			AFETY BOARD 20.1) to report						Т			
BASI	CINFORM!	TION					and the state of the state of	4			**	WEZ-F
Accider	Accident/Incident Location						Accident/Incl	<i>'</i>				
Nearest City/Place: LOGANVILLE State: GA					Date:	25/2025	<u>_</u>	ocal Time: <u>/</u>	16 45			
ZIP: 30052 Country: USA Latitude: 33-47-49.3980 Mude: 83-51-04.651W									HH:MM			
				2-51-	04.65	31W	Time Zone:	PSZAN)		<i>a</i> 02		
(Enter in	(Enter in decimal degrees or degrees:minutes:seconds)							Other Air	rcraft: (	) Midair	On-groun	ıd 🦚 None
	RATE NEO								C. Carrie			Thursday (Thomas
•	ation Number:		2 K				☐ IFR-Equip ☐ Commerc					
Manufa	icturer: AER	<u>ÖVAÇIA</u>					Unmanne		vew.			
	SEMW 1		-	<del>/</del>			Maximum Gross					
	lumber: <u>157</u>		2				Weight at Time	of Accident/l	neident: _	466	lbs.	
Year of	Manufacture:	<u> 1950</u>					Number of Scats		1	Hight Crew	Seats:l	
Amateu	r-Built: OYes	-	Original Design				Cabin Crew Sea		P	assenger Se	eats:	
	₽No		Chit/Plans	Make:			Number of Engl	ņes:/				
	ry of Aircraft	Type	of Airworthines (Check all that a		ate	Landing Ge (Check all the				e Type (Se		id Rocket
Airpla Parlie		Standar	d Special			Retractabl		ligh Skid	O Turi	iprocating bo Shaft	Solid	Rocket
OBallos OBlimp	on /Dirigible	■ Norma □ Aerob				☐ Tricycle ☐ Tailwheel		kid ki/Wheel	OTuri	bo Prop	OHybr ONone	id Rocket
O Glider		Balloo	<b>-</b>			☐ Emergenc	cy Float Hull O Turbo Fan O Unknown					
OGyroplane ☐ Commuter ☐ Special Flight ☐ Float OHelicopter ☐ Transport ☐ Experimental ☐ Amphibit			☐ Amphibia	n □s		OBled	tric					
OPowered Lift Utility Special Light-Sport Other La			☐ Other Lau ☐None	nch/Recovery Sy		Fuel Sy	stem Type	(Rectprocation	ng)			
OUltral	ight	TC#5-ct	_	mental Lig	-	LINONE		Juknown	<b>O</b> Cart		<b>○</b> Fuel I	_
OUnkn	own	None	of Authorization	or warver Unknown	(COA)				1			
Eogine	Engine Man	ifacturer	Engine Mode	l/Series	E	ngine Scrial	Date of Mfg.	Rated Horse	Power or	Total Time	Time Inspection	Since: Overkaul
						Number	(mm/dd/yyyy)	OLbs. o	f Thrust	(hours)	(hours)	(hours)
Eng. 1	CONTIN	PARAL	0300-	-A	3906	<u> </u>	06-07-1987	149	5	3937		35
Eng. 2 Eng. 3							<del>-</del>	<del> </del>				-
Eng. 4	•							<del>                                     </del>				
Last In	spection Type			Additio	nal Egu	ipment			-11 CDD			
O100-H				ADS-B	e Parachute				Up Display			
Annua 🌑					f Attack In ot				Vision Gogg rd Weather	jes		
	mous Airworthine tion Inspection	ess		Autopil Autopil Couple	3 ドルタかくしみて	odel ector			y Flight Dîsp Tumber of A		odel:	
O Unkno	w'n		10000	Data Re	corder			Satelli:	e Tracking I Jaming Syst	Device		
Date of	Last Inspectio	n: O 11 (Ja) mm/dd/yy	13024	Electron	ric Flight B	ag or Handheld De notion Display	vice	∏ Video	Recording D	evice		
Airfram	e Total Time:	3298.9	hrs	☐ Electron	nic Primary	Flight Display		☐ Wire S	trike Protect			
Hou	rs measured at 🛭	select one)		ELT In			No If Yes:	Other,		<b>6</b> ) t	ixed Pitch	
			ccident/Incident	ELT M	mufacture	AMERIKI	NG 17 123.	ггор	eller 1	00	ontrollable Pi	
	Maintenance l	Program (Se	elect One)	Model or	Part No.:	AK 450			£	ης (A)	round Adjust	able
	tional (Amateur-b			TSO No.	: <b>O</b> C91	(121.5 MHz). <b>4</b>	C91a (121.5 MH				<u> </u>	
O Manut	facturer's Inspecti Approved Inspec	on Program			OC126	6 (406 MHz)		2)	. <u> </u>	- 0 1 1	·-	100
O (AAIP	) Continuous Air	worthiness		Was ELI	still mo	unted in aircrat	17 🙆 Yes 🗘 No na? 🎾 Yes 🚭 No	Prop	eller 2		ixed Pitch	
O Other,				Did ELT	activate?	Yes ONo	~/*				Controllable P Fround Adjust	
Descrip None	tion of Fire Ex	gaidaiugņt	System	If activates If not activ	a: Did E.L vated: Ind	T aid in locating Icate Reason: L	aircraft? <b>O</b> Yes ( Impact Damage	Manu Manu	factur <del>e</del> r:_			
O Speci							amaged Unkno	wn Mode	l:			

NEW VERY SERVICE SERVI	<u> </u>				
Registered Aircraft Owner Name: SHE-RAT AVITATION					
Name: JALI M. W.C.TA	State: DE	Fractional Ownership Aircraft: OYes ONo			
City: WILMINGTON  ZIP: 19808 Country: US A	State: <u>DE</u>				
	or is also the Registered Owner	Same address as Registered Owner  Deing Business Acc.			
Name: JOHN 3. CHEN	s GA-	Doing Business As:			
City: LOGANVILLE ZIP: 30057 Country: USA		The California Designation (Therefore College,			
country Country					
Operating Certificates Held (Check all that apply)	Regulation Flight Conducted	Under Revenue Operation for FAR 121, 125, 129, 135 (Select one for each group)			
M None		R 415 Scheduled or Commuter Domestic			
☐ Flag Carrier Operating Certificate (FAR 121 ☐ Supplemental		R 431 O Non-Scheduled or Air Taxi O International			
☐ Air Cargo ☐ Foreign Air Carriers (FAR 129)		R 437 R 450			
Rotorcraft External Load (FAR 133)	OFAR 91 Special Flight	O Cargo			
☐ Commuter Air Carrier (FAR 135) ☐ On-Demand Air Taxi (FAR 135)	ONon-US, Commercial ONon-US, Non-commercial	O Mail Contract Only			
Commercial Air Tour (FAR 136)	0	Purpose of Flight for FAR 91, 103, 133, 137 (Select one)			
☐ Agricultural Aircraft (FAR 137) ☐ Pilot School (FAR 141)	OPublic Aircraft (Select one) O Armed Forces				
☐ Certificate of Authorization or Waiver (COA ☐ Commercial Space Transportation		O Aerial Application OF light Test			
Experimental Permit	O State O Local	O Air Drop OGlider Tow			
☐ Commercial Space Transportation License ☐ Other Operator of Large Aircraft	OUnknown	O Air Race/Show O Instructional O Banner Tow O Other Work U'se			
		OBusiness OPersonal OExecutive/Corporate OPositioning			
Devenue State and State	14- 26-21-2 Fit-24	OExternal Load OSkydiving			
Revenue Sightseeing Flight  O Yes  No	Air Medical Flight	OFerry OUnknown			
O YE2 00 140	I CYES (2) No				
	O Yes   Ø No				
AIREORG INEORINATION (AIR	nit accidentinotaentoceured on	approach, Anceltagh arcent, Geberaure, Gewithilise miles of an airport)			
AIRPORT INFORMATION (FIN Airport Name: SDAING VALE	nit accidentinotaentoceured on	Distance From Airport Center: 0,25 sm.			
AIRPORT INFORMATION (FIN)  Airport Name: SDAING VALE  Airport Identifier: 6644	mir sociden Unahaan Poocumed-San MFARM	Distance From Airport Center: 0,25 sm.			
AIRPORT INFORMATION (FIN) Airport Name: SPAING VALE Airport Identifier: 6644 Proximity to Airport: Ooff Airport/Airst	mir sociden Unahaan Poocumed-San MFARM	Distance From Airport Center: 0125 sm.  Direction From Airport: 240 degrees true			
AIRPORTINE ORWATION (Fin) Airport Name: SPAING VALE Airport Identifier: GGA4 Proximity to Airport: Ooff Airport/Airst Runway Information	mitrace identification (occurred equition)  FARM  rip ② On Airport/Airstrip ON/A	Distance From Airport Center: 0,25 sm.			
AIRPORTINE OR WATEN (FIN)  Airport Name: SPAING VALE  Airport Identifier: 6644  Proximity to Airport: O Off Airport/Airst	mitrace identification (occurred equition)  FARM  rip ② On Airport/Airstrip ON/A	Distance From Airport Center:			
AIRPORT INFORMATION (FINE) Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Ooff Airport/Airst Runway Information Runway ID: AH Length: 3500 Runway/Landing Surface (Check all that	rip On Airport/Airstrip ON/A  ft. Width: ISO ft.	Distance From Airport Center:			
AIRPORT INFORMATION (FINE)  Airport Name: SPAING VALE Airport Identifier: GA4  Proximity to Airport: Ooff Airport/Airst  Runway Information  Runway ID: AH Length: A500  Runway/Landing Surface (Check all that Asphalt Grass/Turf	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow	Distance From Airport Center:			
AIRPORTINE ORUATION (Finite Airport Name: SPAING VALE Airport Identifier: GA4  Proximity to Airport: Off Airport/Airst  Runway Information  Runway ID: Hength: 3500  Runway/Landing Surface (Check all that Asphalt Grass/Turf Gravel Gravel Gravel Helideck	rip On Airport/Airstrip ON/A  ft. Width: So ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown	Distance From Airport Center:			
AIRPORT INFORMATION (Finite Airport Name: SPAING VALE Airport Identifier: GA4  Proximity to Airport: Off Airport/Airst  Runway Information  Runway ID: Hength: 3500  Runway/Landing Surface (Check all that Asphalt Grass/Turf Gravel Gravel Gravel Gravel Helidack	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow Macadam Snow Macadam Snow Macadam Unknown Off-site landing area	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: Hength: 3500  Runway/Landing Surface (Check all that Asphalt Grass/Turf Gravel Grave	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow Macadam Snow Macadam Snow Macadam Unknown Off-site landing area	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: Hength: J500  Runway/Landing Surface (Check all that Grass/Turf Gravel Gravel Gravel Gravel Helideck Heliport Helideck Heliport Helistop  Approach/Departure Segment (Select or OTaxi OVFR Departure OTakeoff OUFR Departure Pro	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: Hength: 3500  Runway/Landing Surface (Check all that Asphalt Grass/Turf Gravel Gravel Gravel Helideck Heliport Helideck Heliport Helistop  Approach/Departure Segment (Select or OTaxi OVFR Departure	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area	Distance From Airport Center:			
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Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: Hength: J500  Runway/Landing Surface (Check all that Grass/Turf Gravel Gravel Gravel Gravel Helideck Heliport Helideck Heliport Helistop  Approach/Departure Segment (Select or OTaxi OVFR Departure OTakeoff OUFR Departure Pro	rip On Airport/Airstrip ON/A  ft Width: SO ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area	Distance From Airport Center:			
AIRPORTINE ORWATION (FIRM)  Airport Name: SPAING UME Airport Identifier: 66A4  Proximity to Airport: Off Airport/Airst  Runway Information  Runway Information  Runway ID: Hength: 3500  Runway/Landing Surface (Check all that Grass/Tune)  Gravel Gravel Gravel Gravel Helideck Heliport Helideck Heliport Helideck OTaxi OVFR Departure OTaxi OVFR Departure OTakeoff OIrr Departure Profitation  IFR Approach (Check all that apply)  None  DADF/NDB DPAR	rip On Airport/Airstrip ON/A  ft. Width: So ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area  be On Instrument occdure/Clearance  On Instrument occdure/Clearance  On Instrument occdure/Clearance	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: 66A4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: 4 Length: 3500  Runway/Landing Surface (Check all that Concrete Gravel Helideck Heliport Helideck Heliport Helideck OTaxi OVFR Departure OTaxi OVFR Departure OTakeoff OIrr Departure Profital Climb  IFR Approach (Check all that apply)  None  ADF/NDB PAR SDF Sidestep	rip On Airport/Airstrip ON/A  ft. Width: SO ft.  apply)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area  as)  On Instrument occdure/Clearance OLanding  DMLS Practice DLDA GPS	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: GA4 Proximity to Airport: Off Airport/Airst  Runway Information Runway ID: Hength: J500  Runway/Landing Surface (Check all that Asphalt Gravel Gravel Helideck Heliport Helideck Heliport Helideck GTaxi OVFR Departure OTAXi OVFR Departure OTAXi OVFR Departure OTAXi OVFR Departure Profitial Climb  IFR Approach (Check all that apply)  None  ADF/NDB PAR SDF Sidestep VOR/TVOR GILS VOR/DME Localizer Only	rip On Airport/Airstrip ON/A  rip On Airport/Airstrip ON/A  rip the Width: SO ft.  rapphy)  Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area  ris)  On Instrument occurred on the structure of the	Distance From Airport Center:			
Airport Name: SPAING VALE Airport Identifier: 6644  Proximity to Airport: Off Airport/Airst  Runway Information  Runway Information  Runway/Landing Surface (Check all that Grass/Turf Gravel Gravel Helistop Helistop Approach/Departure Segment (Select on OTaxi OVFR Departure OTakeoff OIFR Departure Profitation OIFR Dep	rip On Airport/Airstrip ON/A  ft. Width: SO ft.  apply) Ice Snow Macadam Water Metal/Wood Unknown Off-site landing area  b)  cedure/Clearance OL anding  MLS Practice UDA GPS ASR Unknown	Distance From Airport Center:			

Mercian Grewn	EMPER	PINEOR	MATION				11 A		4			Ny V
"Flight Crewmember 1" OCaptain OFirst Office	Responsib	ilities at the	Time of Acc	ident/Inciden	it	∠II	. <b>Ο</b> Ε1:	F	001	701: 1		
"Flight Crewmember 1			suident Phot	Orngat instr	uctor U	Check Puc	x Ornghi	rugmeer	Other	Flight Cre	N .	
"Flight Crewmember 1"												
First Name:					. C	ity of Res	sidence: L	OGAL	UMU	<u> </u>		
Middle Initial:		W				-	A			005:	L	**********
Last Name: CARE							USA		211	U U Z A		
Age at time of Acciden		10	*****			ountry:				(mm/dd/yv		
Age at time of Acciden	mancaent.					oate of Bir Certificate	***		****	mmaayy	<i>yy)</i>	
Degree of Injury	Seat Oce	erenîad	r yr			-				1.0.	- 6-3 - YX	
ONone Serious	& Left	O Front	t <b>Ö</b> Uni	(TND WIT)		traint Ty <sub>l</sub> Avallable	•	Used		Innat	able Rest	Taints.
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O Minor	O Center	O Singl	le		_	Lap on		♠ Lap on		i i	nstalled	
Pilot Certificate(s) (Che	ck all that app					O 3-point O 4-point		Ó4-peint			lot Deploy Deployed	ed
□ None □ Flig □ US Militæry ■ Priva	ot Instructor	Comm Recrea				O 5-point	ŧ	O 5-point			Inknown	
Airline Transport  Fore	igo	□ Sport	r/()(tet			O Unkno	•	O Unkano	wn	1 -		
- V-11-11-11-11-11-11-11-11-11-11-11-11-11	nt Engineer			Alleka assay			testraint, ap			-	PT	
Principal Occupation		Certificate					tificate Val	•		1	of Last N	Tedical
O Pilot Other	O None	Clas Dasi		O Unknov			itations/waiv ions/waivers		Jnknown J/A	09/2	413034	
O Unknown	O Class 2			Sport Pilot only		pecial Issu		•		lm	dddyyyy	10
Medical Certificate Lin	itations					ical Cert	ificate Spe	cial Limit	ations			
MUST	WEAR	COLREC	TIVE LO	1865	1		x //	A				
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Personal Flight Equipm			,,	L .		-						
Fire resistant flight suit Helmet visor		Helmet Night vision go		Laser protective Personal flotati		55 <b>0</b> 8	Personal loc Other: <u>\$6</u>	ator beacon	Q <b>VI</b>	A7 Fire r	esistant gl	)ves
August -		1.1800 Amion Eo	-				VILLES. 1,70-1	<del></del>	, ,	. ,		
Date of Last Flight Rev or Equivalent, Includin		1	· ·	lew Aircraft								
FAR 121/135 Checks:	° 04/22	12024	Make:							·		_
		idiyyyy	Model:	72 N			Action					
Airplane Rating(s)		Aircraft Ra	D 1	Instrument !			Instructor		)			
(Check all that apply)	3 -	all that apply)		(Check all that	apply)	1	(Check all to	hat apply)		<del></del>		4
Single-Engine Land  Single-Engine Sea	Maira Maira			None Airplane			M None Airplane	Single-Eng	±in)e		unent Air unent Heli	
Multiengine Land	☐ Bail	loon		Helicopter			☐ Airplane	Multiengin		☐ Helic	opter	
Multiengine Sea	☐ Glid			Powered Li	ft	- 1	☐ Cyroplan			☐ Glide ☐ Sport		
	☐ Hel	icopter	1			1	L LOWOLD	1 1111		L Sport	ь	
		vered Lift				<b></b> }	aria w 1 Mrs				-	
Type Ratings and Appli	cable Logbe	ok Endorsei	ments				Student E	Radorseme	nts (Inch	ude dates)		
	N/A					- 1	N/I	4				
	121					1	· /\/	, )				
						1						
Flight Time (Enter	A YE	77,443,84-1	Airplane	A (		Inst	runent	] "		Lighter	Multi-	Tail-
hours for each box)	All Aircraft	This Make & Model	Single Engine	Airplane Multiengine	Night	Actual	Simulated	Rotorcraft	Glider	Than Air	engine Rotorcraft	wheel
Total Time	3164.6	110.5	34219	694.4	147.1	706	129.2	0	0	ථ	0	1511.8
	2962.2	1105	2415.0	1.50,0	147-1		12902		Q	es	0	1500,0
Time as Instructor	۵	0	Ö	0_	0	0	0	ث	(1)	0	0	12
This Make/Model			A	A Translation					14.1314			
Last 90 Days	11.3	10.5	10.5	0.8	0	0	0	0	0	0	Q	10.5
Last 30 Days	3,0	2-7	2.2	0.8	0	0	0	0_	d	٥	0_	1,3-
Last 24 Hours	0	٥	0	0	0	0	0	10	6	0	0	0

HAMINET TO BE THE THE	nelejes <i>ou</i>	INEGEM	ATION:									
STREET Chammanhay 2" D.	aenaneihilit	ice at the Ti	me of Accir	ient/Incident	Managed Managed Inc.			****				
O Captain O First Officer O	Pilot O Co	-Pilot <b>O</b> Stu	dent Pilot (	)Flight Instructo	η <b>O</b> Che	ck Pilot	🔿 Flight Eng	gineer O	Other Flig	ht Crew		Ì
"Flight Crewmember 2" w												
"Flight Crewmember 2" Id												
First Name:							lence:					
Middle Initial:					Stat	e:		Z	IP:			
Last Name:					Cou	intry:						
Age at time of Accident/In				,			ı:			ım/dd/yyyy)		
Age at time of Accidentin	Morocor.				Cer	tificate N	umber:			_		
Degree of Injury	Seat Occu	nied				int Type		•		Inflatab	le Restra	aints
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OUnknown OFatal	<b>O</b> Right	ORear				None Lap only		O None O Lap only			Installed	
<b>O</b> Minor	O Center	OSingle				3-point	(	3-point		□Ins □No	tatied t Deployed	di
Pilot Certificate(s) (Check					(	4-point		O 4-point O 5-point		□De	ployed	
□None □Flight Is □US Military □Private		☐ Comme: ☐ Recreati				5-point Unknow		O Unknow	n	□Un	known	
☐ Airline Transport ☐ Foreign	ı	Sport	•		1		~ straint, spec	cify:				
Student Plight E		autificata					ficate Valid			Date of	Last Me	edical
Principal Occupation	Medical C	ertificate O Class	. 3	O Unknows			ations/waive	ars OU	nknown			
O Pilot O Other	O Class 1	O Basic		<del>-</del>	Ōw	th limitatio	ms/waivers	ŌN	/ <b>A</b>	277222	dd/yyyy	
O Unknown	O Class 2	O Drive	er's License (	Sport Pilot Only)	<del></del>	cial Issuar		4			7377	
Medical Certificate Limits	ations				Medic	al Certif	icate Speci	iai Limita	tions			
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Personal Flight Equipment (C				Laser protective	risor/olass	es 🗖	ersonal Loca	ator Beacon	(s) (PLB)	☐ Fire re	sistant glo	ves
☐Fire resistant flight suit ☐Helmet visor		lelmet light vision gog		Personal flotatio			)ther:				<u></u>	
				view Aircraft	****							
Date of Last Flight Review or Equivalent, Including	YY											_
FAR 121/135 Checks:							~				·	
	mm/do			T - 4 P		Т.	nstructor l	Rating(s)		**		
Airplane Rating(s) (Check all that apply)		Aireraft Rat	ing(s)	Instrument R (Check all that a			Check all the					
Single-Engine Land	□ None			□None	** **		None			Instrum		
☐ Single-Engine Sea	☐ Airsl	nip		☐ Airplane			Airplane S Airplane I			☐ Instruc ☐ Helico		obrer
☐ Multiengine Land ☐ Multiengine Sea	☐ Balle			☐ Helicopter ☐ Powered Lif	ŧ		Gyroplane			☐ Glider		
□ Mundengme Sea	Gyro	plane				[ [	Powered 1	li <del>ft</del>		☐ Sport		
	Heli	copter ered Lift										
Type Ratings and Application			nents				Student En	dorsemen	ts (Inchu	de dates)		
Type Marings and White		A NO CONTRACTOR OF STATE				}						
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			1 Ai-1	1				Ī		1 -	Multi-	\
Flight Time Enter	All	This Make	Airplane Single	Airplane	3.73		Forment Characteristics	Rotorcraft	Glider	Lighter Than Air	engine Rotoreran	Tail- wheel
hours for each box)	Aircraft	& Model	Engine	Multiengine	Night	Actual	Simulated	AMERICAN			AND VI APE	<u> </u>
						—−		<del>                                     </del>	<del>                                     </del>			_
Total Time				T		i	· V		I	1	1	
Pilot in Command (PIC)				· · · · · · · · · · · · · · · · · · ·		<u>.</u>	<del> </del>	,		<u> </u>		
Pilot in Command (PIC) Time as Instructor						<u> </u>						
Pilot in Command (PIC) Time as Instructor This Make/Model												
Pilot in Command (PIC) Time as Instructor												

	X	1/A-		FO	RM 6120.1 • OMB NO. 314	7-0001 • EXP	IRES 04-30-2027
<u> Maddision in a saidtean an a saidtean a</u>	BERSVEWNSFR	S Cabin draw	complete the	reliewii	ngunformation.)		
Additional Crewmember Information		7			Seat Occupied		Injury
First Name:	City of Residen	nce:		•••	OLeft ORea OCenter OSing	gle (	O None O Minor O Serious
Middle Initial:					ORight OUnd OFront		O Serious O Fatal O Unknown
Last Name:	Country:			_			
Personal Flight Equipment (Check all that	<i>apply)</i> et □	Laser protective		□Perso	onal locator beacon(s) (PLE	3) DFire re	sistant gloves
☐ Helmet visor ☐ Night Pilot Certificate(s) (Check all the apply)	vision goggles	Personal flotation	on	ПОще	Restraint Type	:	Inflatable
None	☐ Commercial		☐US Military		Available Use	1	Restraints
Private Recreational	Airline Transport		Foreign		O None ON		Not Installed
☐ Student ☐ Sport	☐Flight Engineer						Installed
Type Rating/Endorsement for	Total Flight Time at	the Time			O 4-point O4-	point	Not Deployed
Accident/Incident Aircraft?	of this Accident/Inci		hrs.				Deployed Unknown
					O Unknown OU	nknown -	30,11101111
Yes No	1				Supplemental Restraint	, specify:	
!							
Additional Crewmember Information					Seat Occupied		Injury
					OLeft ORear OCenter OSingle		O None O Minor
First Name:	City of Reside	nce:			ORight OUnknow		O Serious
Middle Initial:	State:		Zip:		OFront	1	OFatal
							OUnknown
Last Name: Personal Flight Equipment (Check all that							
☐Fire resistant flight suit ☐Helt	net [	Laser protective Personal flotat			onal Locator Beacon(s) (Pl er:		
	8.00				Restraint Typ		Inflatable
Pilot Certificate(s) (Check all the apply)  None	☐ Commercial		■US Military		Available U	Jsed	Restraints
☐ Private ☐ Recreational	☐ Airline Transport		Foreign			lone ap Only	Not Installed
☐ Student ☐ Sport	Flight Engineer				O 3-point O3		Installed
					O 4-point O4		Not Deployed
Type Rating/Endorsement for Accident/Incident Aircraft?	Total Flight Time a of this Accident/Inc		lours	3.			Deployed Unknown
Accidentalicident wateratt.	01 1020 101				Supplemental Restraio	-	
☐Yes ☐No					Supplemental restrain	i, speeny.	
PASSENCER(S)//OTHER(PE	RSONNEL (Ineli	ide cabin crev	r, continue on	separa	te:sheet; h:necessary.)		
Number of Passengers			Ï				
Passenger Information		Seat	Injury		Restraint Type	Inflatable	_
Lassenger Intolmanon					TT3	Restraints	
		OLeft	ONone	Availal O None		□Not	□Under 5
First Name: City	-	O Center	OMinor	O Lap	Only QLap Only	Installed	years
Middle Initial: State:	Zip:	ORight	OSerious	Q 3-po		☐Installed ☐Not	If under 5
	ry:	OUnknown	OFatal OUnknown	0 4-po 0 5-po		Deployed	years,
Last name: Count	.y	Row:		O Unk		Deployed	
OCrew OPassenger	OOther			Supple	mental Restraint, specify:	Unknow	Restraint OLap-Held
					•		OUnknown
Personal Flight Equipment (Chack all that a	oply)					1	1
☐Fire resistant flight suit		1					
☐Helmet ☐Laser protective visor/glasses						1	
□Laser protective visoriglasses □PLB							
☐Fire resistant gloves							
☐Night vision goggles ☐Helmet visor						1	
☐Personal flotation				}		1	1
Other:						1	1

		T*** I		Available Used	T	
First Name:	City:	OLeft OCenter	ONone OMinor	O None O None O Lap Only	□Not Installed	∐Under 5 years
Middle Initial: State:	Zip:	ORight OUnknown	OSerious OFatal	O 3-point O 3-point O 4-point O 4-point	□Installed □Not	If under 5
Last name:	Country:	Row:	OUnknown	O 5-point O 5-point O Unknown	Deployed Deployed	years, Ochild
OCrew OPassen	ger OOther			Supplemental Restraint, specify	Unknown	Restraint OLap-Held
Personal Flight Equipment (Check all a    Fire resistant flight suit    Helmet    Laser protective visor/glasses    PLB    Fire resistant gloves    Night vision goggles    Helmet visor    Personal flotation    Other:	that apply)					OUnknown
		OLeft	ONone	Available Used O None ONone	□Not	∐Under 5
First Name:		OCenter .	QMinor .	O Lap Only O Lap Only O 3-point O 3-point		years
Middle Initial: State: State:	<del></del> -	ORight OUnknown	OSerious OFatal	O 4-point O4-point	□Not Deployed	If under 5 years, Ochild Restraint
Last name:		Row:	OUnknown	O 5-point O 5-point O Unknown O Unknown	Deployed Unknown	
OCrew OPasser	_			Supplemental Restraint, specif		OLap-Held OUnknown
Personal Flight Equipment (Check all   Fire resistant flight suit   Helmet   Laser protective visor/glasses   PLB   Fire resistant gloves   Night vision goggles   Helmet visor   Personal flotation   Other:	that apply)			Available Used		
First Name:	City:	QLeft	ONone	O None ONone	□Not Installed	☐Under 5 years
Middle Initial: State:		O Center O Right	OMinor OSerious	O Lap Only O Lap Only O3-point O3-point	☐Installed☐Not	If under 5
Last name:		OUnknown	OFatal OUnknown	O 4-point O4-point O5-point OUnknown OUnknown	Deployed	years,
	onger <b>O</b> Other	Row:		Supplemental Restraint, speci	Unknown	
Personal Flight Equipment (Check all   Fire resistant flight suit   Helmet   Laser protective visor/glasses   PLB   Fire resistant gloves   Night vision goggles   Helmet visor   Personal flotation   Other:	l that apply)					<b>O</b> Unknowa
FLIGHTITINERARYINE	ORMATION		F 2 1 6 3 W			
Last Departure Point	Time of	Flight Informat			Type Flight Plan	a Filed
Airport ID: 66A4	Departure Flig	ht Number:	Air	rport ID: <u>LGAU</u>		Over/ier Oier
City: LOSANVILLE		rating as Flight	Cit	y: LOGANVICE	VFR OMilitary	OUnknown
State: CB	HH:MM		Sta	ate: <u>641</u>	VFR OVFR	
Country: USB	Time Zone:		Co	numbers: USA	Activated? OX	es ONo nknown

Type of ATC Clears	ance/Service	(Check all that a	เกตไง)				
				<b>—</b> 1	La Welliamina	Cenina	
Certificate of Authoriz		Special VFR	Special IFR.	□ VFR Flig		Cruise	
☐ VFR		FR	□ VFR On Top	Traffic A	dvisory 🗆	Unknown/NA	
					•	None	
Airspace where the	accident/inc	ident occurre	d (Check all that ava	oly)			
Class A	Class G	24404 7	☐ Military	Operations Area (M	(OA) 🔲 Specia		
Class B	Прещо А	ea		Advisory Area		raffic Control Area	
Class C	□Warning		🗖 Jet Trair	ing Area	∐ Unko	own	
Class D	Prohibite		TRSA	_			Cition
Class E	Restricte		☐ FAR 93			e of In-Flight Occurrence:	7 40 A MSL
WEATHER INF	ORMATI	ON AT TH	ACCIDENT/	INCIDENT S	Ŋ <b>E</b>		
Source of Pilot Wes	ther Inform	ation			Weather Observ	ation Facility	
(Check all that apply)					- 10. TO K	٠ ١٠	
☐National Weather Ser		□Company			Pacility ID:	VC 1530	<del></del>
☐Flight Service Station		<b>∐</b> Military			Time Zone:	7642 A)	_
☐TV/Radio		□Internet			Distance from Acci		
Automated Report		□None			Distance from Acci	ident Site: 150	degrees true
☐Blectronic Flight Bag	-Application:	<b>∐</b> Unknowa			Direction from Acc	ment site. 770	6,000 244
☐On-Board Weather							
Basic Conditions		Lowest Clou	d Condition	Light Condition			
<b>O</b> VMC		Height C	LEAR	1_	<b>.</b>	An enter	<b>△</b> ¥1_1
OIMC			ft. AGL	O Dawn	O Dusk	O Dack Night O Bright Night	OUnknown
OUnknown	7541	Ceiling		Ceiling Height	ONight t	O Bright Night	
Sky/Lowest Cloud Co	ondition	Сения		Cenny Hongo		kGL in	(777)
6 Clear	OThin Broker		lear)				(T) or(T)
O Few	<b>Ö</b> Thin Overca	ışt OBroken					(F) or(F)
O Partial	OUnknown -	O Overcas	t			Dewboing:	<u> </u>
Obscuration		Obscure	d				
O Scattered		O Indefini	te			ì	
•		O Unknov					
1							
	1 337	nd Direction	Wind Speed	<u></u> .	Wind Gusts	Visibility , ,	<u></u>
Altimeter Setting:			□Calm	•	Not Gusting		<u></u> miles
no all	1—	/ariable	Light and	Variable	er	RVR:	feet
30,24 (Hg),or_	(mb)	or	,	)F	Speed:	kts RVV:	miles
	Di	ection:	Speed:	kts		Density Altitude:	<u> </u>
		grees true			<u> </u>	Restriction to Visib	ility (Check all that
Type of Precipitation	(Check all the	t apply)				apply)	HILLY (CAREER MIN HAR)
<b>i</b> _			: . D-:-			□None	□Fog
None	□Drizzle		ezing Rain			☐Blowing Dust	Ground Fog
□ Rain	☐ Ice Pell		ow Shower			☐Blowing Sand	□Haze
□Snow	Snow F		Pellets Shower			☐Biowing Snow	□Ice Fog
□Hail	□Snow C		ezing Drizzle			☐Blowing Spray	🗂 Smoke
Rain Showers	☐ Jœ Cry	stals				Dust	Unknown .
T-4 T 4		Interesta	of Precipitation	Icing Actual		Turbulence (Check	all that apply)
Idng Forecast	T		or a certhrenon	Amount	Туре	Type	Severity
Amount	Type	OLight OModern	Alexander (	ONORE	ÔŃA	None	∐Light
<b>♥</b> None	ON/A	OModers OHeavy	tue .	OTrace	ORime	□Clean Air	☐Moderate
OTrace	ORime OClass	●N/A		ÖLight	OClear	Terrain-Induced	■Severe
OLight	OClear OMissed	OUnknor	2/0	OModerate	OMixed	Convective	Extreme
OModerate	OMixed OUtstandard	1 Ourse	n A	OSevere	OUnknown	Turbulence	
OSevere	OUnknown			OUnknown			
OUnknown NOTAMs (D and F)	DC) ATDMET	a SIGMETa P	IREPs in effect at th		ent/incident:		
LOT WAIR (D and k)	owy, MINITED	09 1321311222223, K					
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	AIRGRAFITAN	ID OTHER PROP	EMM	Aircraft Explosion	
ircraft Damage None Minor	Substantial ODestroyed OUnknown	Aircraft Fire  None Oin-Flight Oon-Ground	OBoth Ground and In-Flight OFire at Unknown Time OUnknown	None OIn-Flight OOn-Ground	OBoth Ground and In-Flight OFire at Unknown Time OUnknown
	mage to Aircraft an	d Other Property (Use	additional sheet, if necessary.)		
2 7 RE	es damaged	) 	- 1 - THE STATE OF ST	) FILEN ILA	LE COOLITE SECRETARY
WING	s superately	FROM FUSCIAGO	E LEFT LANDING GOAL	( FOCH/61), W/N	O 21KO11 a sucrition
PROPERLE	OR AND TO	ALCONSTIC	FORELAGE BE	<b>I</b> )	
		GRASKR		The State of the S	
IARRATIVE	HISTORY OF	LIGHT (Please sypt	or print(n)nk) circumstances leading to and n	ature of accident/it	ocident. Describe terrain and
jelude wreckage	distribution sketci	h if pertinent.Attach e	extra sheets if needed. State dep	parture time and lo	cation, services obtained, a
itended destina	tion. Provide as m	uch detail as possible	•		
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	SEE	F BACK T			
	<i>→</i> •	10,00			
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OPERATOR	OWNER SAFE	<u>ararecommen</u>	DATION (How could this acclude	dent/incidem have:	DE CONTROVENCE DE LA CONTROL D
	EXECUTING	A GO AR	OUND 5 SECONDS S	SOUNTER MA	ty HAVE
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	dLUKE (If more	space is needed, continue o	m a separate sheet.}	
Was there Mechanical Malfunction/Failure?	☐Yes WNo		Total Time/ Cycles	
(If yes, list the name of the part, manufacturer, p	part no., serial no., c	and describe the failure.)		
				Hours
*				Cyrolos
				Cycles
			Time Since This	Part Inspected/Overhauled
			Anne Blice Ills	2 as t imaperious over manage
			charled the same of the same o	_Hours
FUEL & SERVICES INFORMATIO	New State of the New York			
Fuel on Board at Last Takeoff	Fuel Type	and the second of the second o		25 22 25 25 25 25 25 25 25 25 25 25 25 2
(Convert from pounds, as necessary)	@100 Low Lead	OJet A	VA behaviou Q	
17	O Automotive	OJet A-J	Oother, specify	
Gallons	Ý.			(1)
Other Services, if any, prior to departure:		11 12 14 15 15 15 15 15 15 15 15 15 15 15 15 15		
Acres on wall bring to achartere.				
Yaunan yang kanangan			, , , , , , , , , , , , , , , , , , , ,	9
EVACUATION OF AIRCRAFT		to secolar and colors of the control of		
Was an emergency evacuation of the aircraft	performed?	□Yes ₩No		The state of the s
Method of Exit - Describe how the occupants of	xited and how man	y occupants evacuated each l	ocation:	
01	ا به صدار سر	N 15 12		l l
PILOT EXITAL LA	279 CATISAN	13001		
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				/4
OTHER AIRCRAFT - GOLLISION		ergagonios Liela Belonigiis elongsas and c		
Aircraft Registration Number Manufact			Damage to Other Aircraf	
And that Registration (Addition	u		Destroyed	Minor
Model: _			Substantial	None
Registered Owner of Other Aircraft	»/IA	Pilot of Other Alreraft	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	··· 1 ···
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Name:		Name:		
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II		Charles	ZIP:	
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Country:	1.443	Country:		
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Country:  ADDITIONAL INFORMATION (Add  Departute time 1545 EST  After about a 1 hour fliight, I was on final a	itional space for an	Country:	e airport. Due to the loc	al geography we always
Country:  ADDITIONAL INFORMATION (Add  Departute time 1545 EST  After about a 1 hour fliight, I was on final a take off runway 06 and land runway 24. The	itional space for an pproach to runway iere was bright su	Country:  newers to any question.)  y 24, the only runway at the new in my eyes which we have the control of th	e airport. Due to the loc was overpowering my si	al geography we always unglasses, I tried to
Country:  ADDITIONAL INFORMATION (Add  Departute time 1545 EST  After about a 1 hour fliight, I was on final a take off runway 06 and land runway 24. Thidentify familiar landmarks peripherally, but	pproach to runway ere was bright sul	Country:  Iswers to any question.)  y 24, the only runway at the nine in my eyes which were of my position in the lange of	e airport. Due to the loc was overpowering my si ding area. I attempted t	al geography we always inglasses, I tried to o go around but hit trees.
ADDITIONAL INFORMATION (And Departute time 1545 EST  After about a 1 hour fliight, I was on final a take off runway 06 and land runway 24. Thidentify familiar landmarks peripherally,, but The airplane in a climbing left turn attitude remaining aircraft settling on its left side. I	pproach to runway ere was bright sul t became unawa hit trees and spyr	Country:  15 Swers to any question:)  24, the only runway at the nahine in my eyes which were of my position in the land the plane to the left, which	e airport. Due to the loc was overpowering my si ding area. I attempted t h resulted in both wings	al geography we always inglasses, I tried to o go around but hit trees. I being removed and the
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	stand that the information provide		
Date of this report:	Name of Pilot/Operator: JOHA		
01/07/2025	Signature:	-	
mm/kd/yyyy	or- Check next to electronically sign t	his document	
If a person other than Pilot/Operator is	0		
	ning this report		
Name:		Title:	
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	FOR NTSB U	SE ONLY	
NTSB Accident/Incident No.	Reviewed by NTSB AS Division	Name of Investigator	Date Report Received
ERA25LA085	ERA	Read	1/14/2025