

**NATIONAL TRANSPORTATION SAFETY BOARD
PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT**

This form to be used for reporting civil and public aircraft accidents and incidents

BASIC INFORMATION

Accident/Incident Location
Nearest City/Place: Gardenville State: TX
ZIP: 76264 County: UBA
Latitude: 33.93535 Longitude: 96.81007
(Enter in decimal degrees or degrees/minutes/seconds)

Accident/Incident Date/Time
Date: 02/19/2023 Local Time: 10: AM
03:19:2023 Time Zone: CST

Collision with Other Aircraft: Midair On-ground None

AIRCRAFT INFORMATION

Registration Number: N464X
Manufacturer: Acro Commander
Model: Luck
Serial Number: 5164
Year of Manufacture: 1970
Amateur-Built: Yes No *If Yes: Kit/Plans Make:*
 Original Design

IFR-Equipped and Certified
 Commercial Space Flight
 Unmanned Aircraft

Maximum Gross Weight: 2475 lbs
Weight at Time of Accident/Incident: 2120 lbs
Number of Seats: 4 Flight Crew Seats: _____
Cabin Crew Seats: 2 Passenger Seats: 2
Number of Engines: 1

Category of Aircraft

- Airplane
- Balloon
- Blimp/Dirigible
- Glider
- Gyroplane
- Helicopter
- Powered Lift
- Rocket
- Ultralight
- Unknown

Type of Airworthiness Certificate

- (Check all that apply)*
- | | |
|--|---|
| Standard | Special |
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Restricted |
| <input type="checkbox"/> Aerobatic | <input type="checkbox"/> Limited |
| <input type="checkbox"/> Balloon | <input type="checkbox"/> Provisional |
| <input type="checkbox"/> Commuter | <input type="checkbox"/> Special Flight |
| <input type="checkbox"/> Transport | <input type="checkbox"/> Experimental |
| <input type="checkbox"/> Utility | <input type="checkbox"/> Special Light-Sport |
| | <input type="checkbox"/> Experimental Light-Sport |
- Certificate of Authorization or Waiver (COA)
 None Unknown

Landing Gear

- (Check all that apply)*
- Retractable
- Tricycle Tailwheel
- Amphibian High Skid

Emergency Float Skid

Float Ski

Hull Ski/Wheel

Other Launch/Recovery System

None Unknown

Engine Type (Select one)

- Reciprocating Liquid Rocket
- Turbo Shaft Solid Rocket
- Turbo Prop Hybrid Rocket
- Turbo Jet None
- Turbo Fan Unknown
- Electric

Fuel System Type (Reciprocating)

- Carburetor Fuel-Injected

Engine	Engine Manufacturer	Engine Model/Serial	Manufacturer's Serial Number	Date of Mfg. <small>month/day/yyyy</small>	Rated Power <input type="radio"/> Horsepower or <input type="radio"/> lbs of Thrust	Total Time (hours)	Time Since: (hours)	Overhaul (hours)
Eng. 1	<u>Lycoming</u>	<u>O-360-A2F</u>	<u>L-14873-36A</u>					
Eng. 2								
Eng. 3								
Eng. 4								

Last Inspection Type

- 100-Hour
- Continuous Airworthiness
- AAIP
- Conditional Inspection
- Annual
- Unknown

Date Last Inspection: 10/11/2022
month/day/yyyy

Airframe Total Time: 5129.2 hrs
hours measured at (Select one)
 Last Inspection Time of Accident/Incident

Type of Maintenance Program (Select one)

- Annual
- Conditional (Amateur-built only)
- Manufacturer's Inspection Program
- Other Approved Inspection Program (AAIP)
- Continuous Airworthiness
- Other, specify: _____

Description of Fire Extinguishing System

- None
- Specify: _____

Propeller 1

- Fixed Pitch Controllable Pitch
 Ground Adjustable

Manufacturer: MCC Cessna/Hey
Model: 1A170/CFA 760

ELT Installed: Yes No

If Yes:
ELT Manufacturer: _____
Model or Part No.: _____
TSO No.: C91 (121.5 MHz) OC91a (121.5 MHz)
 OC126 (406 MHz)

Was ELT still mounted in aircraft? Yes No

Was ELT still connected to antenna? Yes No

Did ELT Activate? Yes No

If activated:

Did ELT Aid in Locating Aircraft? Yes No

If not activated:

- Indicate Reason: Impact Damage
 Fire Damage
 Battery Expired/Damaged
 Unknown

Propeller 2

- Fixed Pitch Controllable Pitch
 Ground Adjustable

Manufacturer: _____
Model: _____

Additional Equipment (Check all that apply)

- ADS-B
- Airframe Parachute
- Angle of Attack Indicator
- Autopilot
- Data Recorder
- Electronic Flight Bag or Handheld Device
- Electronic Multifunction Display
- Electronic Primary Flight Display
- Handheld GPS
- Heads Up Display
- Onboard Weather
- Satellite Tracking Device
- Stall Warning System
- Video Recording Device
- Other, Specify: _____