

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: Venice Municipal Airport, Venice State: FL
 ZIP: 34285 Country: Unbited States
 Latitude: N 27 04.3 (dd:mm:ss N/S) Longitude: W082 26.4 (ddd:mm:ss E/W)

Date/Time

Date: 03-16-2012 Local Time: 10:40-10:45
 mm/dd/yyyy Time Zone: Eastern Daylight

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

50 ft MSL

AIRCRAFT INFORMATION

Manufacturer: Flight Design gmbh

Model: CTSW

Serial Number: 06-02-11

Registration Number: N379CT

Amateur-built: ☐ Yes ☒ No

Max Gross Weight: 1,323 lbs

Weight at Time of Accident/Incident: 1,113 lbs

Location of Center of Gravity at Time of Accident/Incident:
 not inches from ☐ nose or ☐ datum
 -or- calculated 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: TWO(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: _____

Last Inspection Type

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

Date Last Inspection: March 16, 2011
 mm/dd/yyyy

Airframe Total Time: 393 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 Tundra "First Alert"

ELT Installed

☒ Yes ☐ No

ELT Activated

☐ Yes ☒ No

ELT Aided in Locating Accident/Incident

☐ Yes ☒ No

ELT Manufacturer: Ameri-king

Model/Series: Model AK 450 (AK450)

Serial Number: (not recorded @ Time of Delivery of A/c)

Battery Type: D alkaline

Battery Exp. Date: Feb 2013

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: Neuform

Model: CR3-65-47-101.6

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	ROTAX	912ULS	5.646.051	FEB 2006	100	474	83	
Eng. 2								
Eng. 3								
Eng. 4								

OWNER/OPERATOR INFORMATION**Registered Aircraft Owner**Name: Manatee Aviation Enterprises, Inc.Fractional Ownership Aircraft: ☒ Yes ☐ No**Owner Address**City: SarasotaState: FL ZIP: 34238Country: U.S.A. 34243**Operator of Aircraft**☒ Same As Registered OwnerName: Manatee Aviation Enterprises, Inc.Doing Business As: same or not applicableAir Carrier/Operator Designator (4 Character Code): none**Operator Address**☒ Same As Registered Owner

City: _____

State: _____ ZIP: 34243

Country: _____

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**D.N. Apply**Manufacturer:****Model:****Damage to Other Aircraft**

- | | |
|--------------------------------------|--------------------------------|
| ☐ Destroyed | ☐ Minor |
| ☐ Substantial | ☐ None |

Registered Owner of Other Aircraft

First Name: _____

Middle Initial: _____

Last Name: _____

City: _____

State: _____ ZIP: _____

Country: _____

Pilot of Other Aircraft

First Name: _____

Middle Initial: _____

Last Name: _____

City: _____

State: _____ ZIP: _____

Country: _____

MECHANICAL MALFUNCTION/FAILURE (If more space is needed, continue on separate sheet)**Was there Mechanical Malfunction/Failure?** ☐ Yes ☐ No ☒ Unknown

(If yes, list the name of the part, manufacturer, part no., serial no., and describe the failure.)

Engine stoppage in flight after rotation and after takeoff..30-50' in air

Total Time/Cycles On Part

_____ Hours

_____ Cycles

Time Since This Part Inspected/Overhauled

_____ 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)

Venice Airport perimeter/ boundary chain link fence was damaged and 80-100' of fence was down on the ground. One vertical iron pole bent badly. N379 suffered major damage and engine was not operating when aircraft passed thru fence. Nose wheel gear unit was smashed beyond repair and flattened against underside of engine compartment. Propeller had two blades of three broken off;; propeller spinner destroyed. Engine displaced to the left side of engine mount approximately 10o or more; right engine mount cushions (rubber) were compressed heavily against the engine mount. Lower engine nacelle cover was broken with a 13-16 inch crack. Windshield remained in the airframe but completely broken. Left main gear was damaged.

Left wing: Leading edge crushed and broken in two places; left wing had (fence) iron pipe cut gash 8" deep in leading edge in to the spar; wing root left wing is broken/ crushed leading edge and Avgas was spilling from tank and wing leading edge. Rear of LH wing at point where wing joins fuselage broken and displaced.

Right wing: Leading edge is crushed and fiberglass broken in two places. Fiberglass is torn and shredded.

Left side underneath fuselage fiberglass has a 6-7" circular hole beneath the Pilot's seat. Left door is broken and the frame is broken along the door seal

AIRPORT INFORMATION (If the accident/incident occurred on approach, takeoff or within 3 miles of an airport, complete this section)**Airport Identifier:** KVNC**Distance From Airport Center:** 1 SM**Airport Name:** Venice Municipal Airport, Venice**Direction From Airport:** 040-050 degrees MAG**Proximity to Airport** ☐ Off Airport/Airstrip ☒ On Airport ☐ On Airstrip**Airport Elevation:** 12 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 InformationRunway ID: 04 (L/R/C) Length: 5,000 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: KVNCCity: VeniceState: FloridaCountry: U.S.A.**Time of Departure**Time: 10:40-10:45Time Zone: EDT**Destination**Airport ID: KPGDCity: Punta GordaState: FloridaCountry: U.S.A.**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 & SERVICES INFORMATION**Fuel on Board at Last Takeoff**

(convert from pounds, as necessary)

20 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

None

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

There was Avgas spilling from the leading edge of the left wing near wing root and over the left door. Pilot called out to right seat passenger Bill Straw that fuel was spilling from the left wing. We both opened our respective (LHS/RHS) door's normally and exited the airplane individually. Neither of us were hurt in the aircraft's movement through the chain link fence.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Weather Observation Facility**Facility ID: AWOSObservation Time: about 10:30Time Zone: EDTDistance from Accident Site: 1 NMDirection from Accident Site: 220 approx. 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 |

Visibility 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 Height ft AGL**Ceiling Height** ft AGL**Wind Direction**☐ Indicated:
120 degrees MAG☐ Variable**Wind Speed**Velocity: 8 KTS

-or-

- | |
|---|
| ☐ Calm |
| ☐ Light and Variable |

Wind GustsVelocity: 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

None noted by Flight Plan.com

Noting for PGD obtained by Kptm PLTPLAN.com - nothing significant.

Temperature: (C)
or 73unk (F)Altimeter Setting: 30.34 in. HG
or MBDensity Altitude: not remeasured ftDew Point: (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 "A" INFORMATION**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: Peter
Middle Initial: R.
Last Name: Makowski

City: Sarasota
State: FL ZIP: 34238
Country: U.S. A.

Age at time of Accident/Incident: 74 Date of Birth: 1938 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

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

05/04/2010
mm/dd/yyyy

Medical Certificate Limitations

Must have available eyeglasses for near vision (on the airplane). Medical Certificate expires 05/31/2012

Medical Certificate Waivers

N/A

**Date of Last Flight Review
or Equivalent, Including
FAR 121/135 Checks:**

5-25-2011
mm/dd/yyyy

Flight Review Aircraft

Make: Flight Design (actually was N379CT)
Model: CTSW

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 ☐ Instrument Airplane
☐ Airplane Single-Engine ☐ Instrument Helicopter
☐ Airplane Multi-Engine ☐ Helicopter
☐ Gyroplane ☐ Glider
☐ Powered Lift ☐ 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		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time	3,621	45	1,441	2,180	700	700	200			
Pilot in Command (PIC)	3,200	45	1	1,100	15	112	16			
Time as Instructor										
This Make/Model										
Last 90 Days		18								
Last 30 Days		8								
Last 24 Hours										

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

☒ Passenger

Pilot "B" Identification

First Name: William

City: Osprey

Middle Initial: E

State: FL

ZIP: 34229

Last Name: Straw

Country: USA

Age at time of Accident/Incident: 66

Date of Birth: 1945

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

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

06/30/2011

mm/dd/yyyy

Medical Certificate Limitations

Corrective lenses

Medical Certificate Waivers

None

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:

08/18/2011

mm/dd/yyyy

Flight Review Aircraft

Make: Piper

Model: Meridian

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
 ☒ Instrument Airplane
☒ Airplane Single-Engine
 ☐ Instrument Helicopter
☒ Airplane Multi-Engine
 ☐ Helicopter
☐ Gyroplane
 ☐ Glider
☐ Powered Lift
 ☐ Sport

Type Ratings

C-130 / L382

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	5,500	8	1,100	4,400	1,000	900	1,100	0	0	0
Pilot in Command (PIC)	4,600	0	1,090	3,510	990	890	800	0	0	0
Time as Instructor	1,700	0	600	1,100	100	300	1,000	0	0	0
This Make/Model					0	0	0			
Last 90 Days	85	2	10	75	12	15	0	0	0	0
Last 30 Days	8	2	6	0	2	2	0	0	0	0
Last 24 Hours	0	0	0	0	0	0	0	0	0	0

ADDITIONAL FLIGHT CREW MEMBERS (Exclusive of cabin attendants, complete the following information)**Pilot Name and Address**

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

Degree of Injury

☐ None ☐ Fatal
☐ Minor ☐ Unknown
☐ Serious

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military

Seat Occupied

☐ Left ☐ Front
☐ Right ☐ Rear
☐ Center ☐ Single
☐ Unknown

Type Rating/Endorsement for Accident/Incident Aircraft?

☐ Yes ☐ No

Total Flight Time at the Time of this Accident/Incident: _____ hrs**Pilot Name and Address**

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

Degree of Injury

☐ None ☐ Fatal
☐ Minor ☐ Unknown
☐ Serious

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military

Seat Occupied

☐ Left ☐ Front
☐ Right ☐ Rear
☐ Center ☐ Single
☐ Unknown

Type Rating/Endorsement for Accident/Incident Aircraft?

☐ Yes ☐ No

Total Flight Time at the Time of this Accident/Incident: _____ hrs**Pilot Name and Address**

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

Degree of Injury

☐ None ☐ Fatal
☐ Minor ☐ Unknown
☐ Serious

Pilot Certificate(s) (Check all that apply)

☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military

Seat Occupied

☐ Left ☐ Front
☐ Right ☐ Rear
☐ Center ☐ Single
☐ 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 flight attendants; continue on separate sheet if necessary)**Name and Address**

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

Seat**Crew****Non-****Revenue****Revenue****Non-****Occupant****FAA****Fatal****Serious****Minor****Injury****No Injury****Unknown**

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

First Name: _____ City: _____
Middle Initial: _____ State: _____ ZIP: _____
Last Name: _____ Country: _____

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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.

1. Terrain: KVNC is flat and 16-20' above sea level. One runway is older and concrete (4-22); 13-31 has been rebuilt per FAA program and is macadam. Far eastern side of RWY 4-22 has a boundary fence at edge of the airport perimeter. A recreational road owned by Town of Venice for bicycles, pedestrians and cars lies outside of the perimeter fence. Just abutting the dirt road, the "berm" to the US. Route 42 road and drawbridge rises to road level and the drawbridge entrances. Light poles exist 16' above the elevated road surface and sidewalk stick up in the air on both sides of the road. These items are generally in the line of path of RWY 4-22 center line. The grass runway over-run area ends 700' to 800' past the eastern end of RWY 04 and towards the drawbridge.

A complete narrative of the accident event and sequences has been sent by email to US-FAA FSDO, Tampa, Florida. A copy of that statement by Peter Makowski is appended to this NTSB report.

Pls. see PAGE 10-A

PR Makowski

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

Operator/Owner Safety Recommendation

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.

The following statement is an email sent to US-FAA FSDO, Tampa Florida on Sunday, March 18, 2012 in regards to the accident:

TO: FAA FSDO Tampa FL

I am a co-owner of N379CT which is based at Sarasota Bradenton International Airport (SRQ) in Sarasota, Florida. I was the pilot of N379CT on Friday, March 16, 2012 at approximately 10:45 a.m. EDT when, on takeoff from Runway 04 at Venice Municipal Airport, the engine experienced an engine stoppage at the time of liftoff after the takeoff roll. William Straw, a pilot and a resident of Osprey FL, occupied the right passenger's seat.

I had departed Sarasota Bradenton Airport at about 9:40 a.m. Friday for Venice Municipal Airport to pick up William Straw. My intended flight was to Punta Gorda Airport, Punta Gorda, FL where we could have lunch and observe the WAAS vertical guidance feature of the installed Garmin 396 GPS unit. No previous airplane I owned had WAAS capability. I wanted to see how it was presented in the event I ever needed to utilize it as an emergency backup source of guidance, even though the plane is not technically qualified for instrument approaches.

The 20 minute VFR flight from SRQ to VNC was uneventful and no operating difficulties were noted with the airplane. I purchased about 20 gallons of 100LL aviation fuel from APP Services (FBO) at SRQ about 9:00 a.m. before departure.

Upon arriving at Venice Airport, I taxied to the FBO parking, shut down the airplane and went to meet William Straw. We boarded the airplane, started and taxied to Runway 04. When holding at the departure end, we held for a departing airplane, did a run-up and check list, and departed at about 10:40-45. I announced departure for 379CT on Runway 04 and commenced takeoff roll within seconds of that call. Flaps were set at zero degrees position and never were changed.

Commencement of the takeoff roll was normal. I scanned the engine monitor (DYNON EMS-D120), saw temps and pressures normal and observed 5500+ rpm and continued the takeoff. We crossed the intersection of Runways 04-22 and Runway 13-31 and had lifted off the runway. Seconds later or just after liftoff, the warning light "Control" flashed and then turned off. At that instant both DYNON panels flashed "Warning- Low Fuel pressure" and we felt the loss of power. The engine stopped almost instantly. I pushed over and went straight ahead to the runway but touched down on the runway grass overrun very slightly to right of runway center line. The airplane had flying speed from engine failure to touchdown on the grass. The airplane landed on the main wheels, bounced once slightly, and continued straight ahead. The airplane did not swerve. William Straw and I estimate the time from engine failure in the air to impact with fence to be about ten to twelve (10-12) seconds.

I attempted to steer with the nose wheel steering so as to prevent hitting the perimeter fence. I could not steer the airplane to keep away from the fence (steel cyclone design). Airplane did not respond to my jamming the rudder pedal as much as I could force it. I had pulled the hand brake (affects main wheels) and the airplane seemed to be skidding on top of the grass. We hit the perimeter fence approximately 20-25 degrees to the right of the runway center line, impacting the fence straight ahead from its path on the ground. The airplane did not turn until it went through the fence and stopped. I think we impacted the fence at 15-20 kts. forward speed, if that. After the crash, Wm. Straw and I observed a tire track in the grass extending far back westward from the fence in a straight line in the direction of our path to the fence impact site.

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

Operator/Owner Safety Recommendation

1. FD-CTSW/CTLS Airplanes should have an auxiliary fuel boost pump circuit installed in parallel with present ROTAX engine driven fuel pump and fuel delivery system to the fuel carburetor.
2. A FAA Airworthiness Directive would mandate changing fuel pump (ROTAX part number) in the older FD-CTSW and FD-CTLS airplanes.
3. NTSB and USA-FAA can put pressure on Flight Design GmbH to re-design fuel system to have an auxiliary fuel booster pump circuit in parallel with the engine driven system.

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.

Pete Makowski flew down to Venice (KVNC) to pick me up for a recreational flight to Charlotte County Airport (KPGD) for lunch and to see how the Garmin 396 reported WAAS information on its screen if one was in an ILS environment. Startup at about 1045 was normal, taxi was normal and run-up was normal and after waiting for a couple of planes to land and depart ahead of us, we began a takeoff roll on Runway 04. Winds were approximately down the runway at about 10 knots.

The takeoff roll was normal and instruments showed full engine power available through the lift off. About 20 feet in the air as we passed the Runway 13-31 intersection, a light flickered and then came back on. The steady light along with a banner on the bottom of the Dynon screen, indicated low fuel pressure. About one or two seconds after the light came on, the engine quit. By then we were about 60 - 75 feet in the air. Pete immediately announced he was putting the plane back on the ground straight ahead and tried to make the runway, but our take off acceleration and downward trajectory put us just past the end of the runway on the grass as we landed. There was a minor bounce and then full contact with the ground for the rest of the roll out. The limited space and lack of effective braking on the very dry grass put us into the chain link fence at the edge of the airport clear area. The impact with the fence was firm, but not violent and the plane twisted to the right and stopped about 20 feet past the initial impact.

Pete and I both checked to see if the other was 'okay', and then exited immediately. Pete stopped to pull the electrical circuit breakers and be certain the fuel was cut off as we left the plane. We then noticed that the left wing fuel tank had a leak and was streaming a small but steady stream of fuel. We stayed back from the plane and waited for assistance. A police cruiser arrived about 5 minutes after the incident and fire and other support arrived about four or five minutes after that.

STATEMENT BY William E. Straw (AAK)

3-23-2012

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

Operator/Owner Safety Recommendation

I am not the owner, nor was I flying as a pilot on this flight, but one item that did occur to me regarding this incident is that in my flying experience, most aircraft have a manually controlled electric backup or boost fuel pump that is "ON" during take off and landing modes of operation. I would highly recommend that that be a recommended if not required addition to this aircraft type's mandatory equipment list. Even with gravity feed and a reasonable hydraulic head pressure, it appears to me that an engine driven pump is a weak link in the very critical path of fuel to cylinder.

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

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

This incident was extremely well handled by Mr. Makowski and as a former military pilot (as he is also), I must comment that the training and instinctive decision making we all receive in that training environment were clearly a part of the successful grounding and survival of this situation. There was never a hint of the thought of a turn or return or other move that might have resulted in a stall. There was just the very solid decision that, given the low altitude lack of power and near zero time to react, the best choice was to land straight ahead under control and minimize the speed at which we might hit the fence.

(WILLIAM E. STRAW STAIRMASTER)

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

03/23/2012

*mm/dd/yyyy***Signature and Name of Pilot/Operator**

Signature: _____

Type or Print Name: _____

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

Signature: _____

Type or Print Name: William E. Straw

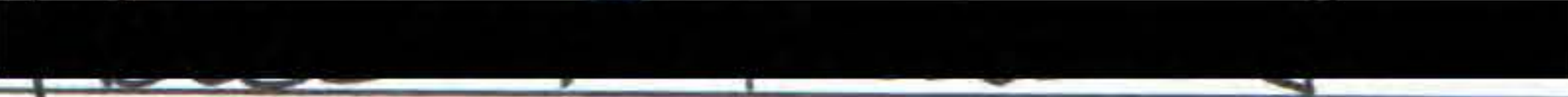
Title: Passenger

FOR NTSB USE ONLY**NTSB Accident/Incident No.****Reviewed by NTSB Regional Office****Name of Investigator****Date Report Received**

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 <u>03-24-2012</u> mm/dd/yyyy	Signature and Name of Pilot/Operator Signature:  Type or Print Name: <u>PETER R. MAKOWSKI</u>
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Signature and Name of Person Filing Report if Other than Pilot/Operator	
Signature: <u>D. Diaz</u>	
Type or Print Name: _____	
Title: _____	

FOR NTSB USE ONLY

NTSB Accident/Incident No. ERA12LA229	Reviewed by NTSB Regional Office Ashburn, Virginia	Name of Investigator D. Diaz	Date Report Received 03/24/2012
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