

NATIONAL TRANSPORTATION SAFETY BOARD
PILOT/OPERATOR AIRCRAFT ACCIDENT/INCIDENT REPORT
This form to be used for reporting civil and public use aircraft accidents and incidents

Accident/Incident Location Nearest City/Place: <u>Lake Winnepesaukee, Gilford</u> State: <u>NH</u> ZIP: _____ Country: <u>USA</u> Latitude: _____ (dd:mm:ss N/S) Longitude: _____ (ddd:mm:ss E/W)				Date/Time Date: <u>04/22/2014</u> Local Time: <u>12:30p.m.</u> mm/dd/yyyy Time Zone: <u>EST</u>																																														
Phase of Operation ☐ Standing ☐ Takeoff (incl. initial climb) ☐ Cruise ☐ Hover ☐ Taxi ☐ Climb ☐ Maneuvering ☐ Other ☐ Descent ☒ Landing ☐ Approach ☐ Unknown				Collision with Other Aircraft ☐ Midair ☐ On-ground ☒ None		Altitude of In-Flight Occurrence _____ ft MSL																																												
Manufacturer: <u>CESSNA</u> Model: <u>T206H (on WIPLINE 3450 AMPHIBIAN FLOATS)</u> Serial Number: <u>T20608198</u> Registration Number: <u>N262ME</u> Amateur-built: ☐ Yes ☒ No				Max Gross Weight: <u>3,792</u> lbs Weight at Time of Accident/Incident: <u>3,626</u> lbs Location of Center of Gravity at Time of Accident/Incident: <u>40.8</u> 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 <i>(Check all that apply)</i> Standard ☒ Normal ☐ Utility ☐ Aerobatic ☐ Transport Special ☐ Restricted ☐ Limited ☐ Provisional ☐ Experimental ☐ Special Flight ☐ Light Sport		Number of Seats: <u>6</u> If Large Aircraft, how many seats for: Flight Crew: <u>2</u> Cabin Crew: _____ Passengers: <u>4</u>		Landing Gear ☒ Retractable Check any additional landing gear configuration that applies: ☐ Tricycle ☐ Tailwheel ☒ Amphibian ☐ High Skid ☐ Emergency Float ☐ Skid ☐ Float ☐ Ski ☐ Hull ☐ Ski/Wheel ☐ Unknown																																												
Type of Maintenance Program ☒ Annual ☐ Conditional (Amateur-built only) ☒ Manufacturer's Inspection Program ☐ Other Approved Inspection Program (AAIP) ☐ Continuous Airworthiness ☐ Other, specify: _____		Last Inspection Type ☐ 100 Hour ☐ Continuous Airworthiness ☐ AAIP ☐ Conditional Inspection ☒ Annual ☐ Unknown		Date Last Inspection: <u>03/06/2014</u> mm/dd/yyyy Airframe Total Time: <u>607</u> hrs hours measured at (check one) ☒ Last Inspection ☐ Time of Accident/Incident																																														
IFR Equipped ☒ Yes ☐ No ☐ Unknown		Stall Warning System Installed ☒ Yes ☐ No ☐ Unknown		Type of Fire Extinguishing System ☐ None ☒ Specify <u>Portable on board</u>																																														
ELT Installed ☒ Yes ☐ No		ELT Activated ☒ Yes ☐ No		ELT Manufacturer: <u>AIRTEX</u> Model/Series: <u>M3-406</u> Serial Number: <u>188-02755</u> Battery Type: _____ Battery Exp. Date: <u>JUNE 2015</u>																																														
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 Manufacturer: <u>HARTZELL</u> ☒ Controllable Pitch Model: <u>HC-F3YR-1RF</u>																																														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Engine</th> <th>Engine Manufacturer</th> <th>Engine Model/Series</th> <th>Manufacturer's Serial Number</th> <th>Date of Mfg. mm/dd/yyyy</th> <th>Engine Rated Power Measured as (check one) ☒ Horsepower or ☐ lbs of Thrust</th> <th>Total Time (hours)</th> <th>Time Since Inspection (hours)</th> <th>Time Since Overhaul (hours)</th> </tr> </thead> <tbody> <tr> <td>Eng. 1</td> <td>LYCOMING</td> <td>TIO-540-AJ1A</td> <td>L-12239-61A</td> <td>10/31/2005</td> <td align="center">310</td> <td align="center">533</td> <td align="center">5</td> <td></td> </tr> <tr> <td>Eng. 2</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Eng. 3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Eng. 4</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		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	LYCOMING	TIO-540-AJ1A	L-12239-61A	10/31/2005	310	533	5		Eng. 2									Eng. 3									Eng. 4												
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Description of Damage to Aircraft and Other Property (use additional sheet if necessary)

For accidents occurring within 25 miles of an airport, complete this section)

Airport Identifier: _____ **Distance From Airport Center:** _____ SM
Airport Name: _____ **Direction From Airport:** _____ degrees MAG
Proximity to Airport ☐ Off Airport/Airstrip ☐ On Airport ☐ On Airstrip **Airport Elevation:** _____ 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: _____ (L/R/C) Length: _____ ft Width: _____ ft

Runway/Landing Surface (Check all that apply)
☐ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood ☐ Unknown
☐ Dirt ☐ Ice ☐ Snow

Condition of Runway/Landing Surface (Check all that apply)
☐ Dry ☐ Snow-Compacted ☐ Water-Calm
☐ Holes ☐ Snow-Crusted ☐ Water-Choppy
☐ Ice Covered ☐ Snow-Dry ☐ Water-Glassy
☐ Rough ☐ Snow-Wet ☐ Wet
☐ Rubber Deposits ☐ Soft ☐ Unknown
☐ Slush Covered ☐ Vegetation

Last Departure Point Airport ID: <u>KFIT</u> City: <u>Fitchburg</u> State: <u>MA</u> Country: <u>USA</u>	Time of Departure Time: <u>12:00 p.m.</u> Time Zone: <u>EST</u>	Destination Airport ID: _____ City: _____ State: _____ Country: _____	Type Flight Plan Filed ☐ None ☐ VFR/IFR ☐ Company VFR ☐ IFR ☐ Military VFR ☐ Unknown ☐ VFR Activated? ☐ Yes ☐ No
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Type of ATC Clearance/Service (Check all that apply)
☐ None ☐ Special VFR ☐ Special IFR ☒ VFR Flight Following ☐ Cruise
☐ VFR ☐ IFR ☐ VFR On Top ☒ Traffic Advisory ☐ Unknown / NA

Airspace where the accident/incident occurred (Check all that apply)
☐ Class A ☒ Class E ☐ Prohibited Area ☐ Jet Training Area ☐ Special
☐ Class B ☐ Class G ☐ Restricted Area ☐ TRSA ☐ Air Traffic Control Area
☐ Class C ☐ Demo Area ☐ Military Operations Area (MOA) ☐ FAR 93 ☐ Unknown
☐ Class D ☐ Warning Area ☐ Airport Advisory Area

Aircraft Load Description (Check all that apply)
☒ None ☐ Towing Glider ☐ Parachutists ☐ Livestock
☐ Passengers ☐ Towing Banner ☐ Water ☐ Unknown
☐ Cargo ☐ Other External ☐ Chemical/Fertilizer/Seeds

Fuel on Board at Last Takeoff (convert from pounds, as necessary) _____ 88 Gallons	Fuel Type ☐ 80/87 ☐ 115/145 ☐ JP3 ☐ Other, specify _____ ☒ 100 Low Lead ☐ Jet A ☐ JP4 ☐ 100/130 ☐ Automotive ☐ JP5
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Other Services, if Any, Prior to Departure

Was an emergency evacuation of the aircraft performed? ☒ Yes ☐ No			
Method of Exit – Describe how the occupants exited and how many occupants evacuated each location Pilot was the solo occupant and exited through co-pilot door			
WEATHER OBSERVATION FACILITY			
Weather Observation Facility Facility ID: <u>KLCI</u> Observation Time: <u>12:25 p.m.</u> Time Zone: <u>EST</u> Distance from Accident Site: <u>5</u> NM Direction from Accident Site: <u>North</u> degrees MAG		Source of Weather Information <i>(Check all that apply)</i> ☐ National Weather Service ☐ Company ☐ Flight Service Station ☐ Military ☒ TV/Radio ☒ Internet ☐ Automated Report ☐ Unknown ☒ Commercial Weather Service (DUATS)	
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	
Sky/Lowest Cloud Condition ☒ Clear ☐ Thin Broken ☐ Few ☐ Thin Overcast ☐ Partial Obscuration ☐ Unknown ☐ Scattered		Ceiling ☐ None (clear) ☐ Obscured ☐ Broken ☐ Indefinite ☐ Overcast ☐ Unknown	
Lowest Cloud Condition Height _____ ft AGL		Ceiling Height _____ ft AGL	
Wind Direction ☐ Indicated: _____ 360 degrees MAG ☐ Variable		Wind Speed Velocity: _____ KTS -or- ☐ Calm ☒ Light and Variable	
Wind Gusts Velocity: _____ KTS ☒ Gusting ☐ Not Gusting		Restriction to Visibility <i>(Check all that apply)</i> ☐ None ☐ Fog ☐ Blowing Dust ☐ Ground Fog ☐ Blowing Sand ☐ Haze ☐ Blowing Snow ☐ Ice Fog ☐ Blowing Spray ☐ Smoke ☐ Dust ☒ Unknown	
Type of Turbulence <i>(Check all that apply)</i> ☒ 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 			
Temperature: _____ (C) or _____ (F) Altimeter Setting: _____ in. HG or _____ MB Density Altitude: _____ ft Dew 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 <i>(Check all that apply)</i> ☒ 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" 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: Vadim
Middle Initial: L
Last Name: Gayshan

City: Sudbury
State: MA ZIP: 01776
Country: _____

Age at time of Accident/Incident: 59 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
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
12/16/2013
mm/dd/yyyy
Medical Certificate Limitations

none

Medical Certificate Waivers

none

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks:
07/24/2012
mm/dd/yyyy
Flight Review Aircraft
Make: Cessna
Model: Cessna 180 float
Airplane Rating(s) (Check all that apply)
☐ None
☒ Single-Engine Land
☒ Single-Engine Sea
☒ Multiengine Land
☐ Multiengine Sea
Other Aircraft Rating(s) (Check all that apply)
☐ None
☐ Airship
☐ Free Balloon
☐ Glider
☐ Gyroplane
☐ Helicopter
☐ Powered Lift
Instrument Rating(s) (Check all that apply)
☐ None
☒ Airplane
☐ Helicopter
☐ Powered Lift
Instructor Rating(s) (Check all that apply)
☐ None
☐ Airplane Single-Engine
☐ Airplane Multi-Engine
☐ Gyroplane
☐ Powered Lift
☐ Instrument Airplane
☐ Instrument Helicopter
☐ Helicopter
☐ Glider
☐ Sport
Type Ratings**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	1,392	50	1,111	235	195	46	109			
Pilot in Command (PIC)	1,194									
Time as Instructor										
This Make/Model										
Last 90 Days	1									
Last 30 Days	1									
Last 24 Hours	1									

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: _____

City: _____

Middle Initial: _____

State: _____ ZIP: _____

Last Name: _____

Country: _____

Age at time of Accident/Incident: _____

Date of Birth: _____

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

mm/dd/yyyy

Medical Certificate Limitations
Medical Certificate Waivers
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
☐ 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

Actual

Simulated

Rotorcraft

Glider

Lighter Than Air

Flight Time (enter appropriate number of hours in each box)	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument Actual	Instrument 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										

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 April 22, 2014 I was planning to restart water operations with my amphibian airplane after taking a break for the winter. I started the day with my regular morning routine. Then I spent about two hours re-reading my seaplane flying manual – the book was giving me by my flight instructor Charlie Wright. I reviewed water landing and takeoffs, step taxing and other water operations. Then I stopped at my office, finished some morning tasks, had a light breakfast, and checked the weather though Foreflight on my iPad before proceeding to the airport. I had planned on flying on April 22nd a few days prior, since weather promised to be very good (VFR with practically no wind).

At the airport I started with the preflight checks of the airplane. Since I hadn't used the airplane since the fall for water operations, I went through a long preflight including checking the floats first. I checked the float conditions. Even with the understanding that the airplane hadn't been on the water in a long time, I checked on water in the floats and made sure the plugs were fully inserted. While checking on the operation of the water rudders, I discovered that the cable wasn't on the pulley and they were not operating properly. I called for my mechanic Jeffery Hill of Autumn Air Services to fix the problem, which he did. I then proceeded on the preflight routine for my airplane. I checked inside the cockpit, released elevator stop, checked yoke motions and corresponding elevator and aileron motions, checked documentation and went outside. I removed pitot cover, drained the fuel, checked fuel level visually and found fuel at full for both tanks. Since I was planning on flying only myself and two light bags with a combined weight of about 10 lbs, I understood that a full fuel condition was within the permitted Weight and Balance. I checked oil level and the rest of the right side of the airframe.

My flight plan included departure from KFIT on VFR flight to KLCI with proceeding to Lake Winnepesaukee for water landings and water operation. On departure I contacted Boston ARTC on 124.4 and got VFR flight following to KLCI. Flight conditions were VFR with light tailwind. I got KLCI weather and set altimeter. Upon reaching KLCI I descended to 2,500' and over flew the airport reporting to CTAF proceeding to the lake. I started observing water surface and setting up for water landing. Water surface was glassy and light wind from North reported. My plan was to prepare for landing, but stay above the water at 300-400' for some time and watch for possible ice, then go around, climb and proceed for full landing. Last time I recall indicated altitude around 1,000' MSL and airspeed 95knt. Flaps were set for 10 degrees for easy over nose observation of the surface. The airplane dropped altitude and I added power to climb.

At that moment the floats touched the water the way they do on normal landing, but a bit harder and didn't bounce. I decided to cut the power and land. The airplane went into a nose down position and the propeller hit water. With nose down position, the engine stopped and water started coming into the cockpit. I understood that I will have to evacuate quickly, so I raised the flaps for an easy exit. My left door wouldn't open (I think that airplane was tilted left at the time), but the right passenger door opened just barely enough for me to get out on the right float before the plane's cabin submerged. I called 911 immediately while my phone worked. It then got wet and stopped working. I had my life vest on, but inflated it only when I saw that the airplane was sinking and I realized that I might have to stay on the water. I was standing on the overturned airplane in the water, as it was sinking, until the NH State Police Marine Patrol rescue boat arrived and pulled me from the water.

Did the accident/incident have been prevented?

Operator/Owner Safety Recommendation

ADDITIONAL INFORMATION (Please type or print in ink)

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

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

Date of this Report

05/06/2014

mm/dd/yyyy

Signature and Name of Pilot/Operator

Signature: _____

Type or Print Name: Vadim Leonidovich Gayshan

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.

ERA14CA209

Reviewed by NTSB Regional Office

ASHBURN, VA

Name of Investigator

L. SCHIADA

Date Report Received

5/6/14