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

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

BASIC INFORMATION	<u> </u>							
Accident/Incident Location	0.0			_14	Date/Time	1/ .	-	
Nearest City/Place: Ci ゃに			Si	tate: NY	Date: 5/4/06 Local Time: 10:30 A			
ZIP: Country:					mm/di	½ √yyyy		
Latitude: (00:00:00 N/S) Longitude: (000:00:00 E/W)						1	ime Zone:	
Phase of Operation Co					Collision wit	h Other Aircraft	Altitude of In-Flight	
Standing Takeoff (incl. in		Cruise		Hover	Midair		Occurrence	
☐ Taxi ☐ Climb ☐ Descent ☐ Landing		Maneuvering Approach		Other Unknown	On-ground None		1,200 ft MSL	
□ Descent □ Landing □ Approach □ Unknown ☑ None □								
Weather Observation Facility		- ACCIL		ce of Weather	Information		Method of Briefing	
Facility ID:	,			k all that apply)	in i		(Check all that apply)	
Observation Time: 10'.00	AM	_		ational Weather S		Company	☐ In Person	
Time Zone: EST	* * *	-		ight Service Statio V/Radio	on .	☐ Military ☑ Internet	☐ Teletype ☐ Telephone/Computer	
	~7		A 🔯	utomated Report		Unknown	Aircraft Radio	
Distance from Accident Site:	1		⊠C	ommercial Weathe	er Service (DUA)	(S)	TV/Radio	
Direction from Accident Site:	degr	ees MAG	Liak	t Condition			Unknown Visibility	
Briefing Type/Completeness ☐ Full	☐ Abbreviat	ert	Ligh □ Di	t Condition awn □ I	Dusk	Dark Night		
Partial / Limited By Pilot	Unknown	.u	D D		Vight	Bright Night	<u> </u>	
Partial / Limited By Briefer	☐ Not Pertin	ent				☐ Not Reported		
Sky/Lowest Cloud Condition		Ceiling		_			bility (Check all that apply)	
	Thin Broken Thin Overcast	None Broke	(clear)		bscured definite	None ☐ Blowing Dust	☐ Fog ☐ Ground Fog	
	Unknown	Overd		= =	nknown	☐ Blowing Dust ☐ Blowing Sand	Haze	
Scattered Scattered						☐ Blowing Snow	Lce Fog	
Lowest Cloud Condition Hei	ght	Ceiling	Heigh	<u> </u>		☐ Blowing Spray ☐ Dust	☐ Smoke ☐ Unknown	
NA	ft AGL	<u> </u>	/	1/A	_ft AGL		CI OWNOWN	
Wind Direction	Wind Speed			Wind Gusts		Type of Turbulen	ce (Check all that apply)	
□ Indicated: APR COX. 2 10 degrees MAG	Velocity: 5	KTS		Velocity:	KTS	☑None □	In Clouds	
- <u>270</u> degrees MAG	-ог-			<u> </u>			Vicinity of Thunderstorm	
[☐ Calm			Gusting		Severity of Turbu		
☐ Variable	Light and Var	iable		Not Gusting		□ Extreme □ Moderate □ Light □ Severe □ Moderate Chop		
NOTAM-OUT 1 POS	A TDBAROS C	LOBATE	DID	EDa in affirm	4 4h a 41au		Moderate Chop	
NOTAMs (D, L and FDC)), AIRMETS, S	IGMETS	, rik	ers in effect a	at the time of	the accident		
NONE								
100-00								
		cing Fore				Type of Precip	oitation (Check all that apply)	
Temperature: (C) or (S-7(F)	ډ ا د	Amou		Moderate	Type ☐ Rime	Моле	☐ Drizzle	
	1.0	☐ None ☐ Trace		Moderate Severe	☐ Clear	∏ Rain ☐ Snow	☐ Ice Pellets ☐ Snow Pellets	
Altimeter Setting:i	n. HG 📗 📗	Light	. —		Mixed	☐ Hail	Snow Grains	
or1		cing Actu	al a			Rain Showers		
Density Altitude:	ft '	cing Actus Amou			Туре	Freezing Rain	=	
Dew Point:(C)		None		Moderate	∐ Rime	_		
or(F)	1 2	Trace Light	Ц	Severe	☐ Clear ☐ Mixed	Intensity of Pr	•	
	1	_				Light	☐ Moderate ☐ Heavy	

AIRCRAFT INFOR	MATIO	1									
Manufacturer: SC	HWEI	ZER]	Max Gross	Weight:	2,050	lbs		
Model: 5 269 C					Max Gross Weight: 2,050 lbs Weight at Time of Accident: 21,780 lbs						
Serial Number:						Location of					
Registration Number:		<u>80M</u>	Amateur-l	ouilt: 🗌 Yes [-or-		inches from	n nose	or datu	
Category of Aircraft	Type of A	irworthiness (ertificate	Numbe	r of Sea			Landing		Retrac	
☐ Airplane	(Check all			HOMBE	i or sea	<u> </u>		•	_	nat landing ge	
Balloon Blimp/Dirigible	Standard			If Large	Aircraft, I	how many sea	ts for:		ration that		· -
Glider	Mormal ☐ Utility	□ Re	estricted	Flig	ht Crew:			☐ Tric	ycle	☐ Ta	ailwheel
☐ Gyrocraft ☑ Helicopter	Acroba	tic 🔲 Pr	ovisional					☐ Amı		□н	igh Skid
Powered lift	☐ Transpo		perimental	Dage			I		ergency Flo		
Ultralight			ecial Flight ght Sport		-			☐ Flog			ci/Wheel
☐ Unknown		_						Unk	nown		
Type of Maintenance P	rogram		Last Ins	pection Type			Date Las	t Inspect	ion: 4	112/06 m/dd/yyyy	
Annual			⊠ 100 He			irworthiness	ļ.,	25 ha		m/dd/yyyy	
Conditional (Amateur-be Manufacturer's Inspection	uilt only) on Program		AAIP		ditional l	nspection					
Other Approved Inspect	ion Program ((AAIP)	_	_			1	e lotal l measured	•		hrs
☐ Continuous Airworthine ☐ Other, specify:	SS		1 2 x	25 hour	INSPE	ections			• •	'ime of Accid	lent
IFR Equipped				rning System				Fire Exti			-
☐ Yes ☒ No ☐ Unk	nown			⊠'No □Un		_					4
							₹ Specif	y <u> </u>	2020	2.5/	<u>か・</u>
1 \ ' '	LT Activa		ELT Ma	nufacturer: _							
Yes □ No □	Yes XIN	lo		eries:							
ELT Aided in Locating	Accident /	Incident		umber:							'
☐ Yes 🔀 No				Туре:					y Exp. Da	ate:	
Engine Type		Reciprocatir	g FueI	Propeller			······································				
	rbo Jet	System Type Carburetor			_) (a6				•	
	rbo Fan Iknown	Fuel Injects		☐ Fixed Pit☐ Controlla		Model:	acturer:				
	T					T Triodei.	Engine Ra	eted	<u> </u>		
							Power Me	asured		Time	Time
		Engine		Manufacturina	_	Date	as (check	one) power or	Total	Since	Since
Engine Engine Manufact	turer	Engine Model/Series		Manufacturing Serial Number	•	of Mfg. mm/dd/yyyy	lbs of	Thrust	(hours)	Inspection (hours)	(bours)
Eng. 1 Lycom	79	HID-360 -	- D1A	L-25290	-51A	3/7/40	190	hp 1	2157	217-hours	1759.4
Eng. 2	<u>ر</u>							<u> </u>		<u> </u>	
Eng. 3				_						-	
Eng. 4	OD INE	ODMATION				_L	<u> </u>		<u> </u>		L
OWNER/OPERAT Registered Aircraft Ow		JRMA HON					Owner Ado	June -			
· ·	_	110							ΔΙV		
Name: WINGS	<u>ш</u> ,						City: N	h. re	PlQ,	10604	
Fractional Ownership Ai							Country:		15A-		
Operator of Aircraft	L Sar	ne As Registered	Owner				Operator A	Address	Sam	e As Registo	ed Owner
Name:			-	<u> </u>			City:				
Doing Business As:	riamatau (4 (There atom Clade	. 1A	12 A		_	State: \(\)	· -			
Air Carrier/Operator Des			. <u>w</u>	<u>دم ۲۰</u>		+	Country	ت د			
Regulation Flight Cond	_						Revenue Si	ightseeing Y □		™ No	
☐ FAR 91 ☐ FAR 1 ☐ FAR 103 ☐ FAR 1		FAR 91 Special F Non-US, Commer		□ Public Use (s □ Federal		⊢ , ⊢	Ata Banat				
☐ FAR 121	135 🔲 1	Non-US, Non-con		Unknown			Air Medica	ıl Flight □ Y	·	Z No	
│	137 🔲 .	Armed Forces						ш т	w	(

.

for FAR 91, 103, 133, 137 (Select of	rpose of Flight Revenue Operation for FAR 121, 123, 137 (Select one)			elect one)	Type of Commerci (Check all that apply)	al Operating Certificate Held	
Personal Business		Scheduled or Commuter Non-Scheduled or Air Taxi			□ None □ Flag Carrier Operating Certificate (121) □ Supplemental		
Executive/Corporate Other Work Use					☐ Air Cargo		
Instructional		Domestic or Inter			Foreign Air Carrier Commuter Air Car	rs (129)	
Ferry Positioning		☐ Domestie ☐	International		On-Demand Air Ta	exi (135)	
Aerial Application					Large Helicopter (127)	
Aerial Observation		Cargo Operation			Rotorcraft External Load (133)		
☐ Air Drop ☐ Air Race / Show		Passenger/Carg			- or -	•	
☐ Flight Test		Passenger	nov	v many:	Agricultural Aircre	ut (137)	
☐ Public Use ☐ Unknown		☐ Mail —			Other Operator of	Large Aireraft	
OTHER AIRCRAFT - C	OLLISION (f air or ground co	dision occur	red. complete	this section for othe	r aircraft)	
Aircraft Registration Number						Damage to Other Aircraft	
Aircraft Registration Number						☐ Destroyed ☐ Minor	
						Substantial None	
Registered Owner of Other Air	craft						
First Name:				City:	ZIP:		
Middle Initial:				State:	ZIP:		
Last Name:				Country.			
				Ci+			
First Name:			•	City: ZIP:			
Last Name:				Country:		- 	
AIRPORT INFORMATIO	N (If the accid	ent occurred on a	approach, tak	eoff or within	3 miles of an airport	, complete this section)	
Airport Identifier:						SM	
Airport Name:			_		degrees MAG		
_ 	irport/Airstrin [On Airstrin				
	Proximity to Airport Off Airport/Airstrip On Airport On Airstrip			Airport Elevation: ft. MSL			
Approach Segment (Select one)							
1		□ Base	: leg	_	<u> </u>	☐ Go Around	
Approach Segment (Select one) On Instrument Approach Crosswind	Landing Downwind	☐ Base	leg Approach		Final Aborted Landing (after	Go Around touchdown)	
On Instrument Approach Crosswind IFR Approach (Check all that ap	Landing Downwind	□ Low	Approach	VFR Approx	Final	touchdown)	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR	Landing Downwind	Low	Approach Practice	VFR Approx	Final Aborted Landing (after	touchdown) ply) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap	Landing Downwind ply)	Low	Approach	VFR Approx	Final Aborted Landing (after ach (Check all that ap)	touchdown)	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestey ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localize	Landing Downwind ply) cr Only	MLS LOW	Approach Practice GPS	VFR Approx None Traffic Patt Straight-In Valley/Terr	Final Aborted Landing (after ach (Check all that ap) cm ain Following	touchdown)	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SDF ILS	Landing Downwind ply) cr Only ack course	Low	Approach Practice GPS Loran	VFR Approx	Final Aborted Landing (after ach (Check all that ap) cm ain Following	touchdown)	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localizz ☐ VOR/DME ☐ LOC-be	Landing Downwind ply) cr Only ack course	MLS LDA ASR Contact	Approach Practice GPS Loran	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop	Final Aborted Landing (after ich (Check all that ap) em ain Following	touchdown) Stop and Go	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sideste; ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localiz; ☐ VOR/DME ☐ LOC-be; ☐ TACAN ☐ RNAV Runway Information	Landing Downwind ply) cr Only ack course	MLS LDA ASR Contact	Approach Practice GPS Loran	VFR Approx None Traffic Patt Straight-In Valley/Ter Go Around Full Stop Condition of	Final Aborted Landing (after 1ch (Check all that ap) cm ain Following Runway/Landing S Snow-Con	touchdown) Stop and Go	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localizz ☐ VOR/DME ☐ LOC-be ☐ TACAN ☐ RNAV Runway Information Runway ID:	Landing Downwind Downwind	MLS LOW LDA L ASR L Visual Contact Circling	Approach Practice GPS Loran Unknown	VFR Approx None Traffic Patt Straight-In Valley/Ter Go Around Full Stop Condition of	Final Aborted Landing (after ach (Check all that appears ain Following Runway/Landing S Snow-Con	touchdown) Stop and Go	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localizz ☐ VOR/DME ☐ LOC-be ☐ TACAN ☐ RNAV Runway Information Runway ID:	Length:	MLS	Approach Practice GPS Loran Unknown	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough	Final Aborted Landing (after ach (Check all that ap) cm ain Following Runway/Landing S Snow-Con Snow-Cru i Snow-Wei	touchdown) Stop and Go	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localiza ☐ VOR/DME ☐ LOC-be ☐ TACAN ☐ RNAV Runway Information Runway ID:(L/R/C) Runway/Landing Surface (Check all that ap ☐ Asphalt ☐ Grass/Turf ☐ Concrete ☐ Gravef	Landing Downwind ply) cr Only ck course Length: Macadam Metal/Wook	MLS	Approach Practice GPS Loran Unknown	VFR Approa None Traffic Patt Straight-In Valley/Ter Go Around Full Stop Condition of Dry Holes I ce Covered Rough Rubber Dej	Final Aborted Landing (after ach (Check all that ap) ern ain Following Runway/Landing S Snow-Con Snow-Cru i Snow-Usy Snow-Wel	touchdown) Stop and Go	
☐ On Instrument Approach ☐ Crosswind IFR Approach (Check all that ap ☐ None ☐ PAR ☐ ADF/NDB ☐ Sidestep ☐ SDF ☐ ILS ☐ VOR/TVOR ☐ Localizz ☐ VOR/DME ☐ LOC-be ☐ TACAN ☐ RNAV Runway Information Runway ID:	Landing Downwind ply) or Only ack course Length: Macadam Metal/Wood Snow	MLS	Approach Practice GPS Loran Unknown	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough	Final Aborted Landing (after ach (Check all that ap) ern ain Following Runway/Landing S Snow-Con Snow-Cru i Snow-Usy Snow-Wel	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None	Landing Downwind ply) or Only ack course Length: Macadam Mctal/Wook Snow FORMATION	MLS	Approach Practice GPS Loran Unknown	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber Dej Slush Cove	Final Aborted Landing (after ach (Check all that ap) cm ain Following Runway/Landing S Snow-Con Snow-Cru i Snow-Dry Snow-Well cosits Soft red Vegetation	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SDF ILS VOR/TVOR Localize TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap RNAV Runway Information Runway I Localize Graves Graves Dirt Graves FLIGHT ITINERARY IN Last Departure Point	Landing Downwind ply) or Only ack course Length: Macadam Metal/Wook Snow FORMATION	MLS	Approach Practice GPS Loran Unknown ft	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber De; Slush Cove	Final Aborted Landing (after ach (Check all that ap) em ain Following Runway/Landing S Snow-Con Snow-Cru Snow-Dry Snow-Wei Soft red Vegetation	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SIDF ILS VOR/TVOR Localize VOR/DME LOC-bey TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap Grass/Turf Grass/Turf Gravef Dirt Ice FLIGHT ITINERARY IN Last Departure Point Airport ID: S	Landing Downwind ply) or Only ack course Length: Macadam Metal/Wook Snow FORMATION	MLS	Approach Practice GPS Loran Unknown ft Destination Airport ID:	VFR Approa None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber De; Slush Cove	Final Aborted Landing (after ach (Check all that applicant for all that applicant for all the content for	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SDF ILS VOR/TVOR Localize VOR/DME LOC-be TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap Grass/Turf Concrete Gravef Dirt ICC FLIGHT ITINERARY IN Last Departure Point Airport ID: SI	Landing Downwind ply) cr Only ack course Length: Macadam Metal/Wood Snow FORMATION Time	MLS	Practice GPS Loran Unknown ft Destination Airport ID: City:	VFR Approa None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber De; Slush Cove	Final Aborted Landing (after ach (Check all that application) FRunway/Landing S Snow-Consist Snow-Crust Snow-Crust Snow-Westered Vegetation	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SIDF ILS VOR/TVOR Localize VOR/DME LOC-be TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap Grass/Turf Concrete Gravef Dirt ITINERARY IN Last Departure Point Airport ID: State:	Landing Downwind ply) cr Only ack course Length: Macadam Metal/Wood Snow FORMATION Time	Low Low Low Low MLS LDA	Practice GPS Loran Unknown Tt Destination Airport ID: City:	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber Dep Slush Cove	Final Aborted Landing (after ach (Check all that application) Runway/Landing S Snow-Con Snow-Cru Snow-Dry Snow-Well Snow-Well Vegetation	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SDF ILS VOR/TVOR Localize VOR/DME LOC-be TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap Grass/Turf Gravef Dirt Ice FLIGHT ITINERARY IN Last Departure Point Airport ID: State: State: State: State: State: Country: State	Landing Downwind ply) or Only ck course Length: Macadam Mctal/Woox Snow FORMATION Time Time	MLS Low MLS LDA CDA Contact Correling Mater Unknown Contact Correling Contact Correling Contact Correling Contact Correling Contact Correling Contact Correling Contact Cont	Practice GPS Loran Unknown ft Destination Airport ID: City:	VFR Approa None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber De; Slush Cove	Final Aborted Landing (after ach (Check all that application) Runway/Landing S Snow-Con Snow-Cru Snow-Dry Snow-Well Snow-Well Vegetation	touchdown) Stop and Go	
On Instrument Approach Crosswind IFR Approach (Check all that ap None PAR ADF/NDB Sidestey SIDF ILS VOR/TVOR Localize VOR/DME LOC-be TACAN RNAV Runway Information Runway ID: (L/R/C) Runway/Landing Surface (Check all that ap Grass/Turf Gravef Dirt Ice FLIGHT ITINERARY IN Last Departure Point Airport ID: State: Country: Acceptable Country: Acceptable Type of ATC Clearance/Service	Landing Downwind ply) or Only ck course Length: Macadam Mctal/Woox Snow FORMATION Time Time	MLS Low MLS LDA CDA Contact Correling Mater Unknown Contact Correling Contact Correling Contact Correling Contact Correling Contact Correling Contact Correling Contact Cont	Practice GPS Loran Unknown ft Destination Airport ID: City: State: Country:	VFR Approx None Traffic Patt Straight-In Valley/Terr Go Around Full Stop Condition of Dry Holes Ice Covered Rough Rubber Dep Slush Cove	Final Aborted Landing (after ach (Check all that application) Runway/Landing S Snow-Con Snow-Cru Snow-Dry Snow-Well Snow-Well Vegetation	touchdown) Stop and Go	

Airspace where the acci-	dent occurred (Ch	eck all that apply)				
☐ Class A	Class E	_	Prohibited Area		☐ Jet Training Area	☐ Special
Class B	Class G		Restricted Area		☐ TRSA	Air Traffic Control Area
Class C	Demo Area		Military Operations Area (M	(OA)	☐ FAR 93	☐ Unknown
Class D	☐ Warning Area	L	Airport Advisory Area			
Aircraft Load Description	on (Check all that of	oply)				
None	Towing Glider	_	Parachutists		Livestock	
Passengers	Towing Banner	_	Water		☐ Unknown	
☐ Cargo	Other External		Chemical/Fertilizer/Sceds			
FUEL & SERVICE	<u>S INFORMATI</u>	<u> </u>				
Fuel on Board at Last T	akeoff	Fuel Type				
(convert from pounds, as neo	essary)	80/87	115/145	□ JP3	Other, specify	
35	Gallons	100 Low Lea		□ ЛР4		
	Gallons	100/130	☐ Automotive	☐ JP5		
Other Services, if Any, I	Prior to Departure					
MECHANICAL MA	LFUNCTION/	FAILURE (If	more space is neede	ed, cor	ntinue on sepa <mark>rate sh</mark> e	eet)
Was there Mechanical M	Malfunction/Failur	e? X Yes	No Unknown			Total Time/Cycles
(If yes, list the name of the po						On Part
	-		•			47 167
False t	a lara					12157 Hours
Engine F	-(-01 E					Cycles
l °						C) 0.03
1						Time Since This Part
						Inspected/Overhauled
						1700 11
						= +39. Y Hours
						'
DAMAGE TO AIR	CRAFT AND C	THER PRO	PERTY			
Aircraft Damage		raft Fire			Aircraft Explosion	
None Substa			Both Ground and In-Flight	.	·_ ·	th Ground and In-Flight
Minor Destro			Unknown Origin			known Origin
		n-Ground	_		On-Ground	
Description of Damage	to Aircraft and Ot	her Property (u	se additional sheet if necessary	<i>y)</i>		
1						
1 August a	40	a.Lal	antial dama			
I witerati , so	s idineo	. \$0.00 L	antial dama	se.		
- Ta. 1		1	(J		
- 14!	separat ec	a Erom	quiframe	1		
- skids	s comple	stale be	and some of	4		
\ \(\bar{\chi}\)	, somp		المام الم	.	1 1 . 1	. 1
- 13 lac	ics /mai	n notor a	not but rated	9-	sociation de aniel	4+
	6	. , , ,	no tall rolly	-c+	parated and	een i
				_	<u></u>	
EVACUATION OF	AIRCRAFT_					
Was an emergency evac	uation of the airce	aft performed?	Yes No			
				ad anah l		
Method of Exit - Descri	be now the occupat	its exited and not	w many occupants evacuate	ca each i	D 20 P	
PASSENGER	C/ BILOT	EXITES	PASSENG	CK	A COLC	
101300	,					

PILOT "A" INFORMATION										
Pilot "A" Responsibilities at the Time of Accident										
☐ Pilot ☐ Co-Pilot	Student Pilot	Flight Inst	tructor 🔲 🤇	Check Pilot	☐ Fligh	ıt Engineer	Other	Flight Crew		
Pilot "A" Identification										
First Name: MITCHELL Middle Initial: N. State: N.Y ZIP: NS98 Last Name: 57EINBERG Country: USA										
Age at time of Accident: 48 Date of Birth: 1957 Certificate Number: mm/dd/yyyy										
Degree of Injury	Seat Occup			Sea	Belt			Shoulder 1	[arness	
☐ None ☐ Fatal Minor ☐ Unknown ☐ Serious	Left Right Center	☐ Front ☐ Rear ☐ Single	Unknow	n Used			□ No □ No	Used Available	-⊠Yes □Yes	□ No □ No
Pilot Certificate(s) (Check	all that apply)									
□ None □ Str □ Private ☑ Fli	udent ght Instructor	Recreat		Commerci Airline Tr			Flight Engi U.S. Milita		☐ Foreign	
Principal Occupation	Medical Certific	ate		Med	dical Cer	tificate Va	lidity	Date of L	ast Medica	ıl
Pilot Other Unknown	Class I	Class 3 Driver's Licens Unknown	se (Sport Pilot e	only) 🔼 V		nitations/wai tions/waiver		O (/	<u>ww</u> 200	6
Medical Certificate Limits	tions LENSES									
Medical Certificate Waive	· me									
Hittical Collineate Walle	.10									
Date of Last Flight Review	v ()	Flight 1	Review_Airc	raft						
or Equivalent, Including	03/08/2	DOG Make:	Sy	HWEIZ	ER	-				
FAR 121/135 Checks:	mm/dd/yyyy	Model:	S	269	C					
Airplane Rating(s)	Other Aircraf	ft Rating(s)	Instrume	ent Rating(s)	Instructo	r Rating(s)		
(Check all that apply)	(Check all that a	(pply)		that apply)		(Check all		,		
None Single-Engine Land	☐ None ☐ Airship		None			None	- 6:I- F-		Instrument	
Single-Engine Sea	Free Balloon		Airplar Helicon	ne pter			e Single-En; e Multi-Eng		Instrument Helicopter	непсориег
Multiengine Land	Glider		Helicon Powere	d Lift		Gyrople	e Multi-Eng		Glider Glider	
Multiengine Sea	☐ Gyroplane					☐ Powere	d Lift	L] Sport	
	Powered Lift	•								
Type Ratings						Student E	Endorseme	ents (Include	dates)	
Flight Time (enter appropriation number of hours in each box)	ate All	This Make	Airplane Single	Airplane Multiongine	Night		rument	Potnyawa #	Glider	Lighter Than Air
Total Time	AIRCEN	& Model	Engine	Multiengine	Night	Actual	Simulated	Rotorcraft	Silver	I JIBD AIT
Pilot in Command (PIC)		-			+	+		+		
Time as Instructor					†					
This Make/Model						_	-			
Last 90 Days										
Last 30 Days										
Last 24 Hours										
		1 ^	. 1			/ 1 T		_		

L Please see attached Resume

PILOT "B" INFORMATION										
Pilot "B" Responsibilities at the Time of Accident										
☐ Pilot ☐ Co-Pilot	Student Pilot	Flight Inst	tructor	Check Pilot	☐ Flig	ht Engineer	Other I	Flight Crew		
Pilot "B" Identification										
First Name: LVIS				City		breenwig				
Middle Initial:	m . la			Stat			(P: 0(.6	<u> </u>		
Last Name: Perez	Davila			Cou	intry:	<u> </u>				
Age at time of Accident:	Date of B		n/dd/yyyy	Cer	tificate	Number:				
Degree of Injury	Seat Occupied		7777	Seat	Belt			Shoulder H	arness	
Mone ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious	☐ Right ☐	Front Rear Single	Unknown	Used Avai] No] No	Used Available	Yes Yes	7 3
Pilot Certificate(s) (Check al	l that apply)									
None ☐ Stud		Recreat	ional	Commerci			Flight Engir		Foreign	
Private Flig	ht Instructor	☐ Sport		Airline Tr			U.S. Militar			
- Company of the Property of t	Medical Certificate					rtificate Val	•	Date of La	st Medical	
	X None ☐ Cla ☐ Class 1 ☐ Dri	ass 3 iver's Licens	se (Sport Pilot			mitations/waiv tations/waivers				
		known	(m.po-114 -144		Jaknown			mm/dd/y	yyy	
Medical Certificate Limitat	ione	_								
Medical Certificate Waiver	s									
		T								
Date of Last Flight Review or Equivalent, Including		Flight	Review Air	craft						
FAR 121/135 Checks: _		Make:_								
	mm/dd/yyyy	Model:								
Airplane Rating(s) (Check all that apply)	Other Aircraft R (Check all that apply			r ent Rating(s) <i>ll that apply)</i>)	Instructor				
None	□ None	y)	□ None	44.07		Check all th	аг арріу)		nstrument Ai	irolane
Single-Engine Land	☐ Airship		Airpla Airpla	ane		☐ Airplane		пе 🔲 1	nstrument He	
☐ Single-Engine Sea☐ Multiengine Land	☐ Free Balloon ☐ Glider		☐ Helico	opter		Airplane Gyroplan	Multi-Engir	ne 🔲 🛚	Helicopter Glider	
Multiengine Sea	Gyropiane			icu Liit		Powered		⊟ :	Sport	
	☐ Helicopter☐ Powered Lift									
Type Ratings	Powercu Litt					Student Er	ıdorsemer	its (Include da	rtes)	
Type Ratings						Judeni Zi		1277077440 444		
Flight Time (enter appropria number of hours in each box)		his Make & Model	Airplane Single Engine	Airplane Multiengine	Nigh		rument Simulated	Rotorcraft	Glider	Lighter Than Air
Total Time	ı	1	.,		1					
Pilot in Command (PIC)								_		
Time as Instructor										
This Make/Model										
Last 90 Days	1	1						1		
Last 30 Days										
Last 24 Hours	0	0						1 0		

ADDITIONAL FLIGHT CRE	W MEMBERS	(Exclusive of cal	bin attendants, com	plete the fo	llow		
Pilot Name and Address						Degree of In	• •
First Name:		City:	ZIP:			☐ None ☐ Minor	☐ Fatai ☐ Unknown
Middle Initial: Last Name:		State: Country:	ZIP:			Serious	
Pilot Certificate(s) (Check all that	t apply)					Seat Occupi	ed
☐ None ☐ Student	☐ Recreational	Commercial	Flight Engineer	☐ Foreign		☐ Left	☐ Front
Private Flight Instructor	☐ Sport	Airline Transport	U.S. Military			☐ Right ☐ Center	☐ Rear ☐ Single
Type Rating/Endorsement for Accident/Incident Aircraft?	☐ Yes ☐ No	of this Accide	ime at the Time nt/Incident:	hrs			Unknown
Pilot Name and Address				_		Degree of In	
First Name:		City:	ZIP:			☐ None ☐ Minor	☐ Fatal ☐ Unknown
Middle Initial: Last Name:		Country:	ZIP:	_		Serious	
Pilot Certificate(s) (Check all tha	t apply)					Seat Occupi	ed
☐ None ☐ Student ☐ Private ☐ Flight Instructor	☐ Recreational ☐ Sport	Commercial Airline Transport	☐ Flight Engineer ☐ U.S. Military	☐ Foreign		☐ Left ☐ Right	☐ Front ☐ Rear
Type Rating/Endorsement for		Total Flight 7	ime at the Time	L_		Center	Single Unknown
Accident/Incident Aircraft?	Yes No	of this Accide	nt/Incident:	hrs			
Pilot Name and Address						Degree of In	i jury
First Name:		City:	ZIP:			☐ None ☐ Minor	☐ Fatal ☐ Unknown
Middle Initial: Last Name:		Country:	ZIP:	_		Serious	
Pilot Certificate(s) (Check all that	ut apply)					Seat Occupi	ed
☐ None ☐ Student	Recreational	Commercial	Flight Engineer	☐ Foreign		☐ Left ☐ Right	☐ Front ☐ Rear
☐ Private ☐ Flight Instructor Type Rating/Endorsement for	☐ Sport	Airline Transport	LJ U.S. Military Time at the Time			Center	☐ Single
Accident/Incident Aircraft?	Yes No		nt/Incident:	hrs			☐ Unknown
PASSENGER(S) / OTHER	PERSONNEL	(Include flight at	tendants: continue	on separate	she	et if neces	sarv)
PASSENGER(S) / OTHER	PERSONNEL	(Include flight at	tendants; continue	on separate			
-	PERSONNEL	(Include flight at	tendants; continue				
Name and Address	PERSONNEL			on separate		Recente Revenue Non-Occupant PAA	
Name and Address First Name:	PERSONNEL				Crew Non-		Fatal Serious Injury Minor Injury No Injury Inknown
Name and Address		City:	zip:		Crew Non-	Revenue Revenue Non- Occupant FAA	Fatal Serious Injury Minor Injury No Injury Inknown
Name and Address First Name: Middle Initial: Last Name: First Name:		City: State: Country: City:	ZIP:	Seat	<u>*</u>	Revenue Rovenue Non- Occupant TAA	Fatal Serious Injury Minor Injury Injury Injury Injury Injury Injury
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial:		City: State: Country: City: State:	ZIP:	Seat	<u>*</u>	Revenue Rovenue Non- Occupant TAA	Fatal Serious Injury Minor Injury No Injury Inknown
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name:		City: State: Country: City: State: Country:	ZIP:	Seat	<u>*</u>	Revenue Rovenue Non- Occupant TAA	Fatal Serious Injury Minor Injury Injury Injury Injury Injury Injury
Name and Address First Name: Middle Initial: Last Name: Middle Initial: Last Name: First Name:		City: State: Country: City: State: City: State:	ZIP:	Seat	Crew		Fatal Serious Injury Minor Injury Injury Injury Injury Injury Injury
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name:		City: State: Country: City: State: City: State:	ZIP:	Seat	Crew		
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: First Name: First Name:		City: State: Country: City: State: Country: City: State: Country:	ZIP:	Seat	Crew		
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: Middle Initial: Last Name: First Name:		City: State: Country:	ZIP:	Seat	Crew		
Name and Address First Name: Middle Initial: Last Name: First Name: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: Last Name:		City: State: Country: City: State: Country: City: State: Country: City: State: Country:	ZIP: ZIP: ZIP:	Seat	Crew		
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name:		City: State: Country: City: State: Country: City: State: Country: City: State: Country:	ZIP: ZIP: ZIP:	Seat	New		Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: Last Name:		City: State: Country: City: State: Country: City: State: Country: City: State: Country:	ZIP: ZIP: ZIP: ZIP:	Seat	New		
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: First Name: First Name: First Name: First Name:		City: State: Country:	ZIP:	Seat			Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: Middle Initial: Last Name: Middle Initial: Last Name:		City: State: Country:	ZIP:	Seat			Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: First Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: Middle Initial: Last Name:		City:	ZIP:	Seat			Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: First Name: First Name: Middle Initial: Last Name: First Name: First Name: First Name: First Name:		City:	ZIP:	Seat		C	Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name:		City:	ZIP:	Seat		C	Company Comp
Name and Address First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name: First Name: Middle Initial: Last Name:		City: State: Country: City: State: Country:	ZIP:	Seat		C	C
Name and Address First Name: Middle Initial: Last Name: First Name: First Name: Middle Initial: Last Name:		City:	ZIP:	Seat		C	Company Comp

-- --

NARRA	TIVE HISTORY	OF FLIGHT (Please	type or print in	ink)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	31 1 LIOIII (I IVAGO	TABO OF BILLIE HE	******

Describe what occurred in chronological order, circumstances leading to accident and nature of accident. Describe terrain and include sketch of wreckage distribution if pertinent. Attach extra sheets if needed. State point of departure, time of departure, intended destination and services obtained.

Please sa attached

RECOMMENDATION (How could this accident have been prevented?)

Operator/Owner Safety Recommendation

Better oversight of manufacturing practices/processes of engine/airframe manufacturers.

ADDITIONAL IN	FORMA	TION (Please type or print in ink)		
		is needed for any answers.		
		•		
I HEREBY CERTIFY	THAT TH	HE ABOVE INFORMATION IS COMPE	ETE AND ACCURATE TO TH	E BEST OF MY KNOWLEDGE
Date of this Report	Signature	and Name of Phot/Otoebales	J//X	
()5/09/2006	Signature:_	· Office of the state of the st		
mm/dd/fyyyy	Type or Pri		ENBER-	Towier Diaz
1	of Person	Filing Report if Other than Pilot/Operato	or '	
Signature:				
Type or Print Name: Title:				
1 tdc		FOR NTSB	USE ONLY	
NTSB Accident/Incid	lent No.	Reviewed by NTSB Regional Office	Name of Investigator	Date Report, Received
NYCOGLAIC		NEZA-UA	Rayner	5/9/06

. .