

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: Dallas State: Texas

ZIP: 75237 Country: Dallas

Latitude: 32°42'20.49"N Longitude: 96°55'15.50"W

(Enter in decimal degrees or degrees:minutes:seconds)

Accident/Incident Date/Time

Date: 10/15/2022

Local Time: 2:48 pm

mm/dd/yyyy

Time Zone: cst

Collision with Other Aircraft: ☐ Midair ☐ On-ground ☒ None

AIRCRAFT INFORMATION

Registration Number: N84LT

Manufacturer: Diamond

Model: DA 62

Serial Number: 62.C003

Year of Manufacture: 2018

Amateur-Built: ☒ Yes ☐ No If Yes: ☐ Kit/Plans ☐ Make: ☐ Original Design

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

Maximum Gross Weight: _____ lbs

Weight at Time of Accident/Incident: _____ lbs

Number of Seats: _____ Flight Crew Seats: _____

Cabin Crew Seats: _____ Passenger Seats: _____

Number of Engines: _____

Category of Aircraft

- ☒ Airplane
☐ Balloon
☐ Blimp/Dirigible
☐ Glider
☐ Gyroplane
☐ Helicopter
☐ Powered Lift
☐ Rocket
☐ Ultralight
☐ Unknown

Type of Airworthiness Certificate (Check all that apply)

Standard

- ☒ Normal
☐ Aerobatic
☐ Balloon
☐ Commuter
☐ Transport
☐ Utility

Special

- ☐ Restricted
☐ Limited
☐ Provisional
☐ Special Flight
☐ Experimental
☐ Special Light-Sport
☐ Experimental Light-Sport

☐ Certificate of Authorization or Waiver (COA)
☐ None ☐ Unknown

Landing Gear

(Check all that apply)

☒ Retractable

☒ Tricycle

- ☐ Amphibian
☐ Emergency Float
☐ Float
☐ Hull

☐ Tailwheel

- ☐ High Skid
☐ Skid
☐ Ski
☐ 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/Serial	Manufacturer's Serial Number	Date of Mfg. mm/dd/yyyy	Rated Power ☒ Horsepower or ☐ lbs of Thrust	Total Time (hours)	Time Since: Inspection (hours)	Overhaul (hours)
Eng. 1	Austro 577.2	AE330	E4P.C.00143	10/19/17	180	631.4	54.2	N/A
Eng. 2	Austro 577.2	AE330	E4P.C.00142	10/18/17	180	631.4	54.2	N/A
Eng. 3								
Eng. 4								

Last Inspection Type

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

Date Last Inspection: 6/24/2022

mm/dd/yyyy

Airframe Total Time: 577.2 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: _____

Propeller 1

- ☐ Fixed Pitch
☒ Controllable Pitch
☐ Ground Adjustable

Manufacturer: MT-Propeller Entwicklung GmbH

Model: MTV-6-R-C-F/CF194-80

Propeller 2

- ☐ Fixed Pitch
☒ Controllable Pitch
☐ Ground Adjustable

Manufacturer: same

Model: same

ELT Installed: ☒ Yes ☐ No

If Yes:

ELT Manufacturer: Kannad

Model or Part No.: 51840501-01

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: N/A

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: <u>CCC Cornerstone Capital Consulting, LLC</u> Fractional Ownership Aircraft: ☐ Yes ☒ No		City: <u>Dallas</u> State: <u>Texas</u> ZIP: <u>75220</u> Country: <u>USA</u>	
Operator of Aircraft ☒ Same As Registered Owner Name: _____ Doing Business As: _____ Air Carrier/Operator Designator (4 Character Code): _____		☒ Same Address as Registered Owner City: _____ State: _____ ZIP: _____ Country: _____	
Operating Certificates Held <i>(Check all that apply)</i> ☒ 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 <i>(Select one)</i> ☐ Armed Forces ☐ Federal ☐ State ☐ Local ☐ Unknown		Revenue Operation for FAR 121, 125, 129, 135 <i>(Select one for each group)</i> ☐ Scheduled or Commuter ☐ Domestic ☐ Non-Scheduled or Air Taxi ☐ International ☐ Passenger ☐ Cargo ☐ Mail Contract Only
Revenue Sightseeing Flight ☐ Yes ☒ No		Air Medical Flight ☐ Yes ☒ No	
Purpose of Flight for FAR 91, 103, 133, 137 <i>(Select one)</i> ☐ 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			
AIRPORT INFORMATION <i>(Fill in if accident/incident occurred on approach, landing, takeoff, departure, or within 3 miles of an airport)</i>			
Airport Name: <u>Dallas Executive</u> Airport Identifier: <u>KRBD</u> Proximity to Airport: ☒ Off Airport/Airstrip ☐ On Airport/Airstrip ☐ N/A		Distance From Airport Center: <u>3</u> sm Direction From Airport: <u>301</u> degrees true Airport Elevation: <u>661</u> ft. msl	
Runway Information Runway ID: <u>13</u> (L/R/C) Length: <u>7,136</u> ft Width: <u>100</u> ft		Condition of Runway/Landing Surface <i>(Check all that apply)</i> ☒ 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	
Runway/Landing Surface <i>(Check all that apply)</i> ☐ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water ☒ Concrete ☐ Gravel ☐ Metal/Wood ☐ Dirt ☐ Ice ☐ Snow ☐ Unknown			
Approach/Departure Segment <i>(Select one)</i> ☐ 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 <i>(Check all that apply)</i> ☐ None ☐ ADF/NDB ☐ PAR ☐ MLS ☐ Practice ☐ SDF ☐ Sidestep ☐ LDA ☐ GPS ☐ VOR/TVOR ☐ ILS ☐ ASR ☐ Visual ☐ VOR/DME ☐ Localizer Only ☐ Visual ☐ Contact ☐ TACAN ☐ LOC-back course ☐ Circling ☐ RNAV ☐ Unknown		VFR Approach <i>(Check all that apply)</i> ☐ 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: David
 City of Residence: Dallas
 Middle Initial: G
 State: Texas
 ZIP: 75220
 Last Name: Clay
 Country: USA
 Age at time of Accident/Incident: 60
 Date of Birth: mm/dd/yyyy
 Certificate Number:

Degree of Injury ☒ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious	Seat Occupied ☒ Left ☐ Front ☐ Unknown ☐ Right ☐ Rear ☐ Center ☐ Single	Restraint Type Available ☐ None ☐ Lap only ☒ 3-point ☐ 4-point ☐ 5-point ☐ Unknown Used ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	Inflatable Restraints ☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown
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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 <u>5/20/21</u> mm/dd/yyyy
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Medical Certificate Limitations

Must wear corrective lenses

Medical Certificate Special Issuance

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: <u>06/06/2022</u> mm/dd/yyyy	Flight Review Aircraft Make: <u>Cessna</u> Model: <u>C172</u>
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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
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Type Ratings	Student Endorsements (Include dates)
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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	905.5	332.9	531.1	374.4	41.5	56.4	48.1			
Pilot in Command (PIC)	818.9	332.9	483.1	335.8	39	56.4	45.0			
Time as Instructor										
This Make/Model					24.5	12	11			
Last 90 Days	46.1	46.1		46.1	4.7					
Last 30 Days	26.7	26.7		26.7	4.7					
Last 24 Hours	3.4	3.4		3.4						

"FLIGHT CREWMEMBER 2" INFORMATION											
"Flight Crewmember 2" Responsibilities at the Time of Accident/Incident ☐ Pilot ☐ Co-Pilot ☐ Student Pilot ☐ Flight Instructor ☐ Check Pilot ☐ Flight Engineer ☐ Other Flight Crew											
"Flight Crewmember 2" was pilot flying ☐ Yes ☐ No											
"Flight Crewmember 2" Identification First Name: _____ City of Residence: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____ Age at time of Accident/Incident: _____ Date of Birth: _____ mm/dd/yyyy Certificate Number: _____											
Degree of Injury ☐ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious		Seat Occupied ☐ Left ☐ Front ☐ Unknown ☐ Right ☐ Rear ☐ Center ☐ Single		Restraint Type <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> Available ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown </td> <td style="width: 50%; vertical-align: top;"> Used ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown </td> </tr> </table>			Available ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	Used ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	Inflatable Restraints ☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown		
Available ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	Used ☐ None ☐ Lap only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown										
Pilot Certificate(s) (Check all that apply) ☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military ☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign ☐ Student ☐ Sport ☐ Flight Engineer				Medical Certificate Validity ☐ Without limitations/waivers ☐ Unknown ☐ With limitations/waivers ☐ N/A ☐ Special Issuance			Date of Last Medical _____ mm/dd/yyyy				
Principal Occupation ☐ Pilot ☐ Other ☐ Unknown		Medical Certificate ☐ None ☐ Class 3 ☐ Class 1 ☐ Driver's License (Sport Pilot only) ☐ Class 2 ☐ Unknown		Medical Certificate Limitations 			Medical Certificate Special Issuance 				
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: _____ mm/dd/yyyy				Flight Review Aircraft Make: _____ Model: _____			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 				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 ☐ Actual ☐ Simulated		Rotorcraft	Glider	Lighter Than Air
Total Time											
Pilot in Command (PIC)											
Time as Instructor											
This Make/Model											
Last 90 Days											
Last 30 Days											
Last 24 Hours											

ADDITIONAL FLIGHT CREWMEMBERS (Exclusive of cabin crew, complete the following information)

Crew Name and Address		Seat Occupied	Injury
First Name: _____	City of Residence: _____	☐ Left ☐ Front	☐ None
Middle Initial: _____	State: _____ ZIP: _____	☐ Center ☐ Rear	☐ Minor
Last Name: _____	Country: _____	☐ Right ☐ Single	☐ Serious
		☐ Unknown	☐ Fatal
			☐ Unknown
Pilot Certificate(s) (Check all that apply)		Restraint Type:	Inflatable Restraints
☐ None	☐ Flight Instructor	Available	Used
☐ Private	☐ Recreational	☐ None	☐ None
☐ Student	☐ Sport	☐ Lap Only	☐ Lap Only
☐ Commercial	☐ Airline Transport	☐ 3-point	☐ 3-point
☐ US Military	☐ Foreign	☐ 4-point	☐ 4-point
	☐ Flight Engineer	☐ 5-point	☐ 5-point
		☐ Unknown	☐ Unknown
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs	

Crew Name and Address		Seat Occupied	Injury
First Name: _____	City of Residence: _____	☐ Left ☐ Front	☐ None
Middle Initial: _____	State: _____ ZIP: _____	☐ Center ☐ Rear	☐ Minor
Last Name: _____	Country: _____	☐ Right ☐ Single	☐ Serious
		☐ Unknown	☐ Fatal
			☐ Unknown
Pilot Certificate(s) (Check all that apply)		Restraint Type:	Inflatable Restraints
☐ None	☐ Flight Instructor	Available	Used
☐ Private	☐ Recreational	☐ None	☐ None
☐ Student	☐ Sport	☐ Lap Only	☐ Lap Only
☐ Commercial	☐ Airline Transport	☐ 3-point	☐ 3-point
☐ US Military	☐ Foreign	☐ 4-point	☐ 4-point
	☐ Flight Engineer	☐ 5-point	☐ 5-point
		☐ Unknown	☐ Unknown
Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs	

PASSENGER(S) / OTHER PERSONNEL (Include cabin crew; continue on separate sheet if necessary)

Name and Address	Seat	Injury	Restraint Type	Inflatable Restraints	Age
First Name: <u>Kimberly</u> City: <u>Dallas</u>	☐ Left ☒ None	☒ None	Available	Used	56
Middle Initial: <u>W</u> State: <u>TX</u> ZIP: <u>75220</u>	☐ Center ☐ Minor	☐ Minor	☐ Lap Only	☐ Lap Only	
Last Name: <u>Clay</u> Country: <u>USA</u>	☐ Right ☐ Serious	☐ Serious	☒ 3-point	☐ 3-point	
☐ Crew ☒ Passenger ☐ Other	☐ Unknown ☐ Fatal	☐ Fatal	☐ 4-point	☐ 4-point	
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	
			☐ Unknown	☐ Unknown	
First Name: _____ City: _____	☐ Left ☐ None	☐ None	Available	Used	
Middle Initial: _____ State: _____ ZIP: _____	☐ Center ☐ Minor	☐ Minor	☐ Lap Only	☐ Lap Only	
Last Name: _____ Country: _____	☐ Right ☐ Serious	☐ Serious	☐ 3-point	☐ 3-point	
☐ Crew ☐ Passenger ☐ Other	☐ Unknown ☐ Fatal	☐ Fatal	☐ 4-point	☐ 4-point	
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	
			☐ Unknown	☐ Unknown	
First Name: _____ City: _____	☐ Left ☐ None	☐ None	Available	Used	
Middle Initial: _____ State: _____ ZIP: _____	☐ Center ☐ Minor	☐ Minor	☐ Lap Only	☐ Lap Only	
Last Name: _____ Country: _____	☐ Right ☐ Serious	☐ Serious	☐ 3-point	☐ 3-point	
☐ Crew ☐ Passenger ☐ Other	☐ Unknown ☐ Fatal	☐ Fatal	☐ 4-point	☐ 4-point	
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	
			☐ Unknown	☐ Unknown	
First Name: _____ City: _____	☐ Left ☐ None	☐ None	Available	Used	
Middle Initial: _____ State: _____ ZIP: _____	☐ Center ☐ Minor	☐ Minor	☐ Lap Only	☐ Lap Only	
Last Name: _____ Country: _____	☐ Right ☐ Serious	☐ Serious	☐ 3-point	☐ 3-point	
☐ Crew ☐ Passenger ☐ Other	☐ Unknown ☐ Fatal	☐ Fatal	☐ 4-point	☐ 4-point	
	Row: _____	☐ Unknown	☐ 5-point	☐ 5-point	
			☐ Unknown	☐ Unknown	

FLIGHT ITINERARY INFORMATION				
Last Departure Point Airport ID: <u>KSNK</u> City: <u>Snyder</u> State: <u>Texas</u> Country: <u>USA</u>		Time of Departure Time: <u>1:35</u> Time Zone: <u>cst</u>		Destination Airport ID: <u>KRBD</u> City: <u>Dallas</u> State: <u>Texas</u> Country: <u>USA</u>
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 -below ☐ Demo Area ☐ Airport Advisory Area ☐ Air Traffic Control Area ☐ Class C ☐ Warning Area ☐ Jet Training Area ☐ Unknown ☐ Class D ☐ Prohibited Area ☐ TRSA ☐ Altitude of In-Flight Occurrence: <u>2,000</u> ft msl ☒ Class E ☐ Restricted Area ☐ FAR 93				
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 ATIS ☐ None ☐ Commercial Weather Service (DUATS) ☐ Unknown ☐ On-Board Weather Weather Observation Facility Facility ID: <u>KRBD</u> Observation Time: <u>about 1:55</u> Time Zone: <u>cst</u> Distance from Accident Site: <u>2.6</u> nm Direction from Accident Site: <u>301</u> degrees true			Basic Conditions ☒ VMC ☐ IMC ☐ Unknown	
Light Condition ☐ Dawn ☐ Dusk ☐ Dark Night ☐ Unknown ☒ Day ☐ Night ☐ Bright Night			Temperature: <u>32</u> (C) or _____ (F) Dew Point: <u>19</u> (C) or _____ (F) Altimeter Setting: <u>29.95</u> in. Hg or _____ MB	
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	
Wind Direction ☐ Variable -or- Direction: <u>190</u> degrees true		Wind Speed ☐ Calm ☐ Light and Variable -or- Speed: <u>6</u> kts		Wind Gusts ☐ Not Gusting -or- Speed: <u>17</u> kts
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 ☒ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe ☐ Unknown Type ☒ N/A ☐ Rime ☐ Clear ☐ Mixed ☐ Unknown		Icing Actual Amount ☐ None ☐ Trace ☐ Light ☐ Moderate ☐ Severe ☐ Unknown Type ☒ N/A ☐ Rime ☐ Clear ☐ Mixed ☐ Unknown		Turbulence Type (Check all that apply) ☒ None Severity ☐ Clear Air ☐ Light ☐ Terrain-Induced ☐ Moderate ☐ Convective Turbulence ☐ Severe ☐ Extreme
NOTAMs (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident: <u>None effecting this incident</u>				

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)*

Full extent unknown at this time. Went through a power line just prior to touchdown on Keist Blvd. which did extensive damage on both wings and fuselage. It also electrified the aircraft with multiple exit points. Also damaged nose gear. Hit two road signs which significantly damaged right wing.

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.

see attached

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

Operator/Owner Safety Recommendation

See attached

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.)

Electrical

Total Time/Cycles
On Part

_____ Hours

_____ Cycles

Time Since This Part
Inspected/Overhauled

_____ Hours

FUEL & SERVICES INFORMATIONFuel on Board at Last Takeoff
(Convert from pounds, as necessary)

66 _____ Gallons

Fuel Type

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

Other Services, if Any, Prior to Departure

Parked overnight

+ fuel

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

We exited immediately after stopping. Each on our respective side of the 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

Name: _____

City: _____

State: _____ ZIP: _____

Country: _____

Pilot of Other Aircraft

Name: _____

City: _____

State: _____ ZIP: _____

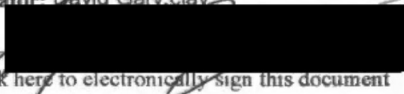
Country: _____

ADDITIONAL INFORMATION (Please type or print in ink)

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

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

Date of this Report

10/24/2022
mm/dd/yyyyName of Pilot/Operator: David Gary claySignature: 

-- 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.
CEN23LA014Reviewed by NTSB Regional Office
CentralName of Investigator
FolkertsDate Report Received
10/26/2022

Narrative History of Flight:

We departed Snyder Texas (KSNK) at approximately 1:35pm CST. I did the normal run-up prior to departure. I picked up Flight Following from Abilene Approach. Nothing out of the ordinary prior to the incident.

Just as I was passing the East boundary of Grand Prairie (KGPM) Class D (I was above it) Approach Cleared me to - Descend at Pilot's discretion and Contact tower.

I switched to tower (frequency was already in the backup on the top radio). With my left hand, keyed the mike while dropping the gear w/ my right hand. Moved my right hand back to the throttles. Stated to tower I was 5 miles west, inbound full stop, request runway 13. Tower replied "84 Lima Tango" "POP". The final word I heard was Tango, then the Pop. Screens were blank simultaneously with the loud POP/Bang. I was unaware at this second that the engines were also out, as I had just dropped the landing gear, which normally results in a fairly rapid deceleration. I declared "Mayday, Mayday, Mayday" which I know did not go out, as I could not hear it in my headset. I checked breakers and switches, all were normal. I momentarily wondered if I was cleared to land or not, not overly concerned prior to realizing the engines were out, as my only issue was how to safely approach the field not knowing if I was cleared to land.

A few seconds after the POP, I realize I also lost both engines. I verify with throttles. Nothing, I realize I only have stick and rudder (everything else is electronic). I am now very concerned if I can make the field. It is very apparent with my sink rate that I cannot make it. I check for landing areas between my position and the runway threshold. Nothing much but residential neighborhood. I see Keist (the ultimate landing road), but mentally struggle with abandoning the airport. Because I see Industrial to the South of Keist and only residential towards the airport, I determine that Keist is the third best choice. (Airport was my primary choice, but I knew it was not possible and much more likely to kill someone on the ground). For the next 20 seconds or so, I desperately look for an alternative to Keist, as it was crowded with traffic and had power lines. At about 600 to 700 feet AGL, I turn to my wife and tell her "we are about to die". I tell her to "call someone", meaning 911. At this moment, I see a large gap in the Eastbound lane of Keist.

I make a turn to Keist and line up. I intentionally lined up slightly to the right of center of the three Eastbound lanes, as I was not sure if my Left wing would encounter an oncoming car from the opposite direction.

I did not see the power line that I flew through until it was about 10 feet in front of the aircraft. By the time my brain processed the power line, we hit it. We then made a smooth landing. Immediately after touchdown, I encountered two road signs which did significant damage to my right hand wing.

As I stopped the aircraft, we opened the doors. Kim jumped out first. She told me to "get out". I switched the master off and quickly left the aircraft.

Police arrived fairly quickly.

Safety Recommendation:

There is nothing in the POH addressing the electrical/dual engine failure I experienced or how a pilot can determine if the backup batteries are functional and online. There is also no indication to the pilot during preflight or in flight that the backup batteries have failed or are not functioning properly. These items should be addressed immediately by Diamond and affected aircraft grounded until they can be operated safely.

There should be an Emergency Procedure to immediately cycle the Electric Master in the event the panel and engines are lost, such as was the case in this incident and in the DA42 incident in Germany. If recycling the Electric Master brings the electricity back online, then the procedure should continue with engine restart steps. This should be a memorized emergency checklist item, as in both cases the electrical and dual engine failures occurred during gear operation. By definition, you will be very close to the ground with very limited time while cycling the gear.

Diamond should immediately work on a permanent fix in which the ECU test does some functional equivalent of testing the ECU batteries prior to every flight. Diamond pilots are currently doing the functional equivalent of taking off without checking the magnetos on a conventional engine. This is obviously an extremely dangerous and unsafe situation for all pilots, passengers, and innocent people on the ground. This would affect not only the DA62, but also the DA42 and DA40 (basically all Diamond aircraft with ECU's). It is important to point out that even if my ECU batteries were correctly wired, there is one inline fuse on each ECU battery unit. These fuses could blow for many reasons, and the pilot has no way of knowing. This is an unbelievable design flaw. I am sure as of today, there are more than one Diamond aircraft flying around with either incorrectly wired ECU batteries or blown fuses. The pilots have no way of knowing that they are themselves in danger, but more importantly, they are putting other people in danger.

As an interim checklist item while a more permanent fix is instituted, pilots should be instructed to cycle the Electric Master on and off, after engine start, to ensure the ECU back up batteries are functioning properly. This task should probably fall immediately prior to turning the Avionics Master on in the "Check After Engine Start" checklist. The pilot should verify for some number of seconds that the engines run without interruption without the main battery being online. This would simulate the failure that I encountered and what happened in Germany.

Until the above procedural changes are made, I believe it is imperative to ground the entire Diamond ECU equipped fleet. The design flaws that lead to my incident are bound to happen again to other unsuspecting pilots until these issues are addressed.