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 INFORMA	TION											
Accident/Incident Location				t.			Date/Time					
Nearest City/Place: 5p	rest City/Place: Spring Field Country: itude: 12 MM H (GWM) Longitude:			State	:: <i>-71</i> /	Date: Ol / 19/2012 Local Time:						
ZIP:C	ountry:						mn/dd/y	XXX	T:	ma Zanar		
Latitude: /2 MMI N (id:mm:ss N/S) Longi	tude:		(ddd	:mm:ss E/W)				111	nie Zone		
Phase of Operation							ollision with (Other Airc	raft	Altitude	of In-Fligh	t
☐ Standing ☐ Takeoff (incl. initial climb) ☐ Cruise			☐ Hover			☐ Midair Occurrence				nce		
☐ Taxi ☐ Climb ☐ Maneuvering ☐ Descent ☐ Landing ☐ Approach				Other Jnknown	☐ On-ground ☐ None ☐ ☐ ft]				ft MSL			
AIRCRAFT INFOR	JIMIOWII	ļΩ	(140ile					_ It IVISE				
	-					Τ			230	<u>، ۲</u>		
Manufacturer: (E5	7N A			· · ·		- 1	Max Gross V					
Model: 172I	20 5/ 8/12					- 1	Weight at Ti					
Serial Number:/						1	Location of					
Registration Number: _	35571		Amateur-	built:	☐ Yes 🄼 No		-or-	57			e or 🗵 dati lynamic Cord	
Category of Aircraft	Type of Airworth	niness (Certificate	,	Number of S	Sea	its:		Landi	ng Gear	Retra	ıctable
Airplane	(Check all that apply						•				onal landing g	gear
☐ Balloon ☐ Blimp/Dirigible	Standard	Spec			-		how many seats	i		uration that	applies:	
Glider	X Normal ☐ Utility		estricted imited		Flight Cre	ew:	<u> </u>		⊠ Tr	icycle	T	Tailwheel
☐ Gyrocraft ☐ Helicopter	☐ Acrobatic		ovisional							nphibian		ligh Skid
Powered lift	☐ Transport		kperimental					l		nergency FI		
Ultralight			ecial Flight ght Sport		•	_			☐ Flo		□ s □ s	ki/Wheel
Unknown		121	giii opoit							known		
Type of Maintenance Pr	ogram		Last In:	spectio	on Type			Date Las	st Inspec	tion: _ O	1/17/2: nh/dd/yyyy	012
Annual	W		☐ 100 H		Continuor				_	n	nh/dd/yyyy	
Conditional (Amateur-bu Manufacturer's Inspection			☐ AAIP ØAnnua		☐ Condition ☐ Unknown		nspection	4.5	7F 4 1 F	n: 2	754	-
Other Approved Inspection	on Program (AAIP)		K-V-VIIII	£1	- Chkhown			1		ime: <u>~</u> iat <i>(check</i>	- /	nrs
Continuous Airworthines Other, specify:								1				lent/Incident
IFR Equipped			Stall We	rnina	☐ Last Inspection ☐ Time of Accing System Installed ☐ Type of Fire Extinguishing System							
☐ Yes ☒ No ☐ Unkn	own ·		!	arning System Installed No Unknown			,u	None				
			EX 103	Yes I NO I Unknown			Specify					
	T Activated		ELT Ma	nufac	turer: A	27	TEX					
X Yes □ No X	Yes No		Model/S	eries:	ME	4	06					
ELT Aided in Locating A	Accident/Incident		Serial N	umber	: AOCC	4	04809	100 31	5			
☐ Yes 📈 No			Battery'			/ `		·		ry Exp. Da	ate:	·
Engine Type		rocatin	g Fuel		peller							
Reciprocating Turl		n Type	_		•							
	oo Fan Carl	buretor l Injecte	A		Fixed Pitch			turer:				
☐ Turbo Prop ☐ Unk	nown	injecte			Controllable Pit	ren	Model: _					
	· ·]	Engine Ra Power Me				
							Date	as (check o		Total	Time Since	Time Sînce
	Engine		İ		facturer's		of Mfg.	Horse		Time	Inspection	Overhaul.
Engine Engine Manufactu	rer Model/Se 0320	ries	_	Serial	Number 「スフレーフロ		mm/dd/yyyy	☐ lbs of 7		(hours)	(hours) - 0 -	(hours)
Eng. 1 LYCOM/NG	10720		· U	LA	576-27	A		/ / /		8430	- 0 = -	85,9
Eng. 2				<u> </u>			 			 	,	· ·
Eng. 3 Eng. 4												
446・7										<u> </u>	<u> </u>	

OWNER/OPERATOR INFORMATI					
Registered Aircraft Owner	Owner Address				
Name: WILLIAM J. I	<u>/Ey </u>	City: XXA9HVILLE			
Fractional Ownership Aircraft: Yes No		City: <u>NA9HVILLE</u> State: <u>FN</u> ZIP: <u>37208</u> Country: <u>USA</u>			
Operator of Aircraft Same As Registe	Operator Address Same As Registered Owner				
Name:	City:				
Doing Business As: Air Carrier/Operator Designator (4 Character Co	City:				
Regulation Flight Conducted Under	sue)	Revenue Sightseeing Flight			
	al Flight Public Use (select type)	Yes No			
☐ FAR 91 ☐ FAR 129 ☐ FAR 91 Speci ☐ FAR 103 ☐ FAR 133 ☐ Non-US, Com ☐ FAR 121 ☐ FAR 135 ☐ Non-US, Non ☐ FAR 125 ☐ FAR 137 ☐ Armed Forces	Air Medical Flight ☐ Yes ☑ No				
Purpose of Flight for FAR 91, 103, 133, 137 (Select one)	Revenue Operation for FAR 121, 125, 129, 135 (Select one)	Type of Commercial Operating Certificate Held (Check all that apply)			
⊠ Personal	Scheduled or Commuter	None			
☐ Business ☐ Executive/Corporate	☐ Non-Scheduled or Air Taxi	☐ Flag Carrier Operating Certificate (121) ☐ Supplemental			
Other Work Use	Domestic or International	Air Cargo			
☐ Instructional ☐ Ferry	Domestic International	Foreign Air Carriers (129) Commuter Air Carrier (135)			
Positioning	- Bomesic - Microaconal	On-Demand Air Taxi (135) Large Helicopter (127)			
Aerial Application Aerial Observation	Cargo Operation	Rotorcraft External Load (133)			
Air Drop	Passenger/Cargo	- or -			
☐ Air Race / Show ☐ Flight Test	Passenger How many? Cargo lbs	Agricultural Aircraft (137)			
☐ Public Use ☐ Unknown	Mail	Other Operator of Large Aircraft			
OTHER AIRCRAFT—COLLISION	Uf air or around collision occurred complete t	his section for other aircraft)			
	r:	D 4 04 11 16			
1		Destroyed Minor			
Registered Owner of Other Aircraft		Substantial None			
Registered Owner of Other Arterate					
First Name	City:				
First Name: Middle Initial:	City: State:	ZIP:			
Middle Initial: Last Name:	City: State: Country:				
Middle Initial:	Country:				
Middle Initial: Last Name: Pilot of Other Aircraft First Name:	Country:				
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial:	Country: City: State:				
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name:	Country: City: State: Country:	ZIP:			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA	Country: City: State: Country: LURE (If more space is needed, continue of	ZIP:			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no.	Country: City: State: Country: LURE (If more space is needed, continue of partial p	ZIP: or separate sheet) Total Time/Cycles On Part			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A	Country: City: State: Country: LURE (If more space is needed, continue of	Total Time/Cycles On Part Hours			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no.	Country: City: State: Country: LURE (If more space is needed, continue of partial p	ZIP: or separate sheet) Total Time/Cycles On Part			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A	Country: City: State: Country: LURE (If more space is needed, continue of partial p	Total Time/Cycles On Part Hours Cycles Time Since This Part			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A	Country: City: State: Country: LURE (If more space is needed, continue of partial p	Total Time/Cycles On Part Hours Cycles			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A	Country: City: State: Country: LURE (If more space is needed, continue of partial p	Total Time/Cycles On Part Hours Cycles Time Since This Part			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A	Country: City: State: Country: LURE (If more space is needed, continue of partial p	ZIP: Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGINE STOPPAGE A NO PART FAILURE	Country: City: State: Country: LURE (If more space is needed, continue of X Yes \ No \ Unknown Serial no., and describe the failure.) PAILENT FUEL STAR VA	ZIP: Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMGIME STOPPAGE A NO PART FAILURE DAMAGE TO AIRCRAFT AND OTHER	Country: City: State: Country: LURE (If more space is needed, continue of serial no., and describe the failure.) PAILENT FUEL STARVAT	Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled Hours			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMG/ME STOPPAGE A NO PART FAILURE DAMAGE TO AIRCRAFT AND OTH Aircraft Damage None Substantial Minor Destroyed Aircraft	Country: City: State: Country: LURE (if more space is needed, continue of particular	Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled Hours Hours Unknown Origin			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. ENGINE STOPPAGE A NO PART FAILURE DAMAGE TO AIRCRAFT AND OTH Aircraft Damage None Substantial	Country: City: State: Country: LURE (if more space is needed, continue of particular	Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled Hours Hours Both Ground and In-Flight			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMG/ME STOPPAGE A NO PART FAILURE DAMAGE TO AIRCRAFT AND OTH Aircraft Damage None Substantial Minor Destroyed Aircraft	Country: City: State: Country: LURE (if more space is needed, continue of particular	Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled Hours Hours Unknown Origin			
Middle Initial: Last Name: Pilot of Other Aircraft First Name: Middle Initial: Last Name: MECHANICAL MALFUNCTION/FA Was there Mechanical Malfunction/Failure? (If yes, list the name of the part, manufacturer, part no. EMG/ME STOPPAGE A NO PART FAILURE DAMAGE TO AIRCRAFT AND OTH Aircraft Damage None Substantial Minor Destroyed Aircraft	Country:	Total Time/Cycles On Part Hours Cycles Time Since This Part Inspected/Overhauled Hours Hours Unknown Origin			

1.		lditional sheet if	•	
	•	•		
AIRPORT INFORMATION (IF IF	ie accident/incident occ	curred on app	roach, takeoff or within 3 miles of	an airport, complete this section)
Airport Identifier:			Distance From Airport Center	
Airport Name:			Direction From Airport:	degrees MAG
Proximity to Airport	trip 🔲 On Airport 🔲	On Airstrip	Airport Elevation:	ft. MSL
Approach Segment (Select one)				
☐ On Instrument Approach ☐ Landi ☐ Crosswind ☐ Down		se leg w Approach	☐ Final ☐ Aborted Landing (after	Go Around er touchdown)
IFR Approach (Check all that apply)			VFR Approach (Check all that a	····
☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep		☐ Practice ☐ GPS	│	Stop and Go Touch and Go
SDF ILS	☐ ASR [Loran Unknown	Straight-In Valley/Terrain Following	Simulated Forced Landing Forced Landing
☐ VOR/DME ☐ LOC-back course	Contact	UIKIIUWII	Go Around	Precautionary Landing
TACAN RNAV	Circling		Full Stop	Unknown
Runway Information	G Width	Đ.	Condition of Runway/Landing : □ Dry □ Snow-Co	
Runway ID: (L/R/C) Length: Punway/I anding Surface (Chack all that		ft	☐ Holes ☐ Snow-Cru	usted Water-Choppy
Runway/Landing Surface (Check all that Asphalt Grass/Turf Mac			☐ Rough ☐ Snow-We	t Wet
Concrete Gravel Met.	al/Wood 🔲 Unknowi	n	☐ Rubber Deposits ☐ Soft ☐ Slush Covered ☐ Vegetation	Unknown
Dirt Lice Sno				
	1171			
Last Departure Point	Time of Departure	Destination	T. T.	ype Flight Plan Filed
Airport ID: D N U		Airport ID:	JWN D	None ☐ VFR/IFR
Airport ID: DNV City: DANVILE, IL	Time: 12:15 p	Airport ID:	TWN 15AVILE	None
Airport ID: DNV City: DANVILLE, IL State: IL		Airport ID:	TWN/ 154VILLE	None UFR/IFR Company VFR IFR Military VFR Unknown VFR
Airport ID: DNV City: DANVILE, IL State: IL Country: USA	Time: 12:15 p	Airport ID:	TWN/ 154VILLE	None
Airport ID: DNV City: DANVILE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a	Time: 12:15 p Time Zone: (P) (L)	Airport ID:	TWA/ 15AVILE	None
Airport ID: DNV City: DANVILE, IL State: IL Country: USA	Time: 12:15 p	Airport ID:	TWN/ 154VILLE	None UFR/IFR Company VFR IFR Military VFR Unknown VFR
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check at Service) None Special VFR VFR Special VFR Airspace where the accident/incident occ	Time: 12 115 p Time Zone: (P) (Lo) Ill that apply) Speci VFR Curred (Check all that ap	Airport ID:	TWN/ 4 SAVILF- / / SA USA USA UFR Flight Following □ Traffic Advisory	None
Airport ID: DNU City: DANVILE, IL State: IL Country: USA Type of ATC Clearance/Service (Check as Special VFR) VFR	Time: 12 115 p Time Zone: (P) (Lo) Ill that apply) Speci VFR Curred (Check all that apply)	Airport ID:	TWN/ 45#VILF- / ISA	None
Airport ID: DNU City: DANVIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check as Special VFR IFR Airspace where the accident/incident occ Class A Class E Class B Class G Class C Demo Area	Time: 12 115 p Time Zone: (P) test all that apply) Speci VFR curred (Check all that ap Res Mili	Airport ID:	UNA SAUILE SA VILLE	None
Airport ID: DNU City: DANULE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Class C Demo Area Class D Warning Area	Time: 12 115 p Time Zone: (P) (Lo) Ill that apply) Speci VFR Curred (Check all that ap Prol Res Mill Air	Airport ID:	UNA SAUILE SA VILLE	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that None Towing Glide	Time: 12 115 p Time Zone: (P) (Lo) If that apply) Speci VFR VFR Prol Res Military	Airport ID:	USA VILLE	None
Airport ID: DNU City: DANULE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that None Towing Glide Passengers Towing Banne	Time: 12 115 p Time Zone: (P) (Lo) If that apply) Speci VFR VFR Prol Res Mills Airg apply) Parager Water Water Water Water Water	Airport ID:	UNA SAVILE SAVI	None
Airport ID: DNU City: DANUILE, IL State: IL Country: USA Type of ATC Clearance/Service (Check as Special VFR IFR Airspace where the accident/incident occ Iclass A Iclass E Iclass G Iclass C Iclass G Iclass C Iclass C Iclass D Iclass D Iclass D Iclass D Iclass C	Time: 12 115 p Time Zone: (P) (L) Time Zone: (P) (L) Special VFR Curred (Check all that ap) Prod Airp Apply) r	Airport ID:	UNA SAVILE SAVI	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check at Special VFR IFR Airspace where the accident/incident occ Class A Class E Class B Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that None Towing Glide Passengers Towing Banne Cargo Other Externa FUEL & SERVICES INFORMAT	Time: 12 115 p Time Zone: (P) (L) Time Zone: (P) (L) Special VFR Curred (Check all that ap) Prod Airp Apply) r	Airport ID:	UNA SAVILE SAVI	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check at Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Demo Area Class B Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that Marcaft Load Description (Check all that Special VFR IFR Aircraft Load Description (Check all that Special VFR IFR IFR IFR IFR IFR IFR IFR IFR IFR I	Time: 12 115 P Time Zone: (P) Time	Airport ID: City: NA State: TA Country: U ial IFR On Top oply) hibited Area circted Area circted Area citary Operations port Advisory A achutists ter conical/Fertilizer/	TWM ASHVILE VFR Flight Following □ Traffic Advisory □ Jet Training Are □ TRSA □ TRSA □ FAR 93 rea □ Livestock □ Unknown /Seeds □ JP3 □ Other, s	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check at Special VFR IFR Airspace where the accident/incident occ Class A Class E Class B Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that None Towing Glide Passengers Towing Banne Cargo Other Externa FUEL & SERVICES INFORMAT	Time: 12 115 P Time Zone: (P) Time	Airport ID: City: NA State: TA State: TA Country: U ial IFR On Top hibited Area stricted Area itary Operations port Advisory A achutists ter emical/Fertilizer/	TWM ASAVILE VFR Flight Following □ Traffic Advisory □ Jet Training Are □ TRSA □ TRSA □ FAR 93 rea □ Livestock □ Unknown /Seeds □ JP3 □ JP4 □ Other, s	None
Airport ID: DNU City: DANUILE, IL State: IL Country: USA Type of ATC Clearance/Service (Check at Special VFR IFR Airspace where the accident/incident occ Class A Class E Class B Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that None Towing Glide Towing Banne Cargo Other Externa FUEL & SERVICES INFORMAT Fuel on Board at Last Takeoff (convert from pounds, as necessary)	Time: 12 115 P Time Zone: (P) (Lo) Time Zone: (P) (Lo) I that apply) Speci VFR VFR Hill Air apply) r	Airport ID: City: NA State: TA Country: U ial IFR On Top oply) hibited Area citricted Area cit	TWM ASHVILE VFR Flight Following □ Traffic Advisory □ Jet Training Are □ TRSA □ TRSA □ FAR 93 rea □ Livestock □ Unknown Seeds □ JP3 □ JP4 □ Other, s	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that Marcaft Load Description (Chec	Time: 12 115 P Time Zone: (P) (Lo) Time Zone: (P) (Lo) I that apply) Speci VFR VFR Hill Air apply) r	Airport ID: City: NA State: TA Country: U ial IFR On Top oply) hibited Area citricted Area cit	TWM ASHVILE VFR Flight Following □ Traffic Advisory □ Jet Training Are □ TRSA □ TRSA □ FAR 93 rea □ Livestock □ Unknown Seeds □ JP3 □ JP4 □ Other, s	None
Airport ID: DNU City: DANUIUE, IL State: IL Country: USA Type of ATC Clearance/Service (Check a Special VFR IFR Airspace where the accident/incident occ Class A Class E Class G Demo Area Class D Warning Area Aircraft Load Description (Check all that Marcaft Load Description (Chec	Time: 12 115 P Time Zone: (P) (Lo) Time Zone: (P) (Lo) I that apply) Speci VFR VFR Hill Air apply) r	Airport ID: City: NA State: TA Country: U ial IFR On Top oply) hibited Area citricted Area cit	TWM ASHVILE VFR Flight Following □ Traffic Advisory □ Jet Training Are □ TRSA □ TRSA □ FAR 93 rea □ Livestock □ Unknown Seeds □ JP3 □ JP4 □ Other, s	None

EVACUATION OF All	RCRAFT							
Was an emergency evacuati	on of the aircraft	performe	d?	Yes	□ No·			
Method of Exit – Describe h	ow the occupants	exited and I	now n	nany occupa	nts evacuated each	location	·	
Open doe	r of Inve	rted i	41r	craft	+ exit			
					•	•		
WEATHER INFORMA	TION AT TH	EACCIE	EN'	T/INCIDE	NT SITE			
Weather Observation Facilit Facility ID: 「いん 人い	ty , o S			ce of Weat	her Information		Method of Briefing (Check all that apply)	
Observation Time: 2!.00			□N	ational Weath	er Service	Company	In Person	
Time Zone: (Putral	γ.	-		light Service S V/Radio	Station	☐ Military ☐ Internet	☐ Teletype ☐ Telephone/Computer	
Distance from Accident Site:	11 1	 	⊠ A	utomated Rep		Unknown	Aircraft Radio TV/Radio	
Direction from Accident Site:	175° degre	ees MAG	<u>.</u>	ommerciai we	eather Service (DUA'	19)	Unknown	
Briefing Type/Completeness			Ligh	t Condition			Visibility	
Full Partial / Limited By Pilot Partial / Limited By Briefer	☐ Abbreviate ☐ Unknown ☐ Not Pertine		D D D		□ Dusk □ Night	☐ Dark Night ☐ Bright Night ☐ Not Reported	10 † miles	
Sky/Lowest Cloud Condition	_	Ceiling			7 0	Restriction to Visibility		
☐ Clear ☐ Few ☐ Partial Obscuration ☐ Scattered	Thin Broken Thin Overcast Unknown	None (Broker Overca	==			None ☐ Blowing Dust ☐ Blowing Sand ☐ Blowing Snow	☐ Fog ☐ Ground Fog ☐ Haze ☐ Ice Fog	
Lowest Cloud Condition Hei	ght	Ceiling F				☐ Blowing Spray ☐ Dust	☐ Smoke ☐ Unknown	
NA	_ft AGL		N.	4	ft AGL	Dust	Olikilowii	
Wind Direction	Wind Speed			Wind Gus	ts	Type of Turbulence (C)	heck all that apply)	
☐ Indicated: 240 degrees MAG	Velocity: 6	KTS		Velocity:	- KTS	None In Cl	ouds ity of Thunderstorm	
degrees MAO	-or- □ Calm			☐ Gusting		Severity of Turbulence	· ·	
☐ Variable	Light and Varia	ible	Not Gusting			Extreme Mode	erate	
NOTAMs (D, L and FDC)	, AIRMETs, SI	GMETs,	PIRI	EPs in effe	ct at the time of	the accident/incident	f	
NONE KNO	96/h							
						•		
•						•	·	
Tamparatura: (C)	Ic	ing Foreca Amount			Type	1 7	n (Check all that apply) Drizzle	
Temperature: (C) or (F)		None Trace	\square N	loderate	☐ Rime		Ice Pellets	
Altimeter Setting:i	1. HG □	Trace Light	∐S	evere	☐ Clear ☐ Mixed	Snow [Snow Pellets Snow Grains	
or N	AB	ing Actual			·	Rain Showers	Ice Crystals Ice Pellets Shower	
Density Altitude:	 " ,	Amount	_		Type	, —	Freezing Drizzle	
Dew Point: (C) or(F)		None Trace	=	loderate evere	☐ Rime ☐ Clear	Intensity of Precipit	ation	
		Light			Mixed	Light Mo	•	
						· · · · · · · · · · · · · · · · · · ·		
				6		*		
					•		•	

PILOT "A" INFORM	ATION									
Pilot "A" Responsibilities a							<u></u>			
Pilot Co-Pilot	Student Pilot	Flight	Instructor [Check Pil	ot	ght Engineer	Other	Flight Crew	_	_
Pilot "A" Identification										
First Name: W////A n	и				City:					<u>·</u>
Middle Initial:	 .				State: 7		ZIP: <u>37</u>	208		
Last Name: <u>IVEY</u>	· · · · · · · · · · · · · · · · · · ·				Country:	USA			<u> </u>	
Age at time of Accident/Inci	dent: <u>47</u>	Date of B	Birth: mm/kid/j		Certificate	Number: _	:			
Degree of Injury	Seat Occup	_		I .	Seat Belt			Shoulder		
None ☐ Fatal ☐ Minor ☐ Unknown	Left Right	☐ Front ☐ Rear	Unkno	1 '	Used	Yes	□ No	Used	∑ Yes	□ No
Minor Unknown Serious	☐ Right	∐ Rear ∐ Single	;	F	Available	☐ Yes	☐ No	Available	Yes	☐ No
Pilot Certificate(s) (Check a	 ll that apply)									· · · · · · · · · · · · · · · · · ·
☐ None ☐ Stud	dent		reational	Comm		Ξ] Flight Engi		☐ Foreign	ı
	ht Instructor	☐ Spor	it		e Transport		U.S. Milita			
1 * * i.,	Medical Certific			I _	Medical Ce		•		Last Medic	
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Pilot "B" Responsibilities a										,
☐ Pilot ☐ Co-Pilot	Student Pilot	☐ Flight Ins	structor [] Check Pilo	t 🗌 Fl	ight Engineer	Other	Flight Crew		٠
Pilot "B" Identification										
First Name:				(City:					
Middle Initial					State:		ZIP:	wp.ofsta.		
Last Name:	<u>taring tar</u>	•		(Country: _					
Age at time of Accident/Inci	dent: Da	ate of Birtl	h: 		Certificate	e Number: _				
Degree of Injury	Seat Occupied				eat Belt			Shoulder	Harness	
None Fatal Minor Unknown Serious	Right	Front Rear Single	Unknown		sed vailable		□ No □ No	Used Available	☐ Yes ☐ Yes	□ No □ No
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Principal Occupation	Medical Certificate			M	edical Co	ertificate V	alidity	Date of I	Last Medic	al
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Other	☐ Class 1 ☐ Driv ☐ Class 2 ☐ Unk		e (Sport Pilot		With limi Unknowr	itations/waive	ers	mm/dd		
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ADDITIONAL FLIGHT CR	EW MEMBERS	S (Exclusive of cabin	attendants, complete the	e following in	dormat		anii ya san san san ya diyi
Pilot Name and Address			·····			Degree of	• •
First Name:	<u></u> .	City:	ZIP:	·		None Minor	☐ Fatal ☐ Unknown
Middle Initial: Last Name:		State:	ZIP:			Serious	L Olimous
Pilot Certificate(s) (Check all that	ut annhu)	Country				Seat Occu	niad
None Student	Recreational	Commercial	☐ Flight Engineer	Foreig	n	Left	Front ☐
☐ Private ☐ Flight Instructor	Sport	Airline Transport		L_1 Toles	11	Right	Rear
Type Rating/Endorsement for	-	Total Flight	Time at the Time			☐ Center	Single Unknown
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accide		hrs			L] Ulknown
Pilot Name and Address				***************************************	······································	Degree of	Injury
First Name:		City:				None	☐ Fatal
Middle Initial:		State:	ZIP:			☐ Minor ☐ Serious	☐ Unknown
Last Name:		Country:				<u> </u>	
Pilot Certificate(s) (Check all that				-		Seat Occup	•
□ None □ Student □ Private □ Flight Instructor	Recreational Sport	Commercial Airline Transport	☐ Flight Engineer ☐ H.S. Military	☐ Foreig	n	Left Right	☐ Front ☐ Rear
Type Rating/Endorsement for	E oport		Time at the Time			Center	Single
Accident/Incident Aircraft?	☐ Yes ☐ No		nt/Incident:	hrs		,	Unknown
Pilot Name and Address					-	Degree of l	njery
		City:				None	☐ FataI
First Name: Middle Initial:		State:	ZIP:			Minor	Unknown
Last Name:		Country:		_		Serious	
Pilot Certificate(s) (Check all that	t apply)					Seat Occup	
□ None □ Student	Recreational	Commercial	Flight Engineer	☐ Foreign	1	☐ Left ☐ Right	Front Rear
Private Flight Instructor Type Rating/Endorsement for	Sport	Airline Transport	U.S. Military Time at the Time			Center	Single
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Assida	nt/Incident:	hrs			Unknown
Accident/Incident Aircrait:	☐ 1 c3 ☐ 140	of this Accide	11/111Clucht.				

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					Crew Non-	Revenue Konne Non-Occupant	Fatal Serious Injury Minor Injury No Injury
PASSENGER(S) / OTHER Name and Address First Name:	PERSONNEL	(Include flight attenda	ants; continue on separa	te sheet if no	Crew Non-	Revenue Revenue Non- Occupant FAA	
PASSENGER(S) / OTHER Name and Address First Name: Middle Initial:	PERSONNEL	(Include flight attenda	ants; continue on separa	te sheet if ne	Crew Non-	Revenue Revenue Non- Occupant FAA	Fatal Serious Injury Minor Injury No Injury
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PASSENGER(S) / OTHER Name and Address First Name: Middle Initial: Last Name: First Name:	PERSONNEL	(include flight attendated attend	ants; continue on separa	te sheet if ne	Crew	Revenue Revenue Non- Occupant FAA	
PASSENGER(S) / OTHER Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial:	PERSONNEL	City: Country: City: State: City: State: Country: State:	ants; continue on separa	te sheet if ne	Crew	Revenue Revenue Non- Occupant FAA	
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	(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.

SEE ATTACHMENT A

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

Operator/Owner Safety Recommendation

Operator could have managed glidy, no-power approach and field selection somewhat better to minings damage to Arcraft. Perhaps.

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William Ivey C-172I N35571 Jan. 20, 2012

I departed Oshkosh (OSH) at 9:45 AM, Central. It was very cold — minus 20 degrees F at altitude. I was basically heading south-southeast, to Danville, Illinois (DNV) with a GPS routing that overflew DeKalb-Taylor (DKB) and Morris-Washburn (CO9). I maintained 5500 feet and the tailwinds were strong. I arrived at Danville at noon. I refueled and took a rest, departing at 12:30 PM central bound for Nashville(JWN), overflying Sullivan County (SIV), Mulenberg County (M21) and Springfield, TN (M91). The temperature warmed up as I headed into southern Indiana. There was no associated precip but a low ceiling as I headed southeast meant I maintained 3500 feet. Tailwinds were less strong but still present. Engine running normally.

A few miles north of Springfield I checked JWN AWOS and began a cruise descent out of 3500 feet, planning a straight-in approach to runway 20 at John Tune. I passed Springfield, still descending, reaching about 2100 feet MSL as I approached some of the higher terrain that is just north of the airport. I think I was about 12 statute miles north on a straight-in heading. I began to set up for landing, reducing the power to about 1500 rpm. I believe I set the mixture full rich, but did not pull the carb heat. At that point the engine suddenly acted as though it were starved for fuel or else had suffered some unlikely massive electrical failure. With the rising terrain ahead, I was only something like 7 or 800 feet above the ground. I pumped the throttle, started looking around for a suitable field, and reached over and tripped the ELT.

This part of the flight went really, really fast but here's what I remember. I picked a field and set up an approach to the west. I realized I was both high and fast, so I extended the flight north, and circled back setting up to the southwest (I think). I was still fast and had not observed that the field I had selected had a pronounced slope away from my glide angle. I touched down toward the middle of the field at probably 60 knots or so, running downhill. The plane was still moving at probably 10 knots or a little more when I crossed the boundary of the field; the nose gear buried itself in a ditch and the plane went over nose first, landing on its back. I was stunned for a moment but then turned off the master switch, the ignition, and anything on the panel that seemed electrical (I somehow forgot the GPS). I then opened the door and crawled out of the aircraft.