

AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE

U S DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

FROM (Office of origin):

TO:

DATE (UTC):

TIME (UTC):

KSTJ

ROC

20221120

2116

CODE

(First words of text) AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE-Part 1

A

1. INFORMATION FROM:

KSTJ

B

1. REGISTRATION NO:

N267PC

2. MAKE AND MODEL:

PIPER CHEROKEE 140

3. OPERATOR OF AIRCRAFT:

DAVID ARNOLD

4. TYPE OF ACTIVITY (Air taxi, instruction, pleasure, aerial appl., business, executive, sightseeing, etc.) IF KNOWN:

Unknown

5. BRIEF DESCRIPTION OF CIRCUMSTANCES SURROUNDING OCCURRENCE:

Around 1730Z N267PC was issued taxi instructions to RWY17 for a VFR departure. After completing his runup he was instructed to contact tower. After an FR Arrival at 1743Z, Local tried to initiate communication with N267PC but there was no reply. After several attempts from LC and GC to establish communication it was observed that the aircraft had turned around and was facing east. With the repositioning it was assumed the aircraft was looking for a light gun signal and a green light was issued. When the aircraft didn't move there were several more attempts to establish radio communication all met without response. Soon after the aircraft began to taxi, assumed by the tower to be returning to the GA Ramp. However, N267PC continued to accelerate, leaving the movement area into the grass and impacting the perimeter fence east-northeast of the hammerhead.

6. WEATHER DATA:

1753Z 21018G25 10SM CLR 07/M08 A3030

7. AIRCRAFT DAMAGE: A ☐ DESTROYED B ☒ SUBSTANTIAL C ☐ MINOR D ☐ FIRE E ☐ NONE

C

OCCUPANTS – INDICATE INJURIES: FATAL, SERIOUS, MINOR, NONE

1. NAME AND ADDRESS OF PILOT/INJURY:

David Arnold

Injuries Unknown

2. NAMES OF CREW/INJURIES:

N/A

3. NO. OF PASSENGERS/
INJURIES:

Pilot only

D

1. LOCATION OF OCCURRENCE (Nearest city, town, and state) (Give route if overdue or missing)

Rosecrans MAP Saint Joseph, Mo.

E

1. UTC DATE AND UTC TIME OF OCCURRENCE:

20221120 at 1749Z

F

1. INFORMATION ON COVERAGE OF OCCURRENCE BY FAA, NTSB, OTHER:

N/A

G

FAA AIR TRAFFIC SERVICES SUMMARY OF FLIGHT HANDLING

1A. LAST DEPARTURE POINT:

N/A

1B. UTC DATE AND UTC TIME:

20221120 at 1749Z

1C. INTENDED DESTINATION:

Unknown

2. LAST RADIO CONTACT/POSITION AND/OR RADAR POSITION:

1740Z (Approx.) RWY 17 Hold Line Taxiway Alpha

3. LAST ATC CONTROL CLEARANCE:

Taxi instructions for RWY 17

4. FLIGHT PLAN:

A ☐ IFR B ☐ VFR C ☒ NONE D ☐ UNKNOWN

5. PILOT BRIEFING:

A ☐ YES B ☐ NO C ☒ UNKNOWN

6. OTHER:

RECEIVED AT:

DELIVERED TO:

TIME:

RECEIVED VIA:

A ☐ IN PERSON B ☐ RADIO C ☐ TELEPHONE

RECEIVED BY (Signature and Title)

NOTE: Part 2

A ☐ ON OTHER SIDE B ☐ ON SEPARATE FORM C ☐ NOT REQUIRED

AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE

FROM (<i>Office of origin</i>):	TO:	DATE (<i>UTC</i>):	TIME (<i>UTC</i>):
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CODE (First words of text) **AIRCRAFT ACCIDENT/INCIDENT PRELIMINARY NOTICE-Part 2**

H	1. REGISTRATION NO:	2. MAKE AND MODEL:	3. UTC DATE OF ACCIDENT/INCIDENT:
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I	STATUS OF POTENTIALLY INVOLVED AIRWAY FACILITIES (CHECK [✓] MARK STATUS AS INDICATED BY MONITOR OR REPORTED BY A.F. TECHNICIAN)									
	1 FACILITY TYPE:	2 LOCATION RUNWAY IDENTIFIER:	3 JUST PRIOR TO OCCURRENCE:		4 AT TIME OF OCCURRENCE:		5 FLIGHT INSPECTION:			
			A NORMAL	B ABNORMAL OR OUT OF SERVICE	A NORMAL	B ABNORMAL OR OUT OF SERVICE	CON- DUCTED		SATIS- FACTORY	
							A YES	B NO	C YES	D NO
6. REMARKS (<i>Explain briefly any entry above that is check marked as abnormal, or out of service</i>)										

J	STATUS REPORT RECEIVED FROM PILOTS OR OTHERS				
	List below any facilities reported by pilots or other persons as either operating normally, abnormally, or out of service just prior to, at the time of, or immediately following the time of the accident.				
	1. FACILITY TYPE:	2. LOCATION/ RUNWAY IDENTIFIER:	3. IDENTIFICATION NO. OF AIRCRAFT AND NAME OF PERSON FROM WHOM REPORT WAS RECEIVED:	4. STATUS REPORT (<i>Normal, abnormal, out of service, etc.</i>):	5. TIME OBSERVATION (<i>UTC</i>):
6. REMARKS (<i>Briefly describe the nature of any reported abnormally, reason for being out of service, etc.</i>):					

RECEIVED AT:	DELIVERED TO:	TIME:
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RECEIVED VIA: A ☐ IN PERSON B ☐ RADIO C ☐ TELEPHONE	RECEIVED BY (<i>Signature and Title</i>)
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NOTE: Part 1 A ☐ ON OTHER SIDE B ☐ ON SEPARATE FORM
