

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

Accident/Incident Location Nearest City/Place: <u>North Pole</u> State: <u>AK</u> ZIP: <u>99705</u> Country: <u>US</u> Latitude: <u>64°49.975</u> (dd:mm:ss N/S) Longitude: <u>147°25.478</u> (ddd:mm:ss E/W)				Date/Time Date: <u>3/27/14</u> Local Time: <u>1:30 PM</u> mm/dd/yyyy Time Zone: <u>AK</u>			
Phase of Operation ☐ Standing ☐ Takeoff (incl. initial climb) ☐ Cruise ☐ Hover ☒ Taxi ☐ Climb ☐ Maneuvering ☐ Other ☐ Descent ☐ Landing ☐ Approach ☐ Unknown			Collision with Other Aircraft ☐ Midair ☐ On-ground ☒ None		Altitude of In-Flight Occurrence <u>NA</u> ft MSL		
Manufacturer: <u>Cessna</u> Model: <u>180</u> Serial Number: <u>31923</u> Registration Number: <u>N312SD</u> Amateur-built: ☐ Yes ☒ No				Max Gross Weight: <u>2550</u> lbs Weight at Time of Accident/Incident: <u>2100</u> lbs Location of Center of Gravity at Time of Accident/Incident: inches from ☐ nose or ☐ datum -or- Percent Mean Aerodynamic Cord (% MAC)			
Category of Aircraft ☒ Airplane ☐ Balloon ☐ Blimp/Dirigible ☐ Glider ☐ Gyrocraft ☐ Helicopter ☐ Powered lift ☐ Ultralight ☐ Unknown		Type of Airworthiness Certificate (Check all that apply) Standard ☒ Normal ☐ Utility ☐ Acrobatic ☐ Transport Special ☐ Restricted ☐ Limited ☐ Provisional ☐ Experimental ☐ Special Flight ☐ Light Sport		Number of Seats: <u>4</u> If Large Aircraft, how many seats for: Flight Crew: _____ Cabin Crew: _____ Passengers: _____		Landing Gear ☐ Retractable Check any additional landing gear configuration that applies: ☐ Tricycle ☒ Tailwheel ☐ Amphibian ☐ High Skid ☐ Emergency Float ☐ Skid ☐ Float ☒ Ski ☐ Hull ☐ Ski/Wheel ☐ Unknown	
Type of Maintenance Program ☒ Annual ☐ Conditional (Amateur-built only) ☐ Manufacturer's Inspection Program ☐ Other Approved Inspection Program (AAIP) ☐ Continuous Airworthiness ☐ Other, specify: _____			Last Inspection Type ☐ 100 Hour ☐ Continuous Airworthiness ☐ AAIP ☐ Conditional Inspection ☒ Annual ☐ Unknown		Date Last Inspection: <u>11/26/13</u> P/M mm/dd/yyyy Airframe Total Time: <u>3098.5</u> hrs hours measured at (check one) ☒ Last Inspection ☐ Time of Accident/Incident		
IFR Equipped ☐ Yes ☒ No ☐ Unknown			Stall Warning System Installed ☒ Yes ☐ No ☐ Unknown		Type of Fire Extinguishing System ☒ None ☐ Specify _____		
ELT Installed ☒ Yes ☐ No ELT Activated ☐ Yes ☒ No			ELT Manufacturer: <u>Americ King Corp</u> Model/Series: <u>AK 450</u> Serial Number: <u>46582C</u> Battery Type: <u>D Cell</u> Battery Exp. Date: <u>12/2017</u>				
Engine Type ☒ Reciprocating ☐ Turbo Jet ☐ Turbo Shaft ☐ Turbo Fan ☐ Turbo Prop ☐ Unknown		Reciprocating Fuel System Type ☒ Carburetor ☐ Fuel Injected		Propeller ☐ Fixed Pitch ☒ Controllable Pitch Manufacturer: <u>McCawley</u> Model: <u>2A34C66-ND</u>			
Engine Eng. 1 Eng. 2 Eng. 3 Eng. 4		Engine Manufacturer <u>Continental</u> Engine Model/Series <u>O-470-J</u> Manufacturer's Serial Number <u>202210-R</u>		Date of Mfg. mm dd yyyy Engine Rated Power Measured as (check one) ☒ Horsepower or ☐ lbs of Thrust <u>225</u> Total Time (hours) <u>30185</u> Time Since Inspection (hours) <u>0</u> Time Since Overhaul (hours) <u>162</u>			

Registered Aircraft Owner Name: <u>David Henry</u> Fractional Ownership Aircraft: ☐ Yes ☒ No		Owner Address City: <u>Baker City</u> State: <u>Oregon</u> ZIP: <u>97814</u> Country: <u>US</u>	
Operator of Aircraft ☐ Same As Registered Owner Name: <u>Chad Heineken</u> Doing Business As: <u>NA</u> Air Carrier/Operator Designator (4 Character Code): <u>NA</u>		Operator Address ☐ Same As Registered Owner City: <u>Fairbanks</u> State: <u>AK</u> ZIP: <u>99707</u> Country: <u>US</u>	
Regulation Flight Conducted Under ☒ FAR 91 ☐ FAR 129 ☐ FAR 91 Special Flight ☐ Public Use (select type) ☐ FAR 103 ☐ FAR 133 ☐ Non-US, Commercial ☐ Federal ☐ State ☐ Local ☐ FAR 121 ☐ FAR 135 ☐ Non-US, Non-commercial ☐ Unknown ☐ FAR 125 ☐ FAR 137 ☐ Armed Forces		Revenue Sightseeing Flight ☐ Yes ☒ No Air Medical Flight ☐ Yes ☒ No	
Purpose of Flight for FAR 91, 103, 133, 137 (Select one) ☒ Personal ☐ Business ☐ Executive/Corporate ☐ Other Work Use ☐ Instructional ☐ Ferry ☐ Positioning ☐ Aerial Application ☐ Aerial Observation ☐ Air Drop ☐ Air Race / Show ☐ Flight Test ☐ Public Use ☐ Unknown		Revenue Operation for FAR 121, 125, 129, 135 (Select one) ☐ Scheduled or Commuter ☐ Non-Scheduled or Air Taxi <u>NA</u> Domestic or International ☐ Domestic ☐ International Cargo Operation <u>NA</u> ☐ Passenger/Cargo ☐ Passenger _____ How many? ☐ Cargo _____ lbs ☐ Mail	
Type of Commercial Operating Certificate Held (Check all that apply) ☒ None ☐ Flag Carrier Operating Certificate (121) ☐ Supplemental ☐ Air Cargo ☐ Foreign Air Carriers (129) ☐ Commuter Air Carrier (135) ☐ On-Demand Air Taxi (135) ☐ Large Helicopter (127) ☐ Rotorcraft External Load (133) ☐ - or - ☐ Agricultural Aircraft (137) ☐ Other Operator of Large Aircraft			
Aircraft Registration Number <u>N3125D</u>		Manufacturer: <u>Cessna</u> Model: <u>180</u>	
Damage to Other Aircraft ☐ Destroyed ☐ Minor ☐ Substantial ☒ None			
Registered Owner of Other Aircraft First Name: <u>NA</u> City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____			
Pilot of Other Aircraft First Name: <u>NA</u> City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____			
Was there Mechanical Malfunction/Failure? ☐ Yes ☒ No ☐ Unknown <i>(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)</i>			Total Time/Cycles On Part <u>NA</u> _____ Hours _____ Cycles Time Since This Part Inspected/Overhauled _____ Hours <u>NA</u>
Aircraft Damage ☐ None ☒ Substantial ☐ Minor ☐ Destroyed		Aircraft Fire ☒ None ☐ Both Ground and In-Flight ☐ In-Flight ☐ Unknown Origin ☐ On-Ground	
Aircraft Explosion ☒ None ☐ Both Ground and In-Flight ☐ In-Flight ☐ Unknown Origin ☐ On-Ground			

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

Left Wing leading Edge Damaged, Right wing leading edge damaged.
Fuselage wrinkled and buckled between the wings. Pilots door unable to open. Possible prop and engine damages.

Airport Identifier: 31 AKDistance From Airport Center: 0 SMAirport Name: DalrympleDirection From Airport: NA degrees MAGProximity to Airport ☐ Off Airport/Airstrip ☐ On Airport ☒ On AirstripAirport Elevation: 480 ft. MSLApproach Segment (Select one) NA
☐ On Instrument Approach ☐ Landing ☐ Base leg ☐ Final ☐ Go Around
☐ Crosswind ☐ Downwind ☐ Low Approach ☐ Aborted Landing (after touchdown)
IFR Approach (Check all that apply) NA
☐ None ☐ PAR ☐ MLS ☐ Practice
☐ ADF/NDB ☐ Sideslip ☐ LDA ☐ GPS
☐ SDF ☐ ILS ☐ ASR ☐ Loran
☐ VOR/TVOR ☐ Localizer Only ☐ Visual ☐ Unknown
☐ VOR/DME ☐ LOC-back course ☐ Contact
☐ TACAN ☐ RNAV ☐ Circling
VFR Approach (Check all that apply) NA
☐ None ☐ Stop and Go
☐ Traffic Pattern ☐ Touch and Go
☐ Straight-In ☐ Simulated Forced Landing
☐ Valley/Terrain Following ☐ Forced Landing
☐ Go Around ☐ Precautionary Landing
☐ Full Stop ☐ Unknown

Runway Information

Runway ID: 6/24 (L/R/C) Length: 2400 ft Width: 100 ft

Runway/Landing Surface (Check all that apply)

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

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 ☐ Unknown
☐ Slush Covered ☐ Vegetation

Last Departure Point

 Airport ID: NA
 City: _____
 State: _____
 Country: _____

Time of Departure

 Time: NA
 Time Zone: _____

Destination

 Airport ID: NA
 City: _____
 State: _____
 Country: _____

Type Flight Plan Filed

☐ None ☐ VFR/IFR
☐ Company VFR ☐ IFR
☐ Military VFR ☐ Unknown
☐ VFR
 Activated? ☐ Yes ☐ No

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 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 (MOA) ☐ FAR 93 ☐ Unknown
☐ Class D ☐ Warning Area ☐ Airport Advisory Area

Aircraft Load Description (Check all that apply)

☒ None ☐ Towing Glider ☐ Parachutists ☐ Livestock
☐ Passengers ☐ Towing Banner ☐ Water ☐ Unknown
☐ Cargo ☐ Other External ☐ Chemical/Fertilizer/Seeds
Fuel on Board at Last Takeoff
(convert from pounds, as necessary)60 Gallons

Fuel Type

☐ 80/87 ☐ 115/145 ☐ JP3
☒ 100 Low Lead ☐ Jet A ☐ JP4
☐ 100/130 ☐ Automotive ☐ JP5

Other Services, if Any, Prior to Departure

None

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

NO emergency evacuation, Impact felt minor. Pilots door would not open.
Passenger door was opened and I exited thru the passenger door.

Weather Observation Facility Facility ID: <u>Ft Wainwright PAFB</u> Observation Time: <u>Noon</u> Time Zone: <u>Alaska</u> Distance from Accident Site: <u>5</u> NM Direction from Accident Site: <u>60</u> degrees MAG		Source of Weather Information (Check all that apply) ☐ National Weather Service ☐ Flight Service Station ☐ TV/Radio ☐ Automated Report ☐ Commercial Weather Service (DUATS) ☐ Company ☐ Military ☒ Internet ☐ Unknown		Method of Briefing (Check all that apply) ☐ In Person <i>NA</i> ☐ Teletype ☐ Telephone/Computer ☐ Aircraft Radio ☐ TV/Radio ☐ Unknown
Briefing Type/Completeness ☐ Full ☐ Partial / Limited By Pilot ☐ Partial / Limited By Briefer ☐ Abbreviated ☐ Unknown ☒ Not Pertinent		Light Condition ☐ Dawn ☒ Day ☐ Dusk ☐ Night ☐ Dark Night ☐ Bright Night ☐ Not Reported		Visibility <u>25</u> miles
Sky/Lowest Cloud Condition ☒ Clear ☐ Few ☐ Partial Obscuration ☐ Scattered ☐ Thin Broken ☐ Thin Overcast ☐ Unknown		Ceiling ☒ None (clear) ☐ Broken ☐ Overcast ☐ Obscured ☐ Indefinite ☐ Unknown		Restriction to Visibility (Check all that apply) ☒ None ☐ Blowing Dust ☐ Blowing Sand ☐ Blowing Snow ☐ Blowing Spray ☐ Dust ☐ Fog ☐ Ground Fog ☐ Haze ☐ Ice Fog ☐ Smoke ☐ Unknown
Lowest Cloud Condition Height <u>Clear</u> ft AGL		Ceiling Height <u>Clear</u> ft AGL		
Wind Direction <u>None</u> ☐ Indicated: _____ degrees MAG ☐ Variable	Wind Speed Velocity: _____ KTS -or- ☒ Calm ☐ Light and Variable	Wind Gusts Velocity: _____ KTS ☐ Gusting ☒ Not Gusting	Type of Turbulence (Check all that apply) <i>NA</i> ☐ None ☐ Clear Air ☐ In Clouds ☐ Vicinity of Thunderstorm Severity of Turbulence ☐ Extreme ☐ Severe ☐ Moderate ☐ Moderate Chop ☐ Light	
NOTAMs (D, L and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident				
Temperature: _____ (C) or <u>30</u> (F) Altimeter Setting: <u>29.87</u> in. HG or _____ MB Density Altitude: <u>-1276</u> ft Dew Point: _____ (C) or <u>12.2</u> (F)		Icing Forecast Amount ☒ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe Type ☐ Rime ☐ Clear ☐ Mixed Icing Actual Amount ☒ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe Type ☐ Rime ☐ Clear ☐ Mixed		
		Type of Precipitation (Check all that apply) ☒ None ☐ Rain ☐ Snow ☐ Hail ☐ Rain Showers ☐ Freezing Rain ☐ Snow Shower ☐ Drizzle ☐ Ice Pellets ☐ Snow Pellets ☐ Snow Grains ☐ Ice Crystals ☐ Ice Pellets Shower ☐ Freezing Drizzle Intensity of Precipitation <i>NA</i> ☐ Light ☐ Moderate ☐ Heavy		

Pilot "A" Responsibilities at the Time of Accident/Incident ☒ Pilot ☐ Co-Pilot ☐ Student Pilot ☐ Flight Instructor ☐ Check Pilot ☐ Flight Engineer ☐ Other Flight Crew																																																																																																				
Pilot "A" Identification First Name: <u>Chad</u> City: <u>Fairbanks</u> Middle Initial: <u>H</u> State: <u>AK</u> ZIP: <u>99707</u> Last Name: <u>Heineken</u> Country: <u>US</u> Age at time of Accident/Incident: <u>40</u> Date of Birth: <u>mm/dd/yyyy</u> <u>73</u> Certificate Number: <u>mm/dd/yyyy</u>																																																																																																				
Degree of Injury ☒ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious			Seat Occupied ☒ Left ☒ Front ☐ Unknown ☐ Right ☐ Rear ☐ Center ☐ Single			Seat Belt Used ☒ Yes ☐ No Available ☐ Yes ☐ No		Shoulder Harness Used ☐ Yes ☒ No Available ☐ Yes ☒ No																																																																																												
Pilot Certificate(s) (Check all that apply) ☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign ☒ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military																																																																																																				
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 ☐ With limitations/waivers ☐ Unknown		Date of Last Medical <u>5/23/13</u> <i>mm/dd/yyyy</i>																																																																																													
Medical Certificate Limitations <u>none</u>																																																																																																				
Medical Certificate Waivers <u>none</u>																																																																																																				
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: <u>2/24/13</u> <i>mm/dd/yyyy</i>			Flight Review Aircraft Make: <u>Cessna</u> Model: <u>150</u>																																																																																																	
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 ☐ Free 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 <u>Single-Engine Land 2/24/13</u> <u>High Performance airplane 9/18/13</u> <u>Tailwheel airplane 9/18/13</u>						Student Endorsements (Include dates)																																																																																														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Flight Time (enter appropriate number of hours in each box)</th> <th rowspan="2">All Aircraft</th> <th rowspan="2">This Make & Model</th> <th rowspan="2">Airplane Single Engine</th> <th rowspan="2">Airplane Multiengine</th> <th rowspan="2">Night</th> <th colspan="2">Instrument</th> <th rowspan="2">Rotorcraft</th> <th rowspan="2">Glider</th> <th rowspan="2">Lighter Than Air</th> </tr> <tr> <th>Actual</th> <th>Simulated</th> </tr> </thead> <tbody> <tr> <td>Total Time</td> <td>72.2</td> <td>23.4</td> <td>72.2</td> <td>—</td> <td>3.7</td> <td>—</td> <td>3.4</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>Pilot in Command (PIC)</td> <td>39.5</td> <td>15.8</td> <td>39.5</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>Time as Instructor</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>This Make/Model</td> <td colspan="10"></td> </tr> <tr> <td>Last 90 Days</td> <td>4.7</td> <td>4.7</td> <td>4.7</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>Last 30 Days</td> <td>3.5</td> <td>3.5</td> <td>3.5</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> <tr> <td>Last 24 Hours</td> <td>0</td> <td>0</td> <td>0</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> <td>—</td> </tr> </tbody> </table>											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	72.2	23.4	72.2	—	3.7	—	3.4	—	—	—	Pilot in Command (PIC)	39.5	15.8	39.5	—	—	—	—	—	—	—	Time as Instructor	—	—	—	—	—	—	—	—	—	—	This Make/Model											Last 90 Days	4.7	4.7	4.7	—	—	—	—	—	—	—	Last 30 Days	3.5	3.5	3.5	—	—	—	—	—	—	—	Last 24 Hours	0	0	0	—	—	—	—	—	—	—
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Pilot Name and Address		Degree of Injury	
First Name: <u>Chad Heincken</u>	City: <u>Fairbanks</u>	☒ None	☐ Fatal
Middle Initial: <u>HH</u>	State: <u>AK</u> ZIP: <u>99707</u>	☐ Minor	☐ Unknown
Last Name: <u>Heincken</u>	Country: <u>US</u>	☐ Serious	
Pilot Certificate(s) (Check all that apply)		Seat Occupied	
☐ None	☐ Student	☒ Left	☒ Front
☒ Private	☐ Flight Instructor	☐ Right	☐ Rear
☐ Recreational	☐ Sport	☐ Center	☐ Single
☐ Commercial	☐ Airline Transport		☐ Unknown
☐ Flight Engineer	☐ U.S. Military		
☐ Foreign			
Type Rating/Endorsement for Accident/Incident Aircraft? ☒ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: <u>72.2</u> hrs	

Pilot Name and Address		Degree of Injury	
First Name: _____	City: _____	☐ None	☐ Fatal
Middle Initial: _____	State: _____ ZIP: _____	☐ Minor	☐ Unknown
Last Name: _____	Country: _____	☐ Serious	
Pilot Certificate(s) (Check all that apply)		Seat Occupied	
☐ None	☐ Student	☐ Left	☐ Front
☐ Private	☐ Flight Instructor	☐ Right	☐ Rear
☐ Recreational	☐ Sport	☐ Center	☐ Single
☐ Commercial	☐ Airline Transport		☐ Unknown
☐ Flight Engineer	☐ U.S. Military		
☐ Foreign			
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs	

Pilot Name and Address		Degree of Injury	
First Name: _____	City: _____	☐ None	☐ Fatal
Middle Initial: _____	State: _____ ZIP: _____	☐ Minor	☐ Unknown
Last Name: _____	Country: _____	☐ Serious	
Pilot Certificate(s) (Check all that apply)		Seat Occupied	
☐ None	☐ Student	☐ Left	☐ Front
☐ Private	☐ Flight Instructor	☐ Right	☐ Rear
☐ Recreational	☐ Sport	☐ Center	☐ Single
☐ Commercial	☐ Airline Transport		☐ Unknown
☐ Flight Engineer	☐ U.S. Military		
☐ Foreign			
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs	

Name and Address	Seat	Crew	Non-Revenue	Revenue	Non-Revenue	Occupant	FAA	Fatal	Serious Injury	Minor Injury	No Injury	Unknown
First Name: _____ City: _____												
Middle Initial: _____ State: _____ ZIP: _____												
Last Name: _____ Country: _____												
First Name: _____ City: _____												
Middle Initial: _____ State: _____ ZIP: _____												
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Last Name: _____ Country: _____												
First Name: _____ City: _____												
Middle Initial: _____ State: _____ ZIP: _____												
Last Name: _____ Country: _____												

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 time and point of departure, intended destination, and services obtained.

I was at Dalrymple Airstrip (3IAK). I did my normal walk around and found no problems with the airplane. I started the Engine and oilhead oil pressure to run. My normal routine is to taxi down the strip a few times to warm the engine and remove frost build up on the bottom of the skis. 3IAK has no taxi ways. I reported on CTAF that I was entering the runway mid field. I went out made a right turn and taxied to the east end. Shut the engine off got out and pushed the tail to turn around. I aligned the tail wheel then got back in. Started the engine and began to taxi back down. The plane drifted slowly left. I was giving full right rudder with no effect. I decided I needed a little speed to get wind on my tail and gave a little throttle. The ground was hard snow and took time to stop on skis. The plane continued to drift left. I was at the point I knew if I powered back to stop I would drift into the trees next to the strip. I gave a burst of full power to try and get the plane to come right with no effect it continued left. When I knew I was going to hit the left wing I pulled power all off. The left wing struck a tree, the plane spun around and the right wing came to rest on a power pole. The prop went into smaller brush and the engine shut down. I unbuckled, turned power off and exited the passenger door.

Operator/Owner Safety Recommendation

ADDITIONAL INFORMATION (Please type or print in ink)

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

Date of this Report3/28/14

mm/dd/yyyy

Signature and Name of Pilot/Operator

Signature: _____

Type or Print Name: _____

Chad Heineken**Signature and Name of Person Filing Report if Other than Pilot/Operator**

Signature: _____

Type or Print Name: _____

Title: _____

NTSB Accident/Incident No.
ANC14CA021Reviewed by NTSB Regional Office
AnchorageName of Investigator
BanningDate Report Received
3/31/2014