

NTSB Investigation No. 1. PRO 9MA/59
Date of Accident: 3/22/09
Accident Location: BOTTE, Nowracid

### 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.

Signature

Name & Title

Crane Aerospace

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 Investigation No.\_ Date of Accident:

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MANAGER,
CENTRIFUGAL PUMPS

<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 Investigatio	n No.	WPR09MA159	
Tate of Accidents			

Accident Location: Butte, Montana

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Party Organization/Employ

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NTSB Investigation No	WPR09 MA159
Date of Accident:	3/27/09
Accident Location: 8	WITE, MONTANA

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	10.25.10	
Signature	Date	_
TEST LAB TECH Name & Title	·	
CRANE AEROSPACE		
Party Organization/Employer		

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



NTSB Investigation	No <i>V</i>	UPR	09	MA159
Date of Accident:	3/20	109		
Accident Location: _	' M	ONTH	<b>√</b> /4	

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A so	Malay 1		10/20/2010	
Signature			Date	
MICHRE Name & Title	R. REIGHAND	SR. FNGINER	<u>K</u>	
Party Organization	<i>AFROSPACE</i> /Employer			

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# STATEMENT OF PARTY REPRESENTATIVES TO NTSB INVESTIGATION

Aircraft Identification 1128cm

	Registration Number N129	3cm		
	Make and Model Pilatu	5 PC-12		
	Location Butte, MT Date 3-22-2009			
The undersigned hereby acknowledge that they are participating in the above- referenced aircraft accident or incident investigation (including any component tests and teardowns or simulator testing) on behalf of the party indicated adjacent to their name, for the purpose of providing technical assistance to the National Transportation Safety Board.				
The undersigned further acknowledge that they have read the attached copy of 49 C.F.R. Part 831 and have familiarized themselves with 49 C.F.R. § 831.11, which governs participation in NTSB investigations and agree to abide by the provisions of that regulation.				
It is understood that a party representative to an investigation may not occupy a legal position or be a person who also represents claimants or insurers. The placement of a signature hereon constitutes a representation that participation in this investigation is not on behalf of either claimants or insurers and that, while any information obtained may ultimately be used in litigation, participation is not for the purposes of preparing for litigation.				
By placing their signatures hereon, all participants agree that they will neither assert, nor permit to be asserted on their behalf, any privilege in litigation, with respect to information or documents obtained during the course of and as a result of participation in the NTSB investigation as described above. It is understood, however, that this form is not intended to prevent the undersigned from participating in litigation arising out of the accident referred to above or to require disclosure of the undersigned's communications with counsel.				
SIGNATURE NAME (Print)	PARTY	<u>DATE</u>		
Tom Me Creary H	artzell Propeller lac.	3/26/09		
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(Continued on reverse side)				