## 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

ENSONIE ORMA	TON			1		100				Merker		14.5
Accident/Incident Location						D	ate/Time					
				State: MA		Da	ate:05/31/2		Loca	I Time: app	orox 6:30	_
ZIP: 01845 Co	untry: USA		07.44.144				mm/dd/yyy	Ŋ	Time	Zone: ED1	Γ	
Latitude: 42:43:03 N (d	d:mm:ss N/S	) Longitude: 71:	U7:41 W	(ddd:	mm:ss E/W)							
Phase of Operation	(in all indicated	i			laan	_	ollision with O	ther Airc		Altitude of Occurrence	_	
☐ Standing ☐ Takeoff (☐ Taxi ☐ Climb	(incl. initial c	limb)			lover Other		] Midair ] On-ground		- 1'	occurrenc		
Descent Landing		Appro			Inknown	_	None		-		148_ ft	
MERCE AND ANEOE	MATION			1	27,111877			** 1		man a		217
Manufacturer: Grumm	an America	an					Max Gross W	eight:		1,560 lbs		
Model: AA-1B							Weight at Tir	ne of Acc	ident/Inci	dent:	1,33	3 <u>4</u> lbs
Serial Number: AA1B-0	0608						Location of C	enter of (	Gravity at	t Time of A	Accident/In	cident:
Registration Number:	N1608R		Amateur-b	uilt:	☐ Yes 🗹 N	ю					or 🛮 datum	
							-or-				namic Cord (9	
Category of Aircraft  ☑ Airplane	Type of A	irworthiness C	ertificate		Number of	f Se	ats:	2	Landin	-	Retract	
☐ Balloon	Standard		ial		If Large Airc	craft	, how many seats	for:		any additiona ration that a	al landing gea pplies:	ır
☐ Blimp/Dirigible ☐ Glider	☐ Normal		stricted		Flight C	'rew	· ·		<b>∠</b> Tric	ycle	Tai	lwheel
☐ Gyrocraft	Utility Acrobat	ic Dr	mited ovisional						☐ Am	phibian	☐ His	gh Skid
☐ Helicopter ☐ Powered lift	Transpo	ort 🔲 Ex	perimental						Eme	ergency Floa	t 🔲 Ski	d
Ultralight			ecial Flight ght Sport			,		_	☐ Hul	at I	☐ Ski ☐ Ski	/Wheel
Unknown			J F						Unk			
Type of Maintenance P	rogram		Last Ins	pecti				Date La	st Inspect	tion:1	2/16/2011	
Annual Conditional (Amateur-bu	uilt only)		☐ 100 Ho ☐ AAIP				ous Airworthiness		mm/dd/yyyy			
Manufacturer's Inspection	on Program		☐ AAIP ☐ Condition ☐ Unknow				Airfram	Airframe Total Time: 3,125 hrs				
☐ Other Approved Inspecti ☐ Continuous Airworthine:	ion Program (	AAIP)	•			hours measured at (check one)						
Other, specify:	33							L	ast Inspect	ion 🔽 Ti	me of Accide	nt/Incident
IFR Equipped			1	Varning System Installed			Type of Fire Extinguishing System					
☑ Yes ☐ No ☐ Unk	nown		<b>∡</b> Yes	es 🗌 No 🔲 Unknown				☐ None ☑ Specify Halon fire extinguisher onboard				
								E specify				
ELT Installed E	LT Activat	red	DI TA		-tuner Nor	20						
BB1 11101111111	Yes N		ı		cturer: <u>Narc</u>							
ELT Aided in Locating			Model/Series: 50									
Yes No	Accident/I	neident		Serial Number: unknown (could get it if you need it)  Battery Type: BP1010  Battery Exp. Date: 5/31/2013							013	
		Reciprocatin		÷	ropeller				Datte	у Елр. Da	0.01/20	
Engine Type  Reciprocating  Tu	ırbo Jet	System Type	2		opener				0			
Turbo Shaft Tu	ırbo Fan	✓ Carburetor		☑	Fixed Pitch	ъ.	Manufac	cturer: Mc	Cauley			
☐ Turbo Prop ☐ Uɪ	nknown	☐ Fuel Inject	ea	L	Controllable	Pito	Model:	SCM7150		1		
								Engine R Power M			Time	Time
							Date	as (check		Total	Since	Since
		Engine			ufacturer's al Number		of Mfg.		sepower of f Thrust	Time (hours)	Inspection (hours)	Overhaul (hours)
Engine Engine Manufac	turer	Model/Series 0-235-C2C		L-1227			2/27/1975			3,125	3	1,198
Eng. 2												
Eng. 3												
Eng. 4												

Registered Aircraft Owner		Owner Address			
Name: Rebecca Harvey	City				
Fractional Ownership Aircraft: Yes 🗹 No	State: MA ZIP: Country: USA				
Operator of Aircraft  Same As Register	Operator Address Same As Registered Owner				
Name:		City:			
Doing Business As:		State: ZIP:			
Air Carrier/Operator Designator (4 Character Coo	le):	Country:			
Regulation Flight Conducted Under		Revenue Sightseeing Flight			
✓ FAR 91  ☐ FAR 129  ☐ FAR 91 Specia		Yes No			
☐ FAR 103 ☐ FAR 133 ☐ Non-US, Comm ☐ FAR 121 ☐ FAR 135 ☐ Non-US, Non-		Air Medical Flight			
☐ FAR 125 ☐ FAR 137 ☐ Armed Forces	Commercial Commons	☐ 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	<b>☑</b> None			
Business	Non-Scheduled or Air Taxi	Flag Carrier Operating Certificate (121)  Supplemental			
☐ Executive/Corporate ☐ Other Work Use		☐ Air Cargo			
☐ Instructional	Domestic or International	Foreign Air Carriers (129)			
Ferry Positioning	☐ Domestic ☐ International	Commuter Air Carrier (135) On-Demand Air Taxi (135)			
Aerial Application		Large Helicopter (127)			
Aerial Observation	Cargo Operation	Rotorcraft External Load (133)			
☐ Air Drop ☐ Air Race / Show	Passenger/Cargo PassengerHow many?	- or - Agricultural Aircraft (137)			
☐ Flight Test	Cargo lbs				
☐ Public Use ☐ Unknown	☐ Mail	Other Operator of Large Aircraft			
OTHER AIRCRAFT COLLISION					
	the same armendal and the same a				
AL COLLECT NO. 1		D (04) 11 6:			
	:	Damage to Other Aircraft			
Model:	:	Damage to Other Aircraft			
Registered Owner of Other Aircraft		Damage to Other Aircraft  □ Destroyed □ Minor □ Substantial □ None			
Registered Owner of Other Aircraft First Name:	City:	Damage to Other Aircraft  Destroyed Minor Substantial None			
Registered Owner of Other Aircraft First Name: Middle Initial:	City:State:	Damage to Other Aircraft  □ Destroyed □ Minor □ Substantial □ None			
Registered Owner of Other Aircraft First Name:	City:State:	Damage to Other Aircraft  Destroyed Minor Substantial None			
Registered Owner of Other Aircraft First Name: Middle Initial: Last Name: Pilot of Other Aircraft	City:State:	Damage to Other Aircraft  Destroyed Minor Substantial None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:	City: State: Country:  City: State:	Damage to Other Aircraft  Destroyed Minor Substantial None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:  Middle Initial:  Last Name:  Middle Initial:  Last Name:	City:	Damage to Other Aircraft  Destroyed Minor Substantial None  ZIP:  ZIP:			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:  Middle Initial:	City:	Damage to Other Aircraft  Destroyed Minor Substantial None			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:  Middle Initial:  Last Name:  Middle Initial:  Last Name:	City:	Damage to Other Aircraft Destroyed Minor Substantial None  ZIP:  ZIP:			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   Substantial   None			
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?	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
Registered Owner of Other Aircraft  First Name:  Middle Initial:  Last Name:  Pilot of Other Aircraft  First Name:  Middle Initial:  Last Name:  Middle Initial:  Last Name:  Was there Mechanical Malfunction/Failure?  (If yes. list the name of the part. manufacturer, part no.	City:State:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			
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?	City:State:	Damage to Other Aircraft   Destroyed   Minor   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?  (If yes. list the name of the part. manufacturer, part no.)  Aircraft Damage  Aircraft	City:	Damage to Other Aircraft   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 no.	City:	Damage to Other Aircraft   Destroyed   Minor   None     ZIP:			

Description of Damage to Aircraft and C	ther Property (use addi	itional sheet if r	ecessary)			
No damage to property.  Damage to aircraft: prop strike (engine, prop damaged)						
canopy and windshield destroyed. nose gear collapsed.						
left horizontal stabilizer skin damage (spar ok	).					
Vertical stabilizer damaged.						
aft two ribs of fuselage dented a little. cowlings damaged, spinner has a small dent.						
sheet metal between windshield and canopy	crushed a little.					
no other known damage at this time (for insta	nce, wings look perfect).					
EXERCIPITA NEORMATION WAS	accidentlimident occi	med on appr	cach, takeoff or	eltila 3 miles	of an aliper	complete this section)
Airport Identifier: LWM			Distance From			2 <sub>SM</sub>
Airport Name: Lawrence Municipal Airp	oort		Direction From	n Airport:	3	20 degrees MAG
Proximity to Airport 🛮 Off Airport/Airst	rip On Airport	On Airstrip	Airport Elevat	ion:		148_ ft. MSL
Approach Segment (Select one)						
☐ On Instrument Approach ☐ Landin			☐ Fir	nal		Go Around
Crosswind Down	vind Low	Approach	At	orted Landing (a	after touchdow	n)
IFR Approach (Check all that apply)	_		VFR Approach	(Check all tha		
▼ None □ PAR		Practice	None			op and Go
☐ ADF/NDB ☐ Sidestep ☐ ILS		] GPS ] Loran	☐ Traffic Pattern ☐ Straight-In			ouch and Go mulated Forced Landing
☐ VOR/TVOR ☐ Localizer Only		Unknown	Valley/Terrain	Following		orced Landing
☐ VOR/DME ☐ LOC-back course	Contact		Go Around	Č	Pr	ecautionary Landing
☐ TACAN ☐ RNAV	Circling		☐ Full Stop			nknown
Runway Information						(Check all that apply)
Runway ID: 32 (L/R/C) Length:		<u>100</u> ft	<b>☑</b> Dry ☐ Holes	☐ Snow- ☐ Snow-	-Compacted	☐ Water-Calm ☐ Water-Choppy
Runway/Landing Surface (Check all that	apply)	_	lce Covered	Snow-		☐ Water-Choppy
✓ Asphalt ☐ Grass/Turf ☐ Mac			Rough	☐ Snow-	-Wet	□ Wet
☐ Concrete ☐ Gravel ☐ Meta	ıl/Wood 🔲 Unknown	ı	Rubber Deposi	_		Unknown
☐ Dirt ☐ Ice ☐ Snov		Onne and a sound of a local Land	☐ Slush Covered	☐ Vegeta	ation	
PLIGHT ITINERARY INFORMA	TICN				en taug	
Last Departure Point	Time of Departure	Destination	1		Type Fligh	t Plan Filed
Airport ID: LWM	Time: 5:30	Airport ID: <u>l</u>	_WM	_	Mone None	☐ VFR/IFR
City: North Andover	Time: <u>0.00</u>	City: North	Andover		☐ Company	
State: MA	Time Zone: EDT	State: MA			VFR	VIK LI CIIKIIOWII
Country: USA		Country: US	Α		_	☐ Yes ☐ No
Type of ATC Clearance/Service (Check a	II that apply	country. <u>co</u>				
□ None □ Special VFR	☐ Specia	al IFR	□ve	R Flight Followi	ng	☐ Cruise
✓ VFR ☐ IFR	□ VFR			ffic Advisory	6	Unknown / NA
Airspace where the accident/incident occ	urred (Check all that ap	ply)				
☐ Class A ☐ Class E		hibited Area		☐ Jet Training	Area	☐ Special
☐ Class B ☐ Class G		tricted Area		TRSA		Air Traffic Control Area
Class C Demo Area		itary Operations oort Advisory A		☐ FAR 93		Unknown
Class D Warning Area		on Advisory A	irea			
Aircraft Load Description (Check all that	_	achutists		Livestock		
✓ None     ☐ Towing Glide       ☐ Passengers     ☐ Towing Bann	•			Unknown		
Cargo Other Externa		mical/Fertilize	/Seeds			
FEEL & SERVICES INFORMA	TON	The second second		Property of the		
Fuel on Board at Last Takeoff	Fuel Type	And the same of th	A STATE OF THE PARTY OF THE PAR			
(convert from pounds, as necessary)	80/87	<b>115/145</b>	☐ JP3	Oth	er, specify	
22	100 Low Lead	☐ Jet A	☐ JP4	_	. ,	
Gallons	100/130	☐ Automotiv	e 🔲 JP5			
Other Services, if Any, Prior to Departu	re					
check tire air pressure.						
check tire air pressure.						
check tire air pressure.						

EVACUATION OF AIR	CRAFT			<b>.</b>						
Was an emergency evacuation of the aircraft performed?   ✓ Yes   No										
Method of Exit - Describe ho	w the occupants	exited and	how m	any occupants eva	cuated each	locati	ion			
Pilot sole occupant. I smashed right side baggage w This was necessary because the	indow with butt er aircraft was inve	nd of fire ex	tinguish	her and egressed o	out window. I	was a	able to do this really fa	ast (pre-planned escape plan).		
, 223300 (//										
WEATHER INFORMA	TION AT TH	E ACCI	ENI	MODEN	TE#					
Weather Observation Facilit			Sour	ce of Weather In				Method of Briefing		
Facility ID: LWM atis		_		ck all that apply) ational Weather Serv	rice		✓ Company	(Check all that apply)  ☐ In Person		
Observation Time: 5:30		_	☐ FI	ight Service Station			Military	☐ Teletype		
Time Zone: EDT				V/Radio utomated Report			☐ Internet ☐ Unknown	<ul><li>✓ Telephone/Computer</li><li>☐ Aircraft Radio</li></ul>		
Distance from Accident Site:		NM rees MAG		ommercial Weather S	Service (DUA	TS)		☐ TV/Radio		
Direction from Accident Site:  Briefing Type/Completeness		rees MAG	Liah	t Condition				Unknown Visibility		
<b>☑</b> Full	☐ Abbrevia		D	awn 🔲 Dus			Dark Night	ř		
☐ Partial / Limited By Pilot ☐ Partial / Limited By Briefer	Unknowr	nent	Da	✓ Day Night Bright Night Not Reported			100_ miles			
Sky/Lowest Cloud Condition	_	Ceiling		П	sume d			(Check all that apply)		
	Thin Broken Thin Overcast	✓ None ☐ Broke		☐ Obso ☐ Inde	cured finite		None Blowing Dust	☐ Fog ☐ Ground Fog		
	Unknown	Overd		Unk			Blowing Sand	Haze		
Lowest Cloud Condition Hei	ght	Ceiling	Heigh	t		1 💷	Blowing Snow Blowing Spray	☐ Ice Fog ☐ Smoke		
	gnt O_ft AGL	Cenning	rreign	10,000 fi	t AGL		Dust	Unknown		
Wind Direction	Wind Speed	1——		Wind Gusts		Tv	pe of Turbulence (C)	heck all that apply)		
☑ Indicated:	Velocity:	4 <sub>KTS</sub>			<u>0</u> ктs	Z	None In Cl	ouds		
340 degrees MAG	-or-							nity of Thunderstorm		
☐ Variable	Calm Light and Var	iable	☐ Gusting ✓ Not Gusting			1	Severity of Turbulence  Extreme Moderate Light			
				Not Gusting			☐ Extreme     ☐ Moderate     ☐ Light       ☐ Severe     ☐ Moderate Chop			
NOTAMs (D, L and FDC	), AIRMETs, S	SIGMETS	, PIR	EPs in effect at	the time of	fthe	accident/incident			
none										
		lcing Fore		_			•	on (Check all that apply)		
Temperature:(C) or(F)		Amou  None	_	Moderate	Type ☐ Rime		☑ None ☐ Rain	☐ Drizzle ☐ Ice Pellets		
Altimeter Setting:		Trace	_	Severe	Clear		☐ Snow	Snow Pellets		
or	MB	Light			Mixed	$\Box$	☐ Hail ☐ Rain Showers	☐ Snow Grains ☐ Ice Crystals		
Density Altitude:	ft	Icing Actu Amou			Туре		☐ Freezing Rain ☐ Snow Shower	☐ Ice Pellets Shower ☐ Freezing Drizzle		
<b>Dew Point:</b> (C)		<b>Z</b> None		Moderate	Rime	-		<u> </u>		
or(F)		☐ Trace ☐ Light		Severe	☐ Clear ☐ Mixed		Intensity of Precipitation  ☐ Light ☐ Moderate ☐ Heavy			
						$\bot$	Light M	oderate Heavy		

PILOT "A" INFORMATION										
Pilot "A" Responsibilities at the Time of Accident/Incident										
	Student Pilot	Flight Ir	nstructor	Check Pilot	☐ Flight	Engineer	Other I	Flight Crew	_	
Pilot "A" Identification										
First Name: Rebecca				City						
Middle Initial: State: MA ZIP: Country: USA										
Age at time of Accident/Incident:49 Date of Birth: Certificate Number:										
Degree of Injury	Seat Occupi	ed		Seat	Belt			Shoulder H	arness	
Minor ☐ Fatal ☐ Minor ☐ Unknown	Left Right	☐ Front ☐ Rear	Unknow	0000	_		No	Used	_	□ No
Serious	Center	Single		Avail	able 🔽	Yes [	] No	Available	<b>✓</b> Yes	□ No
Pilot Certificate(s) (Check all	that apply)				_	_			_	
□ None □ Stude		Recre	ational	Commercia			Flight Engir		Foreign	
	Instructor	Sport		Airline Tra	<del></del>		U.S. Militar		ast Medical	
	edical Certifica None	ate Class 3				ficate Val				
▼ Other	Class 1	Driver's Lice	nse (Sport Pilot	only)   🔲 W	ith limitation	ons/waivers		11/08/		
Unknown	Class 2	Unknown		U	nknown			mm/dd/	vyyy	
Medical Certificate Limitatio	ons			<u> </u>		_	_			
none										
Medical Certificate Waivers										
none										
Date of Last Flight Review		Flight	Review Airc	raft						
or Equivalent, Including FAR 121/135 Checks:	05/15/2010	Make:	Grumman							
	mm/dd/yyyy	Model	: AA-1B							
Airplane Rating(s)	Other Aircraft			ent Rating(s)			Rating(s)			
(Check all that apply)	(Check all that a	pply)		that apply)	pply) (Check all that apply)					
☐ None ☐ Single-Engine Land	✓ None ☐ Airship		☐ None ☑ Airpla	ne	☐ Airplane Single-Engine ☐ Instrument				Instrument A	
Single-Engine Sea	Free Balloon		☐ Helico	pter	- 11	☐ Airplane	Multi-Engi	ne 🗌	Helicopter	
☐ Multiengine Land ☐ Multiengine Sea	☐ Glider ☐ Gyroplane		Power	ed Lift		Gyropla Powered			Glider Sport	
wuntengine sea	Helicopter								>p	
Torre Devi	Powered Lift					Student E	ndorsomo	nts (Include a	lates)	
Type Ratings								nts <i>(Include d</i> nent - 1/1/2001		'.
none								,		
								1		
Flight Time (enter appropriate	All	This Make	Airplane Single	Airplane		Instr	rument	-		Lighter
number of hours in each box)	Aircraft	& Model	Engine	Multiengine	Night	Actual	Simulated	Rotorcraft	Glider	Than Air
Total Time	_1,400	1,377	1,395	4	17		63			
Pilot in Command (PIC)	1,279	1,279	1,279		15	10	40	<u> </u>		
Time as Instructor										
This Make/Model	5	-	5							
Last 90 Days	_	5	5							
Last 30 Days	5	5	1							

PLOT "B" INFORMATION											
Pilot "B" Responsibilities at the Time of Accident/Incident											
Pilot Co-Pilot	Student Pilot				101	— riighi	- engineer	Other	rngni Crew		_
Pilot "B" Identification											
First Name:				_	City:			D.			<u>_</u>
Middle Initial: Last Name:					Coun	trv:	ZI	ır:			
Age at time of Accident/Incid	dent: Da	ate of Birth	n: mm/dd/yyy	<u> </u>	Certi	ticate N	Number:				_
Degree of Injury	Seat Occupied				Seat E	Belt			Shoulder H	arness	
☐ None ☐ Fatal			Unknown		Used			No	Used		No
☐ Minor ☐ Unknown ☐ Serious	_ = -	Rear Single			Availal	ble	☐ Yes ☐	] No	Available	☐ Yes [	□ No
Pilot Certificate(s) (Check al						_					
□ None □ Stud		☐ Recreati	ional	Com	mercial		П	Flight Engir	neer [	Foreign	
		Sport		Airli				U.S. Militar			
Principal Occupation	Medical Certificate				Medic	cal Cert	tificate Val	idity	Date of La	st Medical	
	□ None □ Clas		0/5	mle i	=		nitations/waiv				
	Class 1 Driv		se (Sport Pilot o	лиу)	=	th limitat known	tions/waivers		mm dd/y	yyy	
CHRIOWII		-									
Medical Certificate Limitat	tions										
Medical Certificate Waiver	s										_
Date of Last Flight Review		Flight F	Review Aircr	raft							
or Equivalent, Including FAR 121/135 Checks:		Make:									
	mm/dd/yyyy	Model:									
Airplane Rating(s)	Other Aircraft Ra	iting(s)	Instrume	nt Rati	ng(s)	1	Instructor	Rating(s)	_		
(Check all that apply)	(Check all that apply)		(Check all				(Check all the	-			
□ None □ Single Engine Land	☐ None		☐ None				☐ None ☐ Airplane	Single For	_	nstrument A	
☐ Single-Engine Land☐ Single-Engine Sea	☐ Airship ☐ Free Balloon		Airplan	pter			☐ Airplane	Multi-Engir	ne 🔲 I	Helicopter	encobie!
☐ Multiengine Land	Glider		Powere	d Lift			☐ Gyroplan	ie		Glider	
Multiengine Sea	☐ Gyroplane ☐ Helicopter						☐ Powered	Lift	<b>□</b> :	Sport	
	Powered Lift										
Type Ratings							Student Er	ıdorsemei	its (Include da	ites)	
		,									
			Airplane				Inch	rument			
Flight Time (enter appropriation number of hours in each box)		his Make & Model	Single Engine	Airpl Multier		Night		Simulated	Rotorcraft	Glider	Lighter Than Air
Total Time											
Pilot in Command (PIC)											
Time as Instructor											
This Make/Model											
Last 90 Days											
Last 30 Days											
Last 24 Hours											

ADDITIONAL FLIGHT CRE	W MEMBERS	(Exclusive of cable	attendants, complete the	following infom	nation)	
Pilot Name and Address					Degree of I	• •
First Name:		City:			☐ None ☐ Minor	Fatal
Middle Initial:		State:	ZIP:		☐ Minor ☐ Serious	Unknown
Last Name:		Country:				
Pilot Certificate(s) (Check all that		По			Seat Occup	
□ None       □ Student         □ Private       □ Flight Instructor	☐ Recreational ☐ Sport	☐ Commercial ☐ Airline Transport	☐ Flight Engineer ☐ U.S. Military	☐ Foreign	☐ Left ☐ Right	☐ Front ☐ Rear
Type Rating/Endorsement for	эрогг		Time at the Time		Center	Single
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accide	ent/Incident:	hrs		Unknown
Pilot Name and Address		A smooth free contract of the Artist of the		many or the second of the seco	Dognes of I	and the second s
					Degree of I	njury □ Fatal
First Name: Middle Initial:		City:	ZIP:		☐ Minor	Unknown
Last Name:		Country:	ZIP:	_	Serious	
Pilot Certificate(s) (Check all that	t apply)				Seat Occup	ied
□ None □ Student	Recreational	☐ Commercial	☐ Flight Engineer	Foreign	□ Left	Front
Private Flight Instructor	Sport	Airline Transport	U.S. Military		Right	Rear
Type Rating/Endorsement for		Total Flight	Time at the Time	L	Center	☐ Single ☐ Unknown
Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accide	ent/Incident:	hrs	den armoniscolos del filman de sels sensitivos	
Pilot Name and Address					Degree of I	• •
First Name:		City:			None	Fatal
Middle Initial:		State:	ZIP:		☐ Minor ☐ Serious	Unknown
Last Name:		Country:				
Pilot Certificate(s) (Check all tha					Seat Occup	
□ None □ Student □ Private □ Flight Instructor	☐ Recreational ☐ Sport	Commercial Airline Transport	☐ Flight Engineer☐ U.S. Military	☐ Foreign	Left Right	☐ Front ☐ Rear
Private Flight Instructor  Type Rating/Endorsement for	iii sport		Time at the Time		Center	Single
Accident/Incident Aircraft?	☐ Yes ☐ No			la ma		Unknown
	163 110	of this Accide	ent/Incident:	nrs		
PASSENGER(S)/OTHER						
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## MARRATIVE HISTORY OF FLIGHT (Please type or print in link)

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. I departed at about 5:30 EDT with the plan to do some practice air work in the vicinity of Plum Island (quiet area near the coast). After that I was intending to return to the airport for practice touch-n-go. This was work in preparation for my scheduled BFR the following weekend.

The departure and flight to the practice area (about 20 minutes away) was sooth. The flight conditions were perfect for a afternoon flight. I did slow flight, steep turns, turns around a point and turns along a straight line (the beech). At this point I got a new ATIS (I think this was the 2200 Z ATIS but I don't remember exactly what time it was). I had been flying about 40 minutes so it was likely about 6:20 EDT.

As instructed I reported 2 mile right base for rwy 32 and was cleared for touch-n-go with left turns.

The approach and landing were good, correct airspeed and normal touchdown in about the same place where I would normally touch down for a full stop landing.

After landing, I proceeded to methodically start the flaps retracting (takes about 8 seconds) and adjust the trim back to takeoff position. After the aircraft was squared away for takeoff I pushed the throttle in for take off and the aircraft begin accelerating. At about the point where the aircraft began to lift into ground effect I became sure that there was not enough remaining runway length to successfully clear the trees (I was much lower than expected for this distance down the runway). I immediately initiated an emergency departure abort (pull back power and apply emergency braking). The brakes appeared to be working normally. However, there was not enough remaining runway length to stop the plane. Although the plane was rolling much slower as it reached the end of the runway pavement it continued to roll onto the grass surface beyond the end. Braking on this surface was not effective (grass). Behind the first 30 feet or so (this is my recollection) the area beyond the runway slopes off steeply down a rough embankment (no runway safety area). The airport surface is on a built up plateao which ended here. When the aircraft reached the end of the upper grass area it launched back into the air as the ground sloped sharply down below it. The plane was probably not flying but just falling in about a level attitude. It felt like I fell about 40 feet but that could have been a false impression due to the slow motion sensation of this event. The plane landed hard on the gear. The nose gear strut apparently broke and at this instance the prop likely struck the ground for the first time. Because of the broken nose gear and the fact that the fiberglass main gear probably flexed and bounced a little the plane was launched such that it flipped over (end over end) such that it landed on it's back. The main points of contact where the top of the vertical stabilizer and the vertical stabilizer such as not to encroach too much in the cockpit area. What I am saying is that nothing hit me on the top of the head during the

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

Operator/Owner Safety Recommendation

This accident would have been prevented if the touch-n-go departure phase had not been aborted. I should have considered the flight to be "committed" after the throttle was pushed back to full power. Since the end of the runway slopes down even if I had climbed out a little late it is likely that I would cleared the trees if I initiated a maximum performance short field climb out after the plane left ground effect.

ADDITIONAL II	VEODM/	TION (Discount)		<del></del>
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Date of this Report  06/01/2012  mm/dd/yyyy  Signature and Name Signature:  Type or Print Name:  Title:	Signature Signature Type or Pri of Person	nt Name: Rebecca Harvey Filing Report if Other than Pilot/Operato	USEONLY	
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