

NTSB Investigation No. <u>SEN 17 FA/68</u> Date of Accident: <u>4/28/17</u> Accident Location: <u>Amori Ilo</u>, TX

## CERTIFICATION OF PARTY REPRESENTATIVE<sup>1</sup>

I acknowledge that I am participating in the above-referenced accident or incident investigation, on behalf of my employer who has been named a party to the National Transportation Safety Board (NTSB) safety investigation, for the purpose of providing technical assistance to the NTSB's evidence documentation and fact-finding activities. I understand that as a party participant, I and my organization shall be responsive to the direction of NTSB personnel and may be expelled from the investigation for conduct that is prejudicial to the investigation or inconsistent with NTSB policies or instructions. No information pertaining to the accident, or in any manner relevant to the investigation, may be withheld from the NTSB by any party or party participant.

I further acknowledge that I have familiarized myself with the attached copies of the NTSB Accident/Incident Investigation Procedures (49 C.F.R. Part 831) and "Information and Guidance for Parties to NTSB Accident and Incident Investigations," and will comply, and ensure all employees and representatives of my organization will comply, with these requirements. This includes, but is not limited to, the provisions of 49 C.F.R. §§ 831.11 and 831.13, which, respectively, specify certain criteria for participation in NTSB investigations and limitations on the dissemination of investigation information.

No party representative may occupy a legal position or be a person who also represents claimants or insurers. I certify that my participation is not on behalf of either claimants or insurers, and that, although factual information obtained as a result of participating in the NTSB investigation may ultimately be used in litigation (at the appropriate time, and in a manner that is not inconsistent with the provisions of 49 C.F.R. § 831.13 and 49 U.S.C. § 1154), my participation is to assist the NTSB safety investigation and not for the purposes of preparing for litigation. I also certify that, after the NTSB IIC releases the parties and party participants from the restrictions on dissemination of investigative information specified in 49 C.F.R. § 831.13, neither I nor my party organization will in any way assert in civil litigation arising out of the accident any claim of privilege for information or records received as a result of my participation in the NTSB investigation.

I further acknowledge my responsibility to ensure that the NTSB is informed in writing, immediately and with specificity, when information or records provided to the NTSB, in any format, or other investigative activities, are subject to United States export controls, classification or licensing requirements, or sanctions restrictions. Similarly, commercially sensitive and/or proprietary material provided to the NTSB investigation should be clearly marked in accordance with the provisions of 49 C.F.R. Part 831.6.

5-3-17 Date Signature

President

220

Party Organization/Employer

<sup>1</sup> In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

NTSB, April 2010



NTSB Investigation No. <u>SEN 17 FA/68</u> Date of Accident: <u>4/28/17</u> Accident Location: <u>Amori Ilo</u>, TX

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Date Signature Tachary Forsberg Chief Pilot RICO Aviation LLC Party Organization/Employer

<sup>&</sup>lt;sup>1</sup> In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."

NTSB Investigation No. CEN17FA168



Date of Accident: \_\_\_\_\_ April 29, 2017

Accident Location: Amarillo, TX

## **CERTIFICATION OF PARTY REPRESENTATIVE<sup>1</sup>**

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Signature

5/1/17

Les Doud - Air Safety Investigator Name & Title

Hartzell Propeller Inc. Party Organization/Employer

<sup>&</sup>lt;sup>1</sup> In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."



NTSB Investigation No. CEN17FA168

4/28/2017 Date of Accident:

Amarillo, TX Accident Location:

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Signature

Michael D. FOSTER

1

Air Safety Investigator

<u>11-May-2017</u> Date

Honeywell Party Organization/Employer

<sup>&</sup>lt;sup>1</sup> In aviation investigations this form may also be referred to as "Statement of Party Representatives to NTSB Investigation."