

STATEMENT OF WITNESS

The purpose of this statement is intended solely for use in determining the facts, conditions and circumstances, and the probable cause of the subject accident.

Date 02/25/2015

1. Place of accident Pineville Air Port Date 08-24-15 Hour _____

2. What is your name? Paul Lucius Age 27

3. Address _____

4. Phone Number _____ Email _____

5. Occupation Mechanic By whom employed Flight line air service LLC.

6. Where were you at the time of the accident? In front of main hanger

7. Weather Conditions _____

8. Tell in your own words what you saw or heard before and at the time the accident occurred.

Aircraft came in for landing engine was running high power
The Pilot did not touch down till near the end of the
runway at which point he skided off the end of the runway

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- Date 08/25/2015
1. Place of accident Pineville Municipal Airport Date 8/23/2015 Hour 13:14
2. What is your name? Lonnie J. Lucins, IV Age 43
3. Address [REDACTED]
4. Phone Number [REDACTED] Email [REDACTED]
5. Occupation Commercial Pilot, Mechanic By whom employed Flightline Air Service, LLC
6. Where were you at the time of the accident? in FBO
7. Weather Conditions clear, calm
8. Tell in your own words what you saw or heard before and at the time the accident occurred.

Heard engine noise of aircraft as it passed the FBO landing runway 36. Engine RPM seemed higher than normal. Moments after heard report that the plane had overshot the runway and had run off the north end.