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: Lake Havasu State: AZ
ZIP: 86404 Country: USA
Latitude: _____ Longitude: _____
(Enter in decimal degrees or degrees:minutes:seconds)

Accident/Incident Date/Time

Date: 12/01/2021 *mm/dd/yyyy* Local Time: 12:30pm
Time Zone: MST

Collision with Other Aircraft: ○ Midair ○ On-ground ◉ None

AIRCRAFT INFORMATION

Registration Number: N81CB
Manufacturer: Cessna
Model: Citation Mustang
Serial Number: 510-0439
Year of Manufacture: 2013
Amateur-Built: ○ Yes ○ No *If Yes:* ○ Kit/Plans ○ Original Design Make: _____

☑ **IFR-Equipped and Certified**
☐ **Commercial Space Flight**
☐ **Unmanned Aircraft**

Maximum Gross Weight: 8730 lbs
Weight at Time of Accident/Incident: 6300 lbs
Number of Seats: 6 Flight Crew Seats: 2
Cabin Crew Seats: _____ Passenger Seats: 4/5
Number of Engines: 2

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
☑ Normal	☐ Restricted
☐ Aerobatic	☐ Limited
☐ Balloon	☐ Provisional
☐ Commuter	☐ Special Flight
☐ Transport	☐ Experimental
☐ Utility	☐ Special Light-Sport
	☐ 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/Series	Manufacturer's Serial Number	Date of Mfg. *mm/dd/yyyy*	Rated Power ○ Horsepower or ◉ lbs of Thrust	Total Time (hours)	Time Since: Inspection (hours)	Time Since: Overhaul (hours)
Eng. 1	Pratt & Whitney	PW615F	LB0899	02/21/2013	1460	872.4	0	0
Eng. 2	Pratt & Whitney	PW615F	LB0898	02/19/2013	1460	872.4	0	0
Eng. 3								
Eng. 4								

Last Inspection Type
○ 100-Hour ◉ Continuous Airworthiness
○ AAIP ○ Conditional Inspection
○ Annual ○ Unknown

Date Last Inspection: 08/26/2021 *mm/dd/yyyy*
Airframe Total Time: 835.1 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: Halon Fire Bottle for engine fire

Propeller 1 ○ Fixed Pitch ○ Controllable Pitch ○ Ground Adjustable
Manufacturer: _____
Model: _____

Propeller 2 ○ Fixed Pitch ○ Controllable Pitch ○ Ground Adjustable
Manufacturer: _____
Model: _____

ELT Installed: ◉ Yes ○ No
If Yes:
ELT Manufacturer: ARTEX
Model or Part No.: C-406N
TSO No.: ○ C91 (121.5 MHz) ○ C91a (121.5 MHz) ◉ C126 (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

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:

OWNER/OPERATOR INFORMATION

Registered Aircraft Owner

Name: Byron R Baker

Fractional Ownership Aircraft: ○ Yes ○ No

City: Houston

State: TX ZIP: 77019

Country: USA

Operator of Aircraft ☑ *Same As Registered Owner* ☑ *Same Address as Registered Owner*

Name:

Doing Business As:

Air Carrier/Operator Designator (4 Character Code):

City:

State: ZIP:

Country:

Operating Certificates Held *(Check all that apply)*

- ☐ None
- ☐ Flag Carrier Operating Certificate (FAR 121)
- ☐ Supplemental
- ☐ Air Cargo
- ☐ Foreign Air Carriers (FAR 129)
- ☐ Rotorcraft External Load (FAR 133)
- ☐ Commuter Air Carrier (FAR 135)
- ☐ On-Demand Air Taxi (FAR 135)
- ☐ Commercial Air Tour (FAR 136)
- ☐ Agricultural Aircraft (FAR 137)
- ☐ Pilot School (FAR 141)
- ☑ Certificate of Authorization or Waiver (COA)
- ☐ Commercial Space Transportation Experimental Permit
- ☐ Commercial Space Transportation License
- ☐ Other Operator of Large Aircraft

Regulation Flight Conducted Under

- ◉ FAR 91 ○ FAR 129 ○ FAR 415
- ○ FAR 103 ○ FAR 133 ○ FAR 431
- ○ FAR 121 ○ FAR 135 ○ FAR 435
- ○ FAR 125 ○ FAR 137 ○ FAR 437

- ○ FAR 91 Special Flight
- ○ Non-US, Commercial
- ○ Non-US, Non-commercial

- ○ Public Aircraft *(Select one)*
  - ○ Armed Forces
  - ○ Federal
  - ○ State
  - ○ Local
- ○ Unknown

Revenue Operation for FAR 121, 125, 129, 135 *(Select one for each group)*

- ○ Scheduled or Commuter ○ Domestic
- ○ Non-Scheduled or Air Taxi ○ International

- ○ Passenger
- ○ Cargo
- ○ Mail Contract Only

Purpose of Flight for FAR 91, 103, 133, 137 *(Select one)*

- ○ Aerial Application ○ Firefighting ○ Unknown
- ○ Aerial Observation ○ Flight Test
- ○ Air Drop ○ Glider Tow
- ○ Air Race/Show ○ Instructional
- ○ Banner Tow ○ Other Work Use
- ○ Business ◉ Personal
- ○ Executive/Corporate ○ Positioning
- ○ External Load ○ Skydiving
- ○ Ferry

Revenue Sightseeing Flight

○ Yes ◉ No

Air Medical Flight

○ Yes ◉ No

AIRPORT INFORMATION (Fill in if accident/incident occurred on approach, landing, takeoff, departure, or within 3 miles of an airport)

Airport Name: Lake Havasu City

Airport Identifier: KHII

Proximity to Airport: ○ Off Airport/Airstrip ◉ On Airport/Airstrip ○ N/A

Distance From Airport Center: _____ sm

Direction From Airport: _____ degrees true

Airport Elevation: 783 ft. msl

Runway Information

Runway ID: 32 (L/R/C) Length: 8000 ft Width: 100 ft

Runway/Landing Surface *(Check all that apply)*

- ☑ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
- ☐ Concrete ☐ Gravel ☐ Metal/Wood
- ☐ Dirt ☐ Ice ☐ Snow ☐ Unknown

Condition of Runway/Landing Surface *(Check all that apply)*

- ☑ Dry ☐ Snow-Compacted ☐ Water-Calm
- ☐ Holes ☐ Snow-Crusted ☐ Water-Choppy
- ☐ Ice Covered ☐ Snow-Dry ☐ Water-Glassy
- ☐ Rough ☐ Snow-Wet ☐ Wet
- ☐ Rubber Deposits ☐ Soft
- ☐ Slush-Covered ☐ Vegetation ☐ Unknown

Approach/Departure Segment *(Select one)*

- ○ Taxi ○ VFR Departure ○ On Instrument Approach ○ Downwind ○ Low Approach
- ○ Takeoff ○ IFR Departure Procedure/Clearance ◉ Landing ○ Base ○ Go Around
- ○ Initial Climb ○ Final ○ Aborted Landing (after touchdown)
- ○ Crosswind ○ Unknown

IFR Approach *(Check all that apply)*

☑ None

- ☐ ADF/NDB ☐ PAR ☐ MLS ☐ Practice
- ☐ SDF ☐ Sidestep ☐ LDA ☐ GPS
- ☐ VOR/TVOR ☐ ILS ☐ ASR
- ☐ VOR/DME ☐ Localizer Only ☐ Visual
- ☐ TACAN ☐ LOC-back course ☐ Contact
- ☐ RNAV ☐ Circling
- ☐ Unknown

VFR Approach *(Check all that apply)*

☐ None

- ☑ Traffic Pattern ☐ Stop and Go
- ☐ Straight-In ☐ Touch and Go
- ☐ Valley/Terrain Following ☐ Simulated Forced Landing
- ☐ Go Around ☐ Forced Landing
- ☑ Full Stop ☐ Precautionary Landing
- ☐ Unknown

"FLIGHT CREWMEMBER 1" INFORMATION

"Flight Crewmember 1" Responsibilities at the Time of Accident/Incident

(●) Pilot ( ) Co-Pilot ( ) Student Pilot ( ) Flight Instructor ( ) Check Pilot ( ) Flight Engineer ( ) Other Flight Crew

"Flight Crewmember 1" was pilot flying ☐ Yes ☐ No

"Flight Crewmember 1" Identification

First Name: Byron
Middle Initial: R
Last Name: Baker
City of Residence: Houston
State: TX ZIP: 77019
Country: USA
Age at time of Accident/Incident: 67 Date of Birth: [redacted] *mm/dd/yyyy*
Certificate Number: [redacted]

Degree of Injury
(●) None ( ) Fatal ( ) Minor ( ) Unknown ( ) Serious

Seat Occupied
(●) Left ( ) Front ( ) Unknown ( ) Right ( ) Rear ( ) Center ( ) Single

Restraint Type

Available	Used
( ) None	( ) None
( ) Lap only	( ) Lap only
(●) 3-point	(●) 3-point
( ) 4-point	( ) 4-point
( ) 5-point	( ) 5-point
( ) Unknown	( ) Unknown

Inflatable Restraints
☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown

Pilot Certificate(s) *(Check all that apply)*
☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military
☑ Private ☐ Recreational ☐ Airline Transport ☐ Foreign
☐ Student ☐ Sport ☐ Flight Engineer

Principal Occupation
( ) Pilot (●) Other ( ) Unknown

Medical Certificate
( ) None (●) Class 3 ( ) Class 1 ( ) Driver's License (Sport Pilot only) ( ) Class 2 ( ) Unknown

Medical Certificate Validity
( ) Without limitations/waivers ( ) Unknown (●) With limitations/waivers ( ) N/A ( ) Special Issuance

Date of Last Medical
12/10/2020 *mm/dd/yyyy*

Medical Certificate Limitations
Must wear corrective lenses for near and distant vision

Medical Certificate Special Issuance

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: 11/19/2020 *mm/dd/yyyy*

Flight Review Aircraft
Make: Cessna
Model: Citation Mustang

Airplane Rating(s) *(Check all that apply)*
☐ None ☑ Single-Engine Land ☐ Single-Engine Sea ☑ Multiengine Land ☐ Multiengine Sea

Other Aircraft Rating(s) *(Check all that apply)*
☑ None ☐ Airship ☐ Balloon ☐ Glider ☐ Gyroplane ☐ Helicopter ☐ Powered Lift

Instrument Rating(s) *(Check all that apply)*
☐ None ☑ Airplane ☐ Helicopter ☐ Powered Lift

Instructor Rating(s) *(Check all that apply)*
☑ None ☐ Airplane Single-Engine ☐ Airplane Multi-Engine ☐ Gyroplane ☐ Powered Lift ☐ Instrument Airplane ☐ Instrument Helicopter ☐ Helicopter ☐ Glider ☐ Sport

Type Ratings
CE-510S

Student Endorsements *(Include dates)*

Flight Time *(Enter appropriate number of hours in each box)*	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time	1,977	484	1,457	484	49	150	97			
Pilot in Command (PIC)	1,888	454	1,404	454	47	150	97			
Time as Instructor										
This Make/Model										
Last 90 Days	38	38		38						
Last 30 Days	10	10		10						
Last 24 Hours	3	3		3						

FLIGHT ITINERARY INFORMATION

Last Departure Point
Airport ID: KTME
City: Brookshire
State: TX
Country: USA

Time of Departure
Time: 10:15am
Time Zone: CST

Destination
Airport ID: KHII
City: Lake Havasu
State: AZ
Country: USA

Type Flight Plan Filed
○ None ○ VFR/IFR
◉ Company VFR ○ IFR
○ Military VFR ○ Unknown
○ VFR
Activated? ◉ Yes ○ No ○ Unknown

Type of ATC Clearance/Service *(Check all that apply)*
☐ None ☐ Special VFR ☐ Special IFR ☐ VFR Flight Following ☐ Cruise
☐ VFR ☑ IFR ☐ VFR On Top ☐ Traffic Advisory ☐ Unknown / NA

Airspace where the accident/incident occurred *(Check all that apply)*
☐ Class A ☐ Class G ☐ Military Operations Area (MOA) ☐ Special
☐ Class B ☐ Demo Area ☐ Airport Advisory Area ☐ Air Traffic Control Area
☐ Class C ☐ Warning Area ☐ Jet Training Area ☐ Unknown
☐ Class D ☐ Prohibited Area ☐ TRSA
☑ Class E ☐ Restricted Area ☐ FAR 93

Altitude of In-Flight Occurrence: _____ ft msl

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE

Source of Pilot Weather Information *(Check all that apply)*
☐ National Weather Service ☐ Company
☐ Flight Service Station ☐ Military
☐ TV/Radio ☐ Internet
☑ Automated Report ☐ None
☐ Commercial Weather Service (DUATS) ☐ Unknown
☑ On-Board Weather

Weather Observation Facility
Facility ID: _____
Observation Time: _____
Time Zone: _____
Distance from Accident Site: _____ nm
Direction from Accident Site: _____ degrees true

Basic Conditions
◉ VMC
○ IMC
○ Unknown

Light Condition
○ Dawn ○ Dusk ○ Dark Night ○ Unknown
◉ Day ○ Night ○ Bright Night

Sky/Lowest Cloud Condition
◉ Clear ○ Thin Broken
○ Few ○ Thin Overcast
○ Partial Obscuration ○ Unknown
○ Scattered

Lowest Cloud Condition Height
_____ ft agl

Ceiling
◉ None (Clear) ○ Obscured
○ Broken ○ Indefinite
○ Overcast ○ Unknown

Ceiling Height
_____ ft agl

Temperature: 22 (C) or _____ (F)
Dew Point: _____ (C) or _____ (F)
Altimeter Setting: 30.20 in. Hg
or _____ MB

Wind Direction
☑ Variable
-or-
Direction: _____ degrees true

Wind Speed
☐ Calm
☐ Light and Variable
-or-
Speed: _____ kts

Wind Gusts
☐ Not Gusting
-or-
Speed: _____ kts

Visibility unlimited miles
RVR: _____ feet
RVV: _____ miles
Density Altitude: _____ ft

Intensity of Precipitation
○ Light
○ Moderate
○ Heavy
◉ N/A
○ Unknown

Type of Precipitation *(Check all that apply)*
☑ None ☐ Drizzle ☐ Freezing Rain
☐ Rain ☐ Ice Pellets ☐ Snow Shower
☐ Snow ☐ Snow Pellets ☐ Ice Pellets Shower
☐ Hail ☐ Snow Grains ☐ Freezing Drizzle
☐ Rain Showers ☐ Ice Crystals

Restriction to Visibility *(Check all that apply)*
☑ None ☐ Fog
☐ Blowing Dust ☐ Ground Fog
☐ Blowing Sand ☐ Haze
☐ Blowing Snow ☐ Ice Fog
☐ Blowing Spray ☐ Smoke
☐ Dust ☐ Unknown

Icing Forecast

Amount	Type
◉ None	○ N/A
○ Trace	○ Rime
○ Light	○ Clear
○ Moderate	○ Mixed
○ Severe	○ Unknown
○ Unknown	

Icing Actual

Amount	Type
◉ None	○ N/A
○ Trace	○ Rime
○ Light	○ Clear
○ Moderate	○ Mixed
○ Severe	○ Unknown
○ Unknown	

Turbulence
Type *(Check all that apply)*
☑ None
☐ Clear Air
☐ Terrain-Induced
☐ Convective Turbulence

Severity
☐ Light
☐ Moderate
☐ Severe
☐ Extreme

NOTAMs (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident:
Taxiway A between Taxiway A3 and A5 closed

DAMAGE TO AIRCRAFT AND OTHER PROPERTY

Aircraft Damage

- ○ None
- ○ Minor
- ◉ Substantial
- ○ Destroyed
- ○ Unknown

Aircraft Fire

- ○ None
- ○ In-Flight
- ◉ On-Ground
- ○ Both Ground and In-Flight
- ○ Fire at Unknown Time
- ○ Unknown

Aircraft Explosion

- ○ None
- ○ In-Flight
- ◉ On-Ground
- ○ Both Ground and In-Flight
- ○ Explosion at Unknown Time
- ○ Unknown

Description of Damage to Aircraft and Other Property *(Use additional sheet if necessary)*

Right wing fire and fuel tank explosion, damage to right main gear and bottom of fuselage.

NARRATIVE HISTORY OF FLIGHT (Please type or print in ink)

Describe what occurred in chronological order, including circumstances leading to and nature of accident/incident. Describe terrain and include wreckage distribution sketch if pertinent. Attach extra sheets if needed. State departure time and and location, services obtained, and intended destination. Provide as much detail as possible.

I departed KTME approximately 10:15am CST. Prior to arrival at TME fuel tanks were topped off at 385 gallons allowing for plenty of fuel to arrive at KHII in VMC. I crossed Needles VOR at 12,000' per ATC. Needles is close to KHII and I reported airport in sight. Weather was perfect with clear sky and light to no wind. ATC reported that they saw no traffic in the area so I canceled my flight plan. I was quite high above the airport so I began descent at a good rate. As I was descending I decided to load in the RNAV 32 approach. My plan was to fly the left downwind leg and extend it past the FAF of HODKI then turn left base to capture the approach -- basically flying vectors to final on the visual approach. I thought this would allow me to be at the correct altitude and speed to fly the final approach. However, as I passed abeam the threshold on the downwind leg with my speed in excess of what it should have been at that point, for some inexplicable reason I decided to disengage the autopilot and turn into final approach. (There was no reason for me to be in a hurry - no appointments, no meetings, I had plenty of fuel remaining, etc.) On short final I was focused on airspeed and and a safe landing point about 2000' from the threshold. Runway 32 is 8000' and due to taxiway construction the only taxiway open was at the end of the runway. Upon landing I initially thought the grinding noise was a blown tire - having never experienced one - so I focused on keeping the aircraft on the centerline as much as possible. When the aircraft came to a stop on the runway I sat for several seconds sort of shocked and trying to process what had just occurred. Then I heard someone on unicom saying the plane was on fire and to get out. At that point I cut off the engines, turned off the battery and exited the aircraft only to realize as I was walking away that I neglected to execute the before landing checklist and lower the gear.

RECOMMENDATION (How could this accident/incident have been prevented?)

Operator/Owner Safety Recommendation

Whether reviewing accidents as part of recurrent training or studying accidents on my own I have always had two thoughts when an aircraft runs out of fuel, or stalls, or lands gear up. What could the pilot possibly have been thinking and I'll never do that. Well, I did that and I have spent many, many hours attempting to understand what this pilot must have been thinking when the accident chain began with disengaging the autopilot to enter an unstable approach. I have read several books over time about the brain and how it functions which probably has some bearing on what I'm about to write. While descending from Needles VOR my, logical, rational, disciplined mind that has always been in control as a pilot made a plan to land on runway 32 at KHII. That is when I decided to enter the RNAV 32 approach and fly an extended left downwind to give myself plenty of time to lose altitude and speed prior to flying the final approach. After passing the point abeam the threshold by perhaps 3 miles (although I am not exactly sure of distance) and too fast, I disengaged the autpilot and began the turn toward the airport. In the previous section I said for some inexplicable reason. The only thing that makes sense to me right now is that a small portion of my brain that judges and reacts impulsively was somehow able to overide my "pilot brain" and take over decision making and fly the airplane - even though it was certainly not equipped to do so. And it was also able to subdue my rational, disciplined pilot mind at the point of disengaging the autopilot through the remainder of the flight. I imagine my impulsive brain taking over and saying, "I got this." Otherwise, I cannot explain why I would enter an obviously unstable approach and not at any point think this is a really bad idea and go around. Or, even then while too fast, not to think to slow down by lowering the landing gear. And, finally, neglecting to perform the before landing checklist - my abbreviated version on short final as a double check - "GFY lights" (gear, flaps, yaw damper, lights). As I continue to try to think through the flight upon disengaging the autopilot it has been a blur and difficult to recall perhaps because of the shock and traumatizing impact on my "pilot brain." After flying for many years focused on flying stabilized approaches this is the only way I have been able to understand what happened.

(continued)

MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on separate sheet)

Was there Mechanical Malfunction/Failure? ☐ Yes ☑ No

(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)

Total Time/Cycles On Part

_____ Hours

_____ Cycles

Time Since This Part Inspected/Overhauled

_____ Hours

FUEL & SERVICES INFORMATION

Fuel on Board at Last Takeoff
(Convert from pounds, as necessary)

385 Gallons

Fuel Type

○ 80/87	○ 115/145	○ Jet B	○ Other, specify _____
○ 100 Low Lead	◉ Jet A	○ JP8	
○ 100/130	○ Jet A-1	○ Automotive	

Other Services, if Any, Prior to Departure

None

EVACUATION OF AIRCRAFT

Was an emergency evacuation of the aircraft performed? ☑ Yes ☐ No

Method of Exit – Describe how the occupants exited and how many occupants evacuated each location

through the cabin entrance door

OTHER AIRCRAFT – COLLISION (If air or ground collision occurred, complete this section for *other* aircraft)

Aircraft Registration Number _____

Manufacturer: _____

Model: _____

Damage to Other Aircraft

☐ Destroyed ☐ Minor ☐ Substantial ☐ None

Registered Owner of Other Aircraft

Name: _____
City: _____
State: _____ ZIP: _____
Country: _____

Pilot of Other Aircraft

Name: _____
City: _____
State: _____ ZIP: _____
Country: _____

ADDITIONAL INFORMATION (Please type or print in ink)

Use this space if additional space is needed for any answers.

Recommendation - continued

I have piloted many flights as the sole occupant usually on empty legs during over 150 Angel Flight missions. I have never deviated in my disciplined approach to flying, whether solo or not, until this flight -- which is what makes it so difficult to comprehend. I have two thoughts in terms of recommendations - both obvious. First, always fly stabilized approaches and if not stabilzed ALWAYS fly the missed or go around. And second, to reinforce the first, always fly as if those closest to you are on board -- because they are, whether physically or not.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Date of this Report	Name of Pilot/Operator: Byron R Baker
12/10.2021 [redacted]	Signature: [redacted]
	-- or -- ☑ Check here to electronically sign this document

If a Person Other than Pilot/Operator is Filing Report

Name: _____ Title: _____

Signature: _____

-- or -- ☐ Check here to electronically sign this document

FOR NTSB USE ONLY

NTSB Accident/Incident No.	Reviewed by NTSB Regional Office	Name of Investigator	Date Report Received
WPR22LA058	WPR	James M. Bledsoe	12/13/2021