ACCIDENT NUMBER:

RETENTION / RELEASE OF WRECKAGE RELATED TO ACCIDENT NUMBER ▶

ERA14LA130

REGISTERED OWNER (name and address)		IDENTIFICATION NUMBER			
Frank G. Riner			N19VC		
Sample International Aviation, Inc.			MAKE		
P.O. Box 730118			Vans Aircraft		
Ormond, FL 32173					
LOCATION	DATE OF ACCIDENT		MODEL		
Apopka, FL	2/23/14	RV-		9A	
RETAINED BY NTSB REPRESENTATIV	/E TITL		Ē	DATE	
Stephen Stein	AS			5/6/2014	
The National Transportation Safety Board has except that listed in the evidence control form(investig	ation of the wreckage described above. A	II recovered wreckage	
□ NO PARTS RETAINED					
RELEASED BY NTSB REPRESENTATIVE		TITLE		DATE	
Stephen Stein		ASI		5/6/14	
(This section may be acknowledged by a person, not the owner or owner's representative, who has knowledge of the disposition of the recovered wreckage and its parts. Such acknowledgement does not place responsibility for disposition of the wreckage upon that person.)					
I HEREBY ACKNOWLEDGE:					
□ Receipt of the above described wrece	kage.				
Removal of the parts, if any, listed in	the evidence control form	n(s).			
_ , . ,		. ,			
PERSON MAKING ACKNOWLEDGEME	ENT	TITL	E	DATE	
Frank Riner		Insu	rance Adjuster	5/6/14	
ADDRESS		PHO	NE NUMBER & EMAIL		
P.O. Box 730118, Ormond Beach, FL 32173		904	04-860-9530, avclaims1@cfl.rr.com		

REMARKS:

The following has been retained by the NTSB for further examination (see attached evidence control forms):

001: Spline shaft

002: Spline drive disk adapter

003: Prop Speed Reduction Unit (PSRU)

NTSB FORM 6120.15 (Rev. 05/10)

EVIDENCE CONTROL

ACCIDENT NUMBER:

ERA14LA130

OFFICE		DATE OF ACCID	DENT	ACCIDENT LOCATION (City &	& State)
Avia	ation Safety	2/23/14		Apopka, FL	
EVIDENCE OBTAIN	IED BY:				
□ EV	/IDENCE OBTAINED FROM:	LOCATION OR F	PERSO	N INFORMATION	DATE
⊠ EV	/IDENCE RECEIVED FROM:	Quality Aircraft Salvage 5/		5/6/14	
EVIDENCE CONTR	OL NUMBER	Groveland, FL		GROUP	
ERA14LA130	- IIC - 001				
DESCRIPTION (☐ BIN ITEM - HAS BEEN SEPARATED ☐) 001: Spline shaft					
	OWNER C	R OWNER'S F	REPRE	ESENTATIVE	
FIRST NAME:	Frank	LA	AST NA		
	Frank			Riner	
ADDRESS: P.O. E	Box 730118, Ormond Be	ach, FL 32173			
PHONE: 904-860	904-860-9530 EMAIL: avclaims1@cfl.rr.com				
RETURNED □	DATE:	CONTACT:			
		CHAIN OF CU	JSTOE	ΣY	
RELEASED BY: IIC		RELEASED TO:	RE-3	0	DATE: 5/6/14
PURPOSE: Examination					
RELEASED BY: RI	E-30	RELEASED TO:	Quali	ty Aircraft Salvage	DATE: 8/29/14
PURPOSE: Return of Parts - 1ZA4E7150397313404					
RELEASED BY:		RELEASED TO:			DATE:
PURPOSE:					
RELEASED BY:		RELEASED TO:			DATE:
PURPOSE:					
RELEASED BY:		RELEASED TO:			DATE:
PURPOSE:					•

EVIDENCE CONTROL

ACCIDENT NUMBER:

ERA14LA130

OFFICE	DATE OF ACCIDENT	ACCIDENT LOCATION (City &	State)		
Aviation Safety	2/23/14	Apopka, FL			
EVIDENCE OBTAINED BY:					
☐ EVIDENCE OBTAINED FROM:	LOCATION OR PERSON INFORMATION DATE				
	Quality Aircraft Salvage		5/6/14		
EVIDENCE CONTROL NUMBER	Groveland, FL		GROUP		
ERA14LA130 - IIC - 002					
DESCRIPTION (☐ BIN ITEM - HAS BEEN SEPARATED ☐) 002: Spline drive disk adapter					
OWNER (OR OWNER'S REPR	ESENTATIVE			
FIRST NAME:	LAST NA				
Frank		Riner			
ADDRESS: P.O. Box 730118, Ormond Beach, FL 32173					
PHONE: 904-860-9530	EMAIL: avclaims1@	cfl.rr.com			
RETURNED DATE:	CONTACT:				
	CHAIN OF CUSTO	DY			
RELEASED BY: IIC	RELEASED TO: RE-	30	DATE: 5/6/14		
PURPOSE: Examination					
RELEASED BY: RE-30	RELEASED TO: Qua	lity Aircraft Salvage	DATE: 8/29/14		
PURPOSE: Return of Parts - 1ZA4E7150397313404					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:	•				

EVIDENCE CONTROL

ACCIDENT NUMBER:

ERA14LA130

OFFICE	DATE OF ACCIDENT	ACCIDENT LOCATION (City &	State)		
Aviation Safety	2/23/14	Apopka, FL			
EVIDENCE OBTAINED BY:					
☐ EVIDENCE OBTAINED FROM:	LOCATION OR PERSON INFORMATION DATE				
	Quality Aircraft Salvage		5/6/14		
EVIDENCE CONTROL NUMBER	Groveland, FL		GROUP		
ERA14LA130 - IIC - 003					
DESCRIPTION (☐ BIN ITEM - HAS BEEN SEPARATED ☐) 003: Propeller Speed Reduction Unit (PSRU)					
	OR OWNER'S REPR	ESENTATIVE			
FIRST NAME:	LAST NA				
Frank		Riner			
ADDRESS: P.O. Box 730118, Ormond Beach, FL 32173					
PHONE: 904-860-9530	EMAIL: avclaims1@	cfl.rr.com			
RETURNED DATE:	CONTACT:				
	CHAIN OF CUSTO	DY			
RELEASED BY: IIC	RELEASED TO: RE-3	30	DATE: 5/6/14		
PURPOSE: Examination					
RELEASED BY: RE-30	RELEASED TO: Qua	lity Aircraft Salvage	DATE: 8/29/14		
PURPOSE: Return of Parts - 1ZA4E7150397313404					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:					
RELEASED BY:	RELEASED TO:		DATE:		
PURPOSE:	•				