

City Of Naples Airport Authority

160 Aviation Drive North Naples, Florida 34104-0404

ALERT REPORT

ALERT TYPE (circle one)
ALERT 1 ALERT 2 ALERT 3 ALERT 6 ALERT 8 BOMB THREAT 01 SECURITY BREACH 02
Date of Alert 1-22-09 Supervisor SCOTT SEBER
Time of Alert 1900 Line Staff RAT CANTER, GUS SANTTAGO
Weather CLOAR Customer Service Staff JOHA GOWRM, EDDIE MORENIA
Location TAXIWAY B + APPCH END OF RWY 32 Runway 14-32
Pilot's Name ERIC SAMPSON Phone
Address City PALM BGACH State FL Zip
Certificate Type # A/C Type C - 40 2 Tail Number 26156
Number On Board 7 Number Of Injuries 4 Aircraft Owner <u>CAPE AIL INC</u>
* List Names, Addresses, & Phone Numbers of all injured persons on back of form.
FAA Notification Time 1930 Inspector's Name/Phone ROLON 305-716-3400
Miami FSDO Atlanta FSDO Number of Witnesses 7 Witness Statement(s) Attached
Location & Complete Description of Alert: TOWER CALLED AT 1900 L WITH A CABE AIR AIRCRAFT C-402 JN DISTRESS. AIRCRAFT WAR TN ROUTE TO RSW FROM EYW WHEN BOTH ENGINES FAILED. & PASSENGERS ON BOARD PLUS PILOT. AIRCRAFT LANDED ON RWY 14-32 PLUS PILOT. AIRCRAFT LANDED ON RWY 14-32 SAFELY AND WAS ABLE TO EXIT A TWY B & SAFELY AND WAS ABLE TO EXIT A TWY B & ABPROACH END OF RWY 32. NO DAMAGE TO AIRCRAFT NO INTERIES. CR-3 & CF-3 ON SCENE LT. DAN CRISP. NO INTERIES. CR-3 & CF-3 ON SCENE LT. DAN CRISP. NO INTERIES. CR-3 & CF-3 ON SCENE LONG:061.77058W *Use separate sheet or back of form if additional space is needed. Be sure to attach any Witness Statements if applicable.
Report Writer: Date: Date:
Routing: 1 Copy – OPS Manager 4 Copy – Airport Attorney 2 Copy – FAA 5 Original – OPS Aircraft Reports Binder 3 Original – Director Of OPS 5 Original – OPS Aircraft Reports Binder

City Of Naples Airport Authority

160 Aviation Drive North Naples, Florida 34104-0404

WITNESS STATEMENT

Name Jeff Grifford	Witness Statement #
Address	Pages Of
city Naples FL 34104 State Fl	zip <u>34104</u>
Phone Number Statement Date	1-23-09
passingers to GA building. I dro people to GA where I issued to witness statement to complete AFT we called for transportation to F	d'as the after Scott cturn the
* Use one form for each witness and number them in dequence for each incident of accident.	
Witness Signature	Date $1 - 22 - 09$
Signature of Investigator:	Date 777-01
1 Original – Director Of OPS 5 Orig	opy – Airport Attorney inal – Executive Director inal – OPS Aircraft Reports Binder