

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: 782 NORTHAMPTON State: MA

ZIP: 01060 Country: USA

Latitude: 42.33 N Longitude: 72.61 W

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

Accident/Incident Date/Time

Date: 11/24/2017 Local Time: 0800
mm/dd/yyyy

Time Zone: EST

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

AIRCRAFT INFORMATION

Registration Number: N876MB

Manufacturer: AVEKO

Model: VL3-C-1 AKA GOBOSK 800 XP

Serial Number: 29

Year of Manufacture: 2009

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

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

Maximum Gross Weight: 1320 lbs

Weight at Time of Accident/Incident: 1108 lbs

Number of Seats: 2 Flight Crew Seats: _____

Cabin Crew Seats: _____ Passenger Seats: _____

Number of Engines: 1

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
☐ Certificate of Authorization or Waiver (COA)
☐ None
- Special**
☐ Restricted
☐ Limited
☐ Provisional
☐ Special Flight
☐ Experimental
☒ Special Light-Sport
☐ Experimental Light-Sport
☐ Unknown

Landing Gear

(Check all that apply)

- ☐ Retractable
☒ Tricycle
☐ Amphibian
☐ Emergency Float
☐ Float
☐ Hull
☐ Other Launch/Recovery System
☐ None
- ☐ Tailwheel
☐ High Skid
☐ Skid
☐ Ski
☐ Ski/Wheel
☐ Unknown

Engine Type (Select one)

- ☒ Reciprocating
☐ Turbo Shaft
☐ Turbo Prop
☐ Turbo Jet
☐ Turbo Fan
☐ Electric
☐ Liquid Rocket
☐ Solid Rocket
☐ Hybrid Rocket
☐ None
☐ Unknown

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	<u>ROTA</u>	<u>912 VLS</u>	<u>TE 52477</u>	<u>12/19/2008</u>	<u>100</u>	<u>142.5</u>	<u>2.2</u>	
Eng. 2								
Eng. 3								
Eng. 4								

Last Inspection Type

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

Date Last Inspection: 09/15/2017

Airframe Total Time: 142.5 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: UNKNOWN

Model: UNKNOWN

Propeller 2

- ☐ Fixed Pitch
☐ Controllable Pitch
☐ Ground Adjustable

Manufacturer: _____

Model: _____

ELT Installed: ☒ Yes ☐ No

If Yes:

ELT Manufacturer: KANNAD

Model or Part No.: UNKNOWN

TSO No.: ☐ OC91 (121.5 MHz) ☐ OC91a (121.5 MHz)
☐ OC126 (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:

- 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: THOMAS G BORONKAYCity: BloomfieldState: CT ZIP: 06002Fractional Ownership Aircraft: ☐ Yes ☒ NoCountry: USA

Operator of Aircraft

☒ Same As Registered Owner☐ Same Address as Registered Owner

Name: _____

City: _____

Doing Business As: _____

State: _____ ZIP: _____

Air Carrier/Operator Designator (4 Character Code): _____

Country: _____

Operating Certificates Held

(Check all that apply)

- ☒ 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 (Select one)

- ☐ Armed Forces
☐ Federal
☐ State
☐ Local

☐ Unknown**Revenue Operation for FAR 121, 125, 129, 135**
(Select one for each group)

- ☐ Scheduled or Commuter ☐ Domestic
☐ Non-Scheduled or Air Taxi ☐ International

- ☐ Passenger
☐ Cargo
☐ Mail Contract Only

Purpose of Flight for FAR 91, 103, 133, 137
(Select one)

- ☐ 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

Revenue Sightseeing Flight☐ Yes ☐ No**Air Medical Flight**☐ Yes ☐ No**AIRPORT INFORMATION** (Fill in if accident/incident occurred on approach, landing, takeoff, departure, or within 3 miles of an airport)Airport Name: NORTHAMPTONDistance From Airport Center: 0 smAirport Identifier: 7B2

Direction From Airport: _____ degrees true

Proximity to Airport: ☐ Off Airport/Airstrip ☒ On Airport/Airstrip ☐ N/AAirport Elevation: 121 ft. msl**Runway Information**Runway ID: 14 (L/R/C) Length: 3335 ft Width: 50 ft**Runway/Landing Surface** (Check all that apply)

- ☒ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood
☐ Dirt ☐ Ice ☐ Snow ☐ Unknown

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
☐ Slush-Covered ☐ Vegetation ☐ Unknown

Approach/Departure Segment (Select one)

- ☐ 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 (Check all that apply)

- ☒ None
☐ ADF/NDB ☐ PAR ☐ MLS ☐ Practice
☐ SDF ☐ Sidestep ☐ LDA ☐ GPS
☐ VOR/TVOR ☐ ILS ☐ ASR ☐ Visual
☐ VOR/DME ☐ Localizer Only ☐ Contact
☐ TACAN ☐ LOC-back course ☐ Circling
☐ RNAV ☐ Unknown

VFR Approach (Check all that apply)

- ☐ 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: <u>THOMAS G BORONKAY</u> City of Residence: <u>BLOOMFIELD</u> Middle Initial: _____ State: <u>CT</u> ZIP: <u>06002</u> Last Name: _____ Country: <u>USA</u> Age at time of Accident/Incident: <u>54</u> Date of Birth: <u>11/9/63</u> 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%;"> <tr> <th>Available</th> <th>Used</th> </tr> <tr> <td>☐ None</td> <td>☐ None</td> </tr> <tr> <td>☐ Lap only</td> <td>☐ Lap only</td> </tr> <tr> <td>☐ 3-point</td> <td>☐ 3-point</td> </tr> <tr> <td>☒ 4-point</td> <td>☒ 4-point</td> </tr> <tr> <td>☐ 5-point</td> <td>☐ 5-point</td> </tr> <tr> <td>☐ Unknown</td> <td>☐ Unknown</td> </tr> </table>			Available	Used	☐ None	☐ None	☐ Lap only	☐ Lap only	☐ 3-point	☐ 3-point	☒ 4-point	☒ 4-point	☐ 5-point	☐ 5-point	☐ Unknown	☐ 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>N/A</u> mm/dd/yyyy																																																																																												
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Medical Certificate Special Issuance																																																																																																				
Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: <u>12/15/2015</u> mm/dd/yyyy				Flight Review Aircraft Make: <u>AVEKO VL3 C-1 AKA LOBOSH 8800XP</u> 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 ☐ Instrument Airplane ☐ Airplane Multi-Engine ☐ Instrument Helicopter ☐ Gyroplane ☐ Helicopter ☐ Powered Lift ☐ Glider ☐ Sport																																																																																											
Type Ratings						Student Endorsements (Include dates)																																																																																														
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FLIGHT ITINERARY INFORMATION

Last Departure Point Airport ID: <u>KCEF</u> City: <u>CHICOPEE</u> State: <u>MA</u> Country: <u>USA</u>	Time of Departure Time: <u>0730</u> Time Zone: <u>EST</u>	Destination Airport ID: <u>7B2</u> City: <u>NORTHAMPTON</u> State: <u>MA</u> Country: <u>USA</u>	Type Flight Plan Filed ☒ None ☐ VFR/IFR ☐ Company VFR ☐ IFR ☐ Military VFR ☐ Unknown ☐ VFR Activated? ☐ Yes ☐ No ☐ Unknown
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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 G ☐ Military Operations Area (MOA) ☐ Special ☐ Class B ☐ Demo Area ☐ Airport Advisory Area ☐ Air Traffic Control Area ☐ Class C ☐ Warning Area ☐ Jet Training Area ☐ Unknown ☐ Class D ☐ Prohibited Area ☐ TRSA ☒ Class E ☐ Restricted Area ☐ FAR 93			Altitude of In-Flight Occurrence: _____ ft msl

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 ☐ None ☒ Commercial Weather Service (DUATS) ☐ Unknown ☐ On-Board Weather	Weather Observation Facility Facility ID: _____ Observation Time: _____ Time Zone: _____ Distance from Accident Site: _____ nm Direction from Accident Site: _____ degrees true
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Basic Conditions ☒ VMC ☐ IMC ☐ Unknown	Light Condition ☐ Dawn ☐ Dusk ☐ Dark Night ☐ Unknown ☒ Day ☐ Night ☐ Bright Night
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
Temperature: _____ (C) or <u>24</u> (F) Dew Point: <u>UNKNOWN</u> (C) or _____ (F) Altimeter Setting: <u>UNKNOWN</u> in. Hg or _____ MB	

Wind Direction ☒ Variable -or- Direction: _____ degrees true	Wind Speed ☐ Calm ☒ Light and Variable -or- Speed: _____ kts	Wind Gusts ☒ Not Gusting -or- Speed: _____ kts	Visibility <u>10</u> miles RVR: _____ feet RVV: _____ miles Density Altitude: <u>UNKNOWN</u> ft
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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
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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 ☐ Clear Air ☐ Terrain-Induced ☐ Convective Turbulence Severity ☐ Light ☐ Moderate ☐ Severe ☐ Extreme
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NOTAMS (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident:

DAMAGE TO AIRCRAFT AND OTHER PROPERTY**Aircraft Damage**

- ☐ None ☒ Substantial
☐ Minor ☐ Destroyed
☐ Unknown

Aircraft Fire

- ☒ None ☐ Both Ground and In-Flight
☐ In-Flight ☐ Fire at Unknown Time
☐ On-Ground ☐ Unknown

Aircraft Explosion

- ☒ None ☐ Both Ground and In-Flight
☐ In-Flight ☐ Explosion at Unknown Time
☐ On-Ground ☐ Unknown

Description of Damage to Aircraft and Other Property (Use additional sheet if necessary)

UNDERCARRIAGE, NOSE WHEEL SHEERED OFF, GASH IN LEFT WING
COWLING DAMAGED, RIGHT MAIN GEAR SHEERED OFF, DAMAGE
TO AIRPORT VASI (COLLISION)

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 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

IMMEDIATE GO AROUND ON BOUNCE, MORE
RIGHT RUDDER, DESIGN OF PLANE TENDS TO OVERSPEED
FLAPS

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.)

Total Time/Cycles
On Part

____ Hours
____ Cycles

Time Since This Part
Inspected/Overhauled

____ Hours

FUEL & SERVICES INFORMATION

Fuel on Board at Last Takeoff
(Convert from pounds, as necessary)

18

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

EVACUATION OF AIRCRAFT

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

NORMAL - OPENED COWLING AND EXITED

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.

SEE ATTACHED

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

Date of this Report

12/11/2017
mm/dd/yyyy

Name of Pilot/Operator:

THOMAS G. BORDONEKAY

Signature: _____

- 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.

GAA18CA065

Reviewed by NTSB Regional Office

GAAID

Name of Investigator

HICKS

Date Report Received

11DEC2017

ON 11/24/17

FLIGHT WAS PLANNED FOR KCEF to 7B2 to pick up my INSTRUCTOR / SAFETY PILOT FOR THE BEGINNING OF A LONG CROSS COUNTRY. WEATHER WAS CLEAR WITH LIGHT WINDS. TEMP WAS 24°F AND THERE WAS FROST ON THE WINGS OF MY GLOBOSH 800XP AT 7:30 AM EST. I PUT THE AIRPLANE IN THE SUN AND THE FROST WAS REMOVED FROM THE WINGS AND EMPANAGE. PRE FLIGHT WAS COMPLETED AND NO ABNORMALITIES WERE OBSERVED. THE ENGINE STARTED NORMALLY. I GOT THE ATIS AND TAXI CLEARANCE FROM GROUND. TAXI WAS NORMAL. RUNUP WAS NORMAL WITH ALL MECHANICAL INDICATORS IN THE GREEN. I GOT TAKEOFF CLEARANCE FROM TOWER AND PROCEEDED TO POSITION RUNWAY 23 AT NOVEMBER. TAKEOFF WAS NORMAL ROTATION AT ABOUT 45 KTS. THE ENGINE WAS RUNNING SMOOTH AND ALL INDICATORS WERE GREEN. AT ABOUT 500 AGL I BEGAN A LEFT TURN TOWARDS 7B2. THE ENROUTE PART OF THE FLIGHT WAS UNREMARKABLE. AFTER PERMISSION TO SWITCH FREQUENCY I TUNED TO THE CTAF FOR 7B2 AND ANNOUNCED MY INTENTION TO ENTER THE PATTERN (14) I DID SO AND MY ALTITUDE AND SPEED WAS NORMAL AND AS EXPECTED. ABEAM THE TOUCHDOWN POINT I PITCHED TO 60 KTS AND ENGAGED FLAP 1 SETTING. IT MUST BE NOTED THAT THE GLOBOSH 800 IS DESIGNED WITH SPLIT FLAPS.

THE SPLIT FLAPS ARE NOT DESIGNED FOR LIFT INDUCTION. THE RESULT OF ENGAGING FLAPS ON THE G800 IS A MEASURE OF DRAG. THE PILOT MUST PITCH TO THE FLAP SPEED AND THEN AND ONLY THEN CAN THE FLAP HANDLE BE USED. ANY HIGHER SPEED AND THE PILOT CAN'T BARELY LIFT THE HANDLE. ONE NOTE IS 15° . THE FLAPS ALSO CREATE A NOSE OVER TENDANCY OR THE FEELING OF A INCREASE IN SPEED THAT THE PILOT MUST COUNTER. IF NOT, IT IS EASY TO OVERSPEED THE FLAPS.

BASE TURN WAS NORMAL AND SPEED WAS HELD AT 60 KTS. TURN TO FINAL WAS NORMAL AND I PITCHED TO 55 KTS TO ENGAGE THE REMAINING FLAPS. THERE ARE ONLY TWO SETTINGS 15° AND 37° . BOTH MY INSTRUCTOR AND I FEEL THAT THERE SHOULD BE MORE THAN JUST THOSE TWO POSITIONS. I HELD 55 KTS ON FINAL AND WAS ON GLIDE SLOPE ACCORDING TO THE VASI. I WAS PLEASED WITH THE APPROACH AND FELT STABLE ON SHORT FINAL. I WAS AIMING FOR 50 KTS OVER THE FENCE BUT MIGHT HAVE BEEN A FEW KNOTS FASTER. IT MUST BE NOTED THAT THE G800_{XP} HAS CARBON PUSH/PULL TUBES FOR CONTROL SURFACE MOVEMENT AND ANY INPUT IS INSTANTANEOUS. THE AIRCRAFT IS MARKETING AS IF IT IS LIKE HANDLING A SUPERCAR LIKE

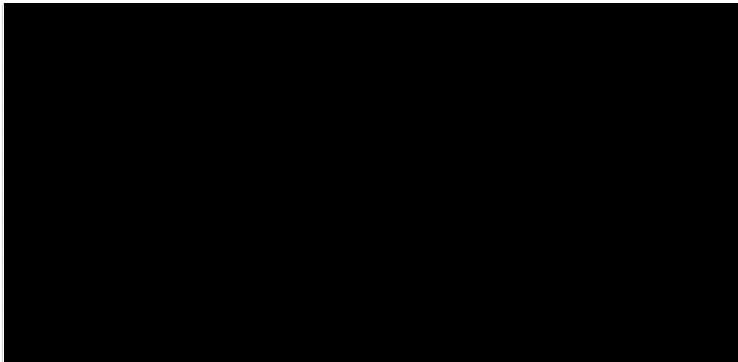
A MCLAREN. ONLY SLIGHT PRESSURES CAN BE APPLIED TO THE STICK. ONCE OVER THE RUNWAY I FLARED BUT I FELT A BIT FAST. TRYING TO BLEED OFF SPEED I APPLIED SLIGHT BACKPRESSURE AND BALLOONED SLIGHTLY. AFTER THAT I EXPERIENCED A SMALL BOUNCE ON TOUCHING DOWN AND THE NOSE GEAR PORPOISED ONCE, IT SHOULD BE NOTED THAT THE GOBOSH G800XP HAS A SIGNIFICANT LEFT YAW WHEN IT SLOWS. AS SOON AS I PORPOISED THE AIRPLANE TURNED HARD TO THE LEFT AND I WAS ON THE GRASS. IT HAPPENED SO QUICKLY AND I DIDN'T HAVE DIRECTIONAL CONTROL. ALTHOUGH MY HAND WAS ON THE THROTTLE I'D LOST THE CHANCE TO GO AROUND SINCE I HAD VEERED SO SEVERELY. I MADE CONTACT WITH THE VASI UNIT AND SKIDDED SIDWAYS TO A STOP. I TURNED ALL ELECTRICAL OFF AND THE FUEL LEVER TO OFF. I REMOVED MY HARNESS AND EXITED AFTER OPENING THE CANOPY NORMALLY.

IT SHOULD BE NOTED THAT THE GOBOSH G800XP IS KNOWN AS THE VL3 IN THE CZECH REPUBLIC WHERE IT IS BUILT. IT IS AN ALL CARBON FIBRE CONSTRUCTION FAIRED VERY SLEEKY AND BUILT FOR SPEED IN THE MICROLIGHT CLASS IN EUROPE, WHERE IT HOLDS SPEED RECORDS.

IT WAS SOLD INTO THE US LSA MARKET
WITH A LARGER, LONGER CONTOURED WING
TO MEET US ASTM LSA REQUIREMENTS.

FACT IS, IT IS CHALLENGING TO SLOW IT
DOWN, ESPECIALLY IN GROUND EFFECT
WHERE THE NATURAL TENDENCY IS TO GAIN
SPEED IN THIS DESIGN. IT IS HIGHLY SENSITIVE
TO PITCH AND PRONE TO BE OVERCONTROLLED.

THOMAS G. BORONKAY



11/28/2017