

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

Accident/Incident Location

Nearest City/Place: Sioux Falls State: SD
 ZIP: 57104 Country: USA
 Latitude: 43:34:55 N (dd:mm:ss N/S) Longitude: 96:44:30 W (ddd:mm:ss E/W)

Date/Time

Date: 05/27/2016 Local Time: 0925
 mm/dd/yyyy Time Zone: Central

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

3,000 ft MSL

AIRCRAFT INFORMATION

Manufacturer: Cessna

Model: 402B

Serial Number: 1055

Registration Number: N76MD

Amateur-built: ☐ Yes ☒ No

Max Gross Weight: 6,300 lbs

Weight at Time of Accident/Incident: 5,147 lbs

Location of Center of Gravity at Time of Accident/Incident:

151.2 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: 2

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: 100 hour

Last Inspection Type

☐ 100 Hour ☐ Continuous Airworthiness
☐ AAIP ☐ Conditional Inspection
☒ Annual ☐ Unknown

Date Last Inspection: 03/04/2016

mm/dd/yyyy

Airframe Total Time: 13,479 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: Dorne Margolin

Model/Series: ELT 6

Serial Number: 32192

Battery Type: Alkaline

Battery Exp. Date: 02/2017

ELT Aided in Locating Accident/Incident

☐ Yes ☒ No

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: McCaughey

Model: 3AF32C504

Engine	Engine Manufacturer	Engine Model/Series	Manufacturer's Serial Number	Date of Mfg. mm/dd/yyyy	Engine Rated Power Measured as (check one) ☒ Horsepower or ☐ lbs of Thrust	Total Time (hours)	Time Since Inspection (hours)	Time Since Overhaul (hours)
Eng. 1	Continental Motors	TSIO-520-E	1004008	03/29/2011	300	1,343	80	1,343
Eng. 2	Continental Motors	TSIO-520-E	1012168	05/11/2015	300	228	80	228
Eng. 3								
Eng. 4								

OWNER/OPERATOR INFORMATION		
Registered Aircraft Owner Name: <u>Business Aviation Courier, Inc</u> Fractional Ownership Aircraft: ☐ Yes ☒ No		Owner Address City: <u>Sioux Falls</u> State: <u>SD</u> ZIP: <u>57104</u> Country: <u>USA</u>
Operator of Aircraft ☒ Same As Registered Owner Name: <u>Business Aviation Courier, Inc</u> Doing Business As: <u>Encore Air Cargo</u> Air Carrier/Operator Designator (4 Character Code): <u>DUFA</u>		Operator Address ☒ Same As Registered Owner City: <u>Sioux Falls</u> State: <u>SD</u> ZIP: <u>57104</u> Country: <u>USA</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 Domestic or International ☐ Domestic ☐ International Cargo Operation ☐ 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
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 First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____		
Pilot of Other Aircraft First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____		
MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on separate sheet)		
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> #4 Cylinder, Continental Motors, P/N 654651, S/N 104668-2 See attached sheet.		Total Time/Cycles On Part <u>unknown</u> Hours _____ Cycles Time Since This Part Inspected/Overhauled _____ 179 Hours
DAMAGE TO AIRCRAFT AND OTHER PROPERTY		
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)

See attached sheet.

AIRPORT INFORMATION (If the accident/incident occurred on approach, takeoff or within 3 miles of an airport, complete this section)Airport Identifier: KFSDDistance From Airport Center: 6 SMAirport Name: Joe Foss FieldDirection From Airport: 045 degrees MAGProximity to Airport ☒ Off Airport/Airstrip ☐ On Airport ☐ On AirstripAirport Elevation: 1,430 ft. MSL**Approach Segment** (Select one)☒ On Instrument Approach☐ Landing☐ Base leg☐ Final☐ Go Around☐ Crosswind☐ Downwind☐ Low Approach☐ Aborted Landing (after touchdown)**IFR Approach** (Check all that apply)☐ None☐ PAR☐ MLS☒ Practice☐ ADF/NDB☐ Sidestep☐ 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)☐ 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: 15 (L/R/C) Length: 8,000 ft Width: 150 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**FLIGHT ITINERARY INFORMATION****Last Departure Point**Airport ID: KFSDCity: Sioux FallsState: SDCountry: USA**Time of Departure**Time: 0840Time Zone: Central**Destination**Airport ID: KFSDCity: Sioux FallsState: SDCountry: USA**Type Flight Plan Filed**☐ None☐ VFR/IFR☒ Company VFR☐ IFR☐ Military VFR☐ Unknown☐ VFRActivated? ☒ 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 & SERVICES INFORMATION****Fuel on Board at Last Takeoff**

(convert from pounds, as necessary)

100 Gallons**Fuel Type**☐ 80/87☐ 115/145☐ JP3☐ Other, specify _____☒ 100 Low Lead☐ Jet A☐ JP4☐ 100/130☐ Automotive☐ JP5

Other Services, if Any, Prior to Departure

EVACUATION OF AIRCRAFTWas an emergency evacuation of the aircraft performed? ☐ Yes ☒ No

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

Both occupants exited normally via the main cabin door.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Weather Observation Facility**Facility ID: KFSDObservation Time: 0856Time Zone: CentralDistance from Accident Site: 0 NMDirection from Accident Site: 0 degrees MAG**Source of Weather Information**

(Check all that apply)

- | | |
|---|--|
| ☐ National Weather Service | ☐ Company |
| ☐ Flight Service Station | ☐ Military |
| ☐ TV/Radio | ☒ Internet |
| ☐ Automated Report | ☐ Unknown |
| ☐ Commercial Weather Service (DUATS) | |

Method of Briefing

(Check all that apply)

- | |
|--|
| ☐ In Person |
| ☐ Teletype |
| ☒ Telephone/Computer |
| ☐ Aircraft Radio |
| ☐ TV/Radio |
| ☐ Unknown |

Briefing Type/Completeness

- | | |
|---|---|
| ☐ Full | ☒ Abbreviated |
| ☐ Partial / Limited By Pilot | ☐ Unknown |
| ☐ Partial / Limited By Briefer | ☐ Not Pertinent |

Light Condition

- | | | |
|--|--------------------------------|---------------------------------------|
| ☒ Dawn | ☐ Dusk | ☐ Dark Night |
| ☒ Day | ☐ Night | ☐ Bright Night |
| | | ☐ Not Reported |

Visibility10 miles**Sky/Lowest Cloud Condition**

- | | |
|--|--|
| ☐ Clear | ☐ Thin Broken |
| ☐ Few | ☐ Thin Overcast |
| ☐ Partial Obscuration | ☐ Unknown |
| ☐ Scattered | |

Ceiling

- | | |
|--|-------------------------------------|
| ☐ None (clear) | ☐ Obscured |
| ☒ Broken | ☐ Indefinite |
| ☐ Overcast | ☐ Unknown |

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 |

Lowest Cloud Condition Height10,000 ft AGL**Ceiling Height**10,000 ft AGL**Wind Direction**

- ☒ Indicated:
170 degrees MAG
- ☐ Variable

Wind Speed

- Velocity: 8 KTS
- or-
- ☐ Calm
☐ Light and Variable

Wind Gusts

- Velocity: KTS
- ☐ Gusting
☒ Not Gusting

Type of Turbulence (Check all that apply)

- | | |
|--|---|
| ☒ None | ☐ In Clouds |
| ☐ Clear Air | ☐ Vicinity of Thunderstorm |

Severity of Turbulence

- | | | |
|----------------------------------|--|--------------------------------|
| ☐ Extreme | ☐ Moderate | ☐ Light |
| ☐ Severe | ☐ Moderate Chop | |

NOTAMs (D, L and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident

See attached sheet.

Temperature: 17 (C)
or (F)Altimeter Setting: 29.78 in. HG
or MBDensity Altitude: 2,358 ftDew Point: 13 (C)
or (F)**Icing Forecast****Amount**

- | | |
|--|-----------------------------------|
| ☒ None | ☐ Moderate |
| ☐ Trace | ☐ Severe |
| ☐ Light | |

Type

- | |
|--------------------------------|
| ☐ Rime |
| ☐ Clear |
| ☐ Mixed |

Icing Actual**Amount**

- | | |
|--|-----------------------------------|
| ☒ None | ☐ Moderate |
| ☐ Trace | ☐ Severe |
| ☐ Light | |

Type

- | |
|--------------------------------|
| ☐ Rime |
| ☐ Clear |
| ☐ Mixed |

Type of Precipitation (Check all that apply)

- | | |
|--|---|
| ☐ None | ☐ Drizzle |
| ☒ Rain | ☐ Ice Pellets |
| ☐ Snow | ☐ Snow Pellets |
| ☐ Hail | ☐ Snow Grains |
| ☐ Rain Showers | ☐ Ice Crystals |
| ☐ Freezing Rain | ☐ Ice Pellets Shower |
| ☐ Snow Shower | ☐ Freezing Drizzle |

Intensity of Precipitation

- | | | |
|---|-----------------------------------|--------------------------------|
| ☒ Light | ☐ Moderate | ☐ Heavy |
|---|-----------------------------------|--------------------------------|

PILOT "B" INFORMATION

Pilot "B" Responsibilities at the Time of Accident/Incident

☐ Pilot
 ☐ Co-Pilot
 ☒ Student Pilot
 ☐ Flight Instructor
 ☐ Check Pilot
 ☐ Flight Engineer
 ☐ Other Flight Crew

Pilot "B" Identification

First Name: Blythe City: Mililani
 Middle Initial: C State: HI ZIP: 96789
 Last Name: Nakasone Country: USA

Age at time of Accident/Incident: 28 Date of Birth: mm/dd/yyyy Certificate Number: mm/dd/yyyy

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
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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>11/12/2015</u> <u>mm/dd/yyyy</u>
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Medical Certificate Limitations

None

Medical Certificate Waivers

None

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: 06/30/2014
mm/dd/yyyy

Flight Review Aircraft

Make: Cessna
 Model: 172

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
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Type Ratings

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	1,248	10	1,206	49	142	45	65	0	0	0
Pilot in Command (PIC)	975	10	1,005	10	134	45	44	0	0	0
Time as Instructor	845	0	845	0	104	41	0	0	0	0
This Make/Model					0	0	2			
Last 90 Days	90	10	85	10	4	4	2	0	0	0
Last 30 Days	13	9	7	9	0	0	2	0	0	0
Last 24 Hours	3	3	0	3	0	0	2	0	0	0

ADDITIONAL FLIGHT CREW MEMBERS (Exclusive of cabin attendants, complete the following information)																	
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		☐ Recreational		☐ Commercial		☐ Flight Engineer		☐ Foreign							
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs				☐ Left		☐ Front							
								☐ Right		☐ Rear							
								☐ Center		☐ Single							
										☐ Unknown							
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		☐ Recreational		☐ Commercial		☐ Flight Engineer		☐ Foreign							
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs				☐ Left		☐ Front							
								☐ Right		☐ Rear							
								☐ Center		☐ Single							
										☐ Unknown							
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		☐ Recreational		☐ Commercial		☐ Flight Engineer		☐ Foreign							
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military									
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No				Total Flight Time at the Time of this Accident/Incident: _____ hrs				☐ Left		☐ Front							
								☐ Right		☐ Rear							
								☐ Center		☐ Single							
										☐ Unknown							
PASSENGER(S) / OTHER PERSONNEL (Include flight attendants; continue on separate sheet if necessary)																	
Name and Address							Seat	Crew	Non-Revenue	Revenue	Non-Occupant	FAA	Fatal	Serious Injury	Minor Injury	No Injury	Unknown
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
State: _____ ZIP: _____																	
Country: _____																	
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
State: _____ ZIP: _____																	
Country: _____																	
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
State: _____ ZIP: _____																	
Country: _____																	
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
State: _____ ZIP: _____																	
Country: _____																	
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
State: _____ ZIP: _____																	
Country: _____																	
First Name: _____							_____		☐	☐	☐	☐	☐	☐	☐	☐	☐
Middle Initial: _____																	
Last Name: _____																	
City: _____							_____		☐	☐							

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

On May 27, 2016, we were doing Blythe Nakasone's Initial New Hire flight training in N76MD at KFSD. We were doing practice instrument approaches in VMC conditions at KFSD. While getting vectored for a practice RNAV/GPS approach to Runway 21, we noticed the left engine running rough. I noted the fuel flow for the left engine had dropped to 50 lbs/hr, so I pointed it out and had Blythe turn on the auxiliary fuel pump and request a full stop landing. We then observed the left hand tachometer drop to zero. Blythe then looked out at the left engine and told me "There's a fire!" I looked out and observed that there were flames visible through the louvers of the upper cowling of the left engine. I asked Blythe to let ATC know and declare an emergency while I completed the Engine Fire emergency checklist and secured the left engine. While we maneuvered to runway 15, the flames went out and we were able to land uneventfully. We touched down at approximately 9:26 and elected to taxi to the ramp. ARFF followed us back to the ramp and Encore Air Cargo's mechanics removed the engine cowling to ensure the fire was out. I then notified our POI, Lori Thomasson, and Ed Malinowski at the NTSB.

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

Operator/Owner Safety Recommendation

Unknown. Engine fire due to mechanical failure.

ADDITIONAL INFORMATION *(Please type or print in ink)*

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

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND ACCURATE TO THE BEST OF MY KNOWLEDGE**Date of this Report**

06/04/2016

mm/dd/yyyy

Signature and Name of Pilot/Operator

Signature: _____

Type or Print Name: Erica M Grossbach

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

Signature: _____

Type or Print Name: _____

Title: _____

FOR NTSB USE ONLY**NTSB Accident/Incident No.**

CEN16LA201

Reviewed by NTSB Regional Office

CEN

Name of Investigator

Sauer

Date Report Received

06/04/2016

N76MD LEFT ENGINE FIRE

Upon investigation it appears the number 4 cylinder experienced burn through of the cylinder head on the forward side of the exhaust port. This then melted the valve cover of the number 6 cylinder, spraying oil aft which then ignited. Since it was on the outboard side of the left engine, it wasn't seen by the pilot until significant damage had been done to the engine bay including the canted bulkhead which supports the engine beams. Several hoses and wiring were melted and the firewall shows signs of high heat. There may also be heat damage to the forward wing spar which runs just behind the firewall.

NOTAMS for KFSD 05/27/2016

!FSD 02/053 FSD OBST CRANE (ASN 2016-AGL-1266-OE) 433554N0964541W (1.3NM NW FSD) 1633FT (130FT AGL) FLAGGED 1602191502-1606302359EST

!FSD 04/035 FSD OBST TOWER LGT (ASR 1059380) 433941.00N0965425.00W (8.6 NM NW FSD) 1851.0FT (265.1FT AGL) OUT OF SERVICE 1604282327-1605282327

!FSD 04/037 FSD OBST TOWER LGT (ASR 1054651) 433248.00N0964557.00W (2.4NM SSW FSD) 1650.9FT (235.9FT AGL) OUT OF SERVICE 1604291249-1605291200

!FSD 04/038 (KFSD A0320/16) FSD APRON WEST GENERAL AVIATION RAMP NE 225FT WIP CONST ADJ NW SIDE LGTD AND BARRICADED 1604301428-1606152200

!FSD 05/027 (KFSD A0348/16) FSD NAV ILS RWY 21 OUT OF SERVICE 1605161230-1606061500

!FSD 05/028 (KFSD A0349/16) FSD NAV ILS RWY 03 OUT OF SERVICE 1605161230-1606061500

!FSD 05/029 (KFSD A0350/16) FSD RWY 03 ALS OUT OF SERVICE 1605161230-1606061500

!FSD 05/030 (KFSD A0351/16) FSD RWY 21 ALS OUT OF SERVICE 1605161230-1606061500

!FSD 05/031 (KFSD A0352/16) FSD RWY 21 VASI OUT OF SERVICE 1605161230-1606061500

!FSD 05/034 (KFSD A0361/16) FSD RWY 03/21 CLSD 1605161100-1606061100

!FSD 05/039 (KFSD A0360/16) FSD TWY B BTN AIR NATIONAL GUARD RAMP AND TWY B1 CLSD 1605161334-1606062200

!FSD 05/040 (KFSD A0359/16) FSD TWY B1 CLSD 1605161336-1606062200

!FSD 05/045 (KFSD A0364/16) FSD NAV VORTAC OUT OF SERVICE 1605261330-1605262000

!FSD 05/046 FSD SVC HAZARDOUS INFLIGHT WX ADVISORY SERVICE OUTLET OUT OF SERVICE 1605261330-1605262000

!FSD 05/047 FSD OBST TOWER LGT (ASR 1059380) 433941.00N0965425.00W (8.6NM NW FSD) 1851.0FT (265.1FT AGL) OUT OF SERVICE 1605261415-1606261415

!FSD 05/048 FSD AIRSPACE UAS WI AN AREA DEFINED AS .25NM RADIUS OF FSD125024.2 (8NM SW RRQ) SFC-200FT AGL 1605271900-1605272000

!FSD 05/049 FSD AIRSPACE UAS WI AN AREA DEFINED AS .25NM RADIUS OF FSD139018 (6NM WSW 2VA) SFC-200FT AGL 1605271800-1605271900

!FSD 05/050 (KFSD A0370/16) FSD NAV VORTAC OUT OF SERVICE 1605271400-1605271700

M0001/16 - RUNWAY ARRESTING GEAR RWY3/21 OTS FOR MX. 17 MAY 17:14 2016 UNTIL 07 JUN 17:00 2016. CREATED: 17 MAY 17:17 2016

!FDC 6/8827 (KFSD A0304/16) FSD IAP JOE FOSS FIELD, SIOUX FALLS, SD. RNAV (GPS) RWY 27, ORIG-C... DELETE THRE 1422. CHART TDZE 1424. LNAV HAT 536 ALL CATS. THIS IS RNAV (GPS) RWY 27, ORIG-D. 1604131718-PERM

!FDC 6/8828 (KFSD A0305/16) FSD IAP JOE FOSS FIELD, SIOUX FALLS, SD. RNAV (GPS) RWY 9, ORIG-C...
DELETE THRE 1423, CHART TDZE 1424. LNAV HAT 456 ALL CATS. THIS IS RNAV (GPS) RWY 9, ORIG-D.
1604131718-PERM

!FDC 6/0640 FSD IAP JOE FOSS FIELD, SIOUX FALLS, SD. ILS OR LOC RWY 3, AMDT 27F...RADAR REQUIRED
FOR PROCEDURES ENTRY EXCEPT FOR AIRCRAFT EQUIPPED WITH SUITABLE RNAV SYSTEM WITH GPS.
MAREY FIX MINIMUMS: NA EXCEPT FOR AIRCRAFT EQUIPPED WITH SUITABLE RNAV SYSTEMS WITH
GPS. MISSED APPROACH: CLIMB TO 3400 THEN CLIMBING LEFT TURN DIRECT ROKKY LOM/RADAR AND
HOLD SW, LT, 029.89 INBOUND. FSD VORTAC OUT OF SERVICE.

!FDC 6/0644 FSD IAP JOE FOSS FIELD, SIOUX FALLS, SD. ILS OR LOC RWY 21 AMDT 10B...PROCEDURE NA
EXCEPT FOR AIRCRAFT EQUIPPED WITH SUITABLE RNAV SYSTEM WITH SUITABLE GPS. FSD VORTAC OUT
OF SERVICE.