

DCA23LA125

OPERATIONAL FACTORS/HUMAN PERFORMANCE

Group Chair's Factual Report - Attachment 9

Party Forms - redacted

May 25, 2023



NTSB Investigation No. DCA23LA125

Date of Accident: 01/13/2023

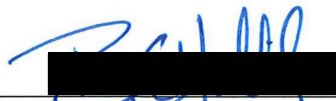
Accident Location: _____

CERTIFICATION OF PARTY REPRESENTATIVE¹

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 lose party status 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, if the party coordinator for my party, take all reasonable steps to ensure that the employees and participants of my organization 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 coordinator or 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 Investigator-in-Charge (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's 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.



Signature

02/13/2023

Date

BRYAN E. HOLLIDAY APA ASAP ERC COORDINATOR

Name & Title

ALLIED PILOTS ASSOCIATION

Party Organization/Employer

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



NTSB Investigation No. DCI231125
Date of Accident: 01/13/2023
Accident Location: _____

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Signature Date 1/19/23

Craig Stroup, Deputy Chair, ASAP, APA National Safety Committee

Name & Title

Allied Pilots Association

Party Organization/Employer

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NTSB Investigation No.DCA23LA125

Date of Accident: _/13/2023_

Accident Location: KJFK

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[Redacted Signature]

Signature

Date

William Peterson Boeing 777 Standards Coordinator/ Checkpilot American Airlines

Name & Title

American Airlines

Party Organization/Employer

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