A   Class G   Class G   Class G   Class G   Class G   Class D   Warning A   Aircraft Load Description (Check all the Impart of	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID:	KATL ta  rgia SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA FAR 93  Area  Livestock Unknown  r/Seeds	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Truise Unknown / NA  Area Special Air Traffic Control Area Unknown					
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ELIGHT ITINERARY INFORM  Last Departure Point  Airport ID: KCSG  City: Columbus  State: Georgia  Country: USA  Type of ATC Clearance/Service (Chec   None   Special VF   IFR  Airspace where the accident/incident   Class A   Class G   Class G   Class G   Class G   Class G   Class D   Warning A   Aircraft Load Description (Check all the Impart of	Time of Departure  Time: 1705  Time Zone: Eastern  k all that apply)  R	Airport ID: LCity: Atlant State: Geor Country: US  sial IFR On Top  pply) ohibited Area stricted Area ilitary Operation rport Advisory A  rachutists ater hemical/Fertilizer	KATL ta  rgia SA  VFR Flight Follow  Traffic Advisory  Jet Training TRSA s Area (MOA) FAR 93  Area  Livestock Unknown  JP3 JP3 JP4	Type Flight Plan Filed  None VFR/IFR Company VFR IFR Military VFR Unknown VFR Activated? Yes No  Truise Unknown / NA  Area Special Air Traffic Control Area Unknown					

<b>EVACUATION OF AIR</b>	RCRAFT			AM KA	Kadika.				
Was an emergency evacuation	on of the aircraft	performed <sup>e</sup>	? 7	Yes 🔲	No				
Method of Exit – Describe ho 2 passengers exited from the ga approximately 100 yards in front	alley service door, t		-	-				r. Passenge	ers assembled
WEATHER INFORMA	TION AT THE	- ACCID	ENT/IN	ICIDENT	SITE	W/47.			
WEATHER INFORMATION AT THE ACCID  Weather Observation Facility  Facility ID: KATL  Observation Time: 2152 GMT  Time Zone: Eastern  Distance from Accident Site: 0 NM  Direction from Accident Site: N/A degrees MAG			Source of Weather Information (Check all that apply)  National Weather Service Flight Service Station TV/Radio Automated Report Commercial Weather Service (DUATS)			ΓS)	Company Military Internet Unknown	Method of (Check all to   In Perso   Teletype ✓ Telephot ✓ Aircraft   TV/Radi   Unknow	hat apply) n n ne/Computer Radio
Briefing Type/Completeness  ✓ Full  ☐ Partial / Limited By Pilot ☐ Partial / Limited By Briefer	Abbreviate Unknown Not Pertine	ed	Light Co Dawn Day				Dark Night Bright Night Not Reported	Visibility 10	_miles
Sky/Lowest Cloud Condition  Clear Thin Broken  None ( Few Thin Overcast Partial Obscuration Unknown  Scattered			n Indefinite				None Blowing Dust Blowing Sand Blowing Snow Blowing Spray Dust	and Fog e Fog ke	
3,500	ft AGL					ו	Dust	Unk	nown
Wind Direction  ✓ Indicated: 300 degrees MAG  ✓ Variable	Wind Speed  Velocity: -or- Calm Light and Varia	5 KTS	Ve	ind Gusts clocity: Gusting Not Gusting	KTS	Se	verity of Turbulence Extreme Mode	ouds nity of Thunde	
NOTAMs (D, L and FDC) Attached on separate sheet	), AIRMETs, SI	GMETs,	PIREP	in effect at	the time of	the	accident/incident		
	in, HG MB	Amount None Trace Light Amount Amount	☐ Mod		Type		Rain Snow Hail Rain Showers Freezing Rain	on (Check all  Drizzle  Ice Pellets  Snow Pell  Snow Gra  Ice Crysta  Ice Pellets  Freezing I	ets ins ls Shower
<b>Dew Point:</b> (C) or(F)	1 🖺	None Trace Light	☐ Mod ☐ Seve		Rime Clear Mixed		Intensity of Precipi		Heavy

PILOT "A" INFORMATION										
Pilot "A" Responsibilities at						_	_	_		
	Student Pilot	Flight Ir	nstructor	Check Pilot	Fligh	nt Engineer	Other 1	Flight Crew		
Pilot "A" Identification										
First Name: Yngve			<u>,                                      </u>		: Orlan					
Middle Initial:					e: <u>FL</u>		ZIP: <u>3280</u>	1		
Last Name: Paulsen				Cou	ntry: US	SA				·
Age at time of Accident/Incident:35 Date of Birth: Certificate Number:										
Degree of Injury	Seat Occupied			Seat	Belt			Shoulder F	Iarness	
None  Fatal		Front	☐ Unknov	wn Used		_	□No	Used		□ No
☐ Minor ☐ Unknown ☐ Serious		☐ Rear ☐ Single		Avail	able	Z Yes	□ No	Available	<b>✓</b> Yes	□ No
Pilot Certificate(s) (Check all								<del>_</del>		
■ None ■ Stude		Recrea	ational	Commercia	al		Flight Engir	neer	Foreign	
	t Instructor	☐ Sport	according	✓ Airline Tra			U.S. Militar	у	r orongin	
Principal Occupation M	ledical Certificate	;		Med	ical Cer	tificate Va	lidity	Date of L	ast Medica	1
I 1100	7	ass 3				nitations/wai		03/12/	2009	
		river's Licer nknown	nse (Sport Pilot	only)	<sup>7</sup> ith limita nknown	tions/waiver	S	mm/dd		
Unknown	Class 2 Oi	ikilowii			IIKHOWH			- mini aq		
Medical Certificate Limitation	ons									
										ľ
Medical Certificate Waivers										
										ì
Date of Last Flight Review		Flight	Review Airc	raft						
or Equivalent, Including FAR 121/135 Checks:	04/16/2009	Make:	Canadair							
TAR 121/155 CHECKS.	mm/dd/yyyy	-   Model:	CL65-2B19	(SIM)						
Airplane Rating(s)	Other Aircraft R	ating(s)	Instrum	ent Rating(s)	<u>-</u> Ţ	Instructo	r Rating(s)		***************************************	
(Check all that apply)	(Check all that apply			l that apply)	ŀ	(Check all that apply)				
None	None		None Airpla		None Instrument Airplane					
Single-Engine Land Single-Engine Sea	Airship Free Balloon		Z Airpla	ne	ŀ	L Aurplan	e Single-Eng		Instrument I	Telicopter
Multiengine Land	Glider		Helico Power	opter red Lift	ĺ	Gyropla	e Multi-Engii ine		Helicopter Glider	
Multiengine Sea	Gyroplane		10			Powered	d Lift		Sport	
	Helicopter Powered Lift									
Type Ratings	rowered Litt					Student E	ndorsemer	nts (Include a	lates)	
CL65					1	Student L	ZIIGOI SCIIICI	its (include o	uicsy	
					1					
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Flight Time (enter appropriate number of hours in each box)		his Make k Model	Single Engine	Airplane Multiengine	Night	Actual	Simulated	Rotorcraft	Glider	Lighter Than Air
Total Time	4,200	2,101			- 1-6-44	. secan				
Pilot in Command (PIC)	88	88		88		1				
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This Make/Model			To Have	38-29039						7. 7. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12
Last 90 Days	88	88		88						
	1001	001		001		ŀ		1	1	
Last 30 Days	20	20		20		-			And the sign	

PILOT "B" INFORMATION										
Pilot "B" Responsibilities at ☐ Pilot ☑ Co-Pilot		ent/Incid		Check Pilot	☐ Flight	Engineer	Other 1	Flight Crew		
Pilot "B" Identification		_		hand a remark.						
First Name: Michael Middle Initial: Last Name: Aguzino		_		State	: <u>Orland</u> e: <u>FL</u> ntry: <u>US</u>	Z	IP: <u>32835</u>	<b>3</b>		
Age at time of Accident/Incident: Date of Birth: Certificate Number: Certificate Number:										
Degree of Injury  ✓ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious	Right 🗍	Front Rear Single	Unknow	Seat Used Avail			] No ] No	Shoulder H Used Available		□ No □ No
Pilot Certificate(s) (Check all that apply)  □ None □ Student □ Recreational ▼ Commercial □ Flight Engineer □ Foreign										
	t Instructor	Sport		Airline Tra			U.S. Militar		ast Madisa	
☑ Pilot ☐ Other	Medical Certificate           None         ☐ Class 1           ☐ Class 1         ☐ Dri           ☐ Class 2         ☐ Uni	ver's Lice	nse (Sport Pilot	t only)	ithout limi	ificate Val tations/waiv ons/waivers	vers	08/12/20 mm/dd/		l
Medical Certificate Limitati	Medical Certificate Limitations									
Medical Certificate Waivers										
Date of Last Flight Review		Flight	Review Air	craft		<del></del>				_
or Equivalent, Including FAR 121/135 Checks:	03/19/2009	Make:	Canadair							
	mm/dd/yyyy	Model	: CL65-2B19	9 (SIM)						
Airplane Rating(s) (Check all that apply)  None Single-Engine Land Single-Engine Sea Multiengine Land Multiengine Sca	Other Aircraft Ra (Check all that apply) None Airship Free Balloon Glider Gyroplane Helicopter Powered Lift			opter		Instructor Rating(s)  (Check all that apply)  None Instrument Airpla Airplane Single-Engine Airplane Multi-Engine Gyroplane Powered Lift  Instrument Helico Glider Glider Sport				
Type Ratings					S	tudent En	dorsemen	t <b>s</b> (Include do	ites)	
CL65 (SIC Only)				<u></u>		<del>-</del>		<b></b>		
Flight Time (enter appropriate number of hours in each box)	1	is Make Model	Airplane Single Engine	Airplane Multiengine	Night	Instr Actual	ument Simulated	Rotorcraft	Glider	Lighter Than Air
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Pilot in Command (PIC)										
Time as Instructor										1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
This Make/Model	221	804			_					
Last 90 Days Last 30 Days	88	221 88		221 88		<u> </u>				
Last 24 Hours	8	8	,	8						<del>-</del>

ADDITIONAL FLIGHT CREW MEMBERS (Exclusive of cabin attendants, complete the following information)									
Pilot Name and Address						Degree of	Injury		
First Name:		City:				None	☐ Fatal		
Middle Initial:		State:	ZIP:			☐ Minor ☐ Serious	Unknown		
Last Name:		Country:	<del></del>	_		Scrious			
Pilot Certificate(s) (Check all that						Seat Occu	•		
None Student	Recreational Sport	Commercial	Flight Engineer	Foreign		☐ Left ☐ Right	☐ Front ☐ Rear		
Private Flight Instructor	Sport	Airline Transport	U.S. Military ime at the Time			Center	Single		
Type Rating/Endorsement for Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accider		hrs			Unknown		
<u> </u>			<u> </u>		1101/92		·• •		
Pilot Name and Address						Degree of	· ·		
First Name:		City:	ZIP:			☐ None ☐ Minor	☐ Fatal ☐ Unknown		
Middle Initial: Last Name:		State:	_ ZIP:		l	Serious	C. Cimilo VIII		
Pilot Certificate(s) (Check all that	t applul			<del></del>		Seat Occu			
□ None □ Student	Recreational	Commercial	Flight Engineer	Foreign		Left	Front		
Private Flight Instructor	Sport	Airline Transport	U.S. Military	L Torcign		Right	Rear		
Type Rating/Endorsement for		Total Flight T	ime at the Time			Center	☐ Single ☐ Unknown		
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accider	nt/Incident:	hrs			Unknown		
Pilot Name and Address	<u> </u>	<u> </u>	<u> 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 </u>	<u> </u>		Degree of	Injury		
First Name:		City	<del></del>			☐ None	Fatal		
Middle Initial:		State:	ZIP:			Minor	☐ Unknown		
Last Name:		Country:	- · · · · · - <del></del>	_		☐ Serious			
Pilot Certificate(s) (Check all that	apply)					Seat Occu	pied		
☐ None ☐ Student	Recreational	Commercial	☐ Flight Engineer	☐ Foreign		Left	Front		
Private Flight Instructor	Sport	Airline Transport	U.S. Military			☐ Right ☐ Center	☐ Rear ☐ Single		
Type Rating/Endorsement for Accident/Incident Aircraft?		Total Flight T	ime at the Time	1		Center	Unknown		
Accident/Incident Ancian:	Yes No	of this Acciden	nt/Incident:	hrs					
PASSENGER(S) / OTHER					essai				
							inry own		
PASSENGER(S) / OTHER				te sheet if nec			atal atal spiny linor ijury o Injury		
PASSENGER(S) / OTHER  Name and Address		(Include flight attenda	nts; continue on separa		Crew Noil-		Fatal Serious Nimor Injury No Injury Unknown		
PASSENGER(S) / OTHER  Name and Address  First Name: Curtis		(Include flight attenda	nts; continue on separa	te sheet if nec	Crew Non-	Revenue Revenue Non- Occupant	_		
PASSENGER(S) / OTHER  Name and Address  First Name: Curtis  Middle Initial:		(Include flight attenda	nts; continue on separa	te sheet if nec	Crew Non-	Revenue Revenue Non- Occupant	Fatal   Serious   Injury   Minor   Injury   Mo Injur		
PASSENGER(S) / OTHER  Name and Address  First Name: Curtis Middle Initial: Last Name: Bartley		City: Columbia State: SC Country: United	nts; continue on separa	te sheet if nec	Crew Non-	Revenue Revenue Non- Occupant	_		
PASSENGER(S) / OTHER  Name and Address  First Name: Curtis Middle Initial: Last Name: Bartley  First Name: William		City: Columbia State: SC Country: United City: Killean	nts; continue on separa  R ZIP: 29229 I States	te sheet if nec	Crew	Revenue  Revenue  Non- Occupant			
Name and Address  First Name: Curtis Middle Initial: Last Name: Bartley  First Name: William Middle Initial: H		City: Columbia State: SC Country: United City: Killean State: Texas	a ZIP: 29229	te sheet if nec	Crew	Revenue  Revenue  Non- Occupant	_		
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Name and Address  First Name: Curtis Middle Initial: Last Name: Bartley  First Name: William Middle Initial: H Last Name: Brady  First Name: Ian Middle Initial: J Last Name: Clfton  First Name: Demetra Middle Initial: A Last Name: Denmon		City: Columbia State: SC Country: United City: Killean State: Texas Country: United City: Denver State: Colorade Country: United City: Country: United	ZIP: 76542  J States  ZIP: 80212  J States	te sheet if nec		Revenue			
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## 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 time and point of departure, intended destination, and services obtained.

ASQ Flight 5414 departed KCSG at 1705 EDT on 6/11/09 bound for KATL. The aircraft had previously flown from KATL to KCSG. In KCSG the aircraft was refueled and passengers and bags were unloaded and then loaded for the next leg. The flight proceeded normally until on the final approach into KATL.

On arrival into the KATL area, the crew was told to expect a visual approach to runway 27L, which they briefed and set up for. on arrival over the final approach fix, the first officer, who was the pilot flying, called for the gear down, flaps 30 and landing checklist. The nose and right main gear extended normally, but they received a gear disagree message and the left main gear was not shown down and locked. At this point the captain called for a go-around and informed the ATC tower of their difficulty. The tower then provided vectors for a box pattern while the crew performed the abnormal checklist.

At this point the crew performed the abnormal checklist for a gear disagree message. In the course of running the checklist, the gear was selected down by both the normal and alternate extension methods. In both cases the nose and right main indicated down and locked, but they continued to get a gear disagree message for the left main gear. Upon completion of the checklist, the crew was uncertain if the gear was in fact not down or if they had an indication problem. An emergency was declared with ATC and the crew requested a visual approach to runway 27R. After intercepting the final approach course and while approximately 10 to 15 miles from the airport, ATC asked an AirTran flight that was on a parallel approach to see if they could visually identify the gear position. The crew of that flight verified that the left main gear was not extended fully.

The captain of flight 5415 called for another go-around and when that was completed, told the flight attendant to prepare the passengers for an emergency landing and evacuation. The flight attendant had been kept informed of the events and he and the captain reviewed their coordination procedures. The crew then ran the checklist for the Landing Gear Up/Unsafe Landing Procedure.

The tower requested the crew to land on runway 28 to minimize impact to the airport operation. The captain refused and requested runway 27R. This decision was due to the fact that 27R is the longest runway and the fact that portions of runway 28 are bridges over multilane highways and the captain didn't know whether he would be able to keep the aircraft on the runway.

A visual approach was subsequently performed to runway 27R. The captain took over the pilot flying duties for the approach and intentionally landed approximately 3,600' down the runway in order to touchdown past a ravine located off the left side of the first part of the runway. The aircraft landed on the center line and the left wing was held up as long as possible. The aircraft veered left after the left wing came down and the aircraft departed the runway at slow speed, coming to rest in the grass just off the left side of the runway. The passengers and crew then evacuated the aircraft.

## RECOMMENDATION (How could this accident/incident have been prevented?)

Operator/Owner Safety Recommendation

We don't have any recommendation on preventing a similar incident at this time due to not being able to identify the cause of the malfunctioning landing gear. The landing gear manufacturer, aircraft manufacturer and operator continue to work to identify the root cause.

		ATION (Please type or print in ink) is needed for any answers.		
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I HEREBY CERTIF	Y THAT T	HE ABOVE INFORMATION IS COMPL	ETE AND ACCURATE TO	THE BEST OF MY KNOWLEDGE
Date of this Report	Signature	and Name of Pilot/Operator		
06/18/2009	Signature:_			
mm/dd/yyyy		nt Name: Tom Sorrell		
Signature and Name	of Person	Filing Report if Other than Pilot/Operate	or	
Signature:				
Type or Print Name:				
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NUTCOD A		FOR NTSB		
NTSB Accident/Incid		Reviewed by NTSB Regional Office	Name of Investigator HICKS	Date Report Received 6/18/2009
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