

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: Hoopa (O21) State: CA
 ZIP: 95546 Country: USA
 Latitude: 41-02-29N (dd:mm:ss N/S) Longitude: 123-40-04W (ddd:mm:ss E/W)

Date/Time

Date: 07-18-2014 Local Time: 2:30 DST
 mm/dd/yyyy Time Zone: Pacific

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

AIRCRAFT INFORMATION

Manufacturer: Diamond Aircraft (a Canadian Company)
 Model: DA20-C1
 Serial Number: C0128
 Registration Number: N528DC Amateur-built: ☐ Yes ☒ No

Max Gross Weight: 1,720 lbs
 Weight at Time of Accident/Incident: 1,510 lbs
 Location of Center of Gravity at Time of Accident/Incident:
10.78 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 (Check all that apply)

Standard

☐ Normal
☒ Utility
☐ Acrobatic
☐ Transport

Special

☐ Restricted
☐ Limited
☐ Provisional
☐ Experimental
☐ Special Flight
☐ Light Sport

Number of Seats: 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: 7-8-2014

mm/dd/yyyy

Airframe Total Time: 824 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 ☒ Hand held, mounted in luggage compartment

ELT Installed

☒ Yes ☐ No

ELT Activated

☐ Yes ☒ No

ELT Manufacturer: Original Equipment -

Model/Series: Data available, I just lack info as of writing.

ELT Aided in Locating Accident/Incident

☐ Yes ☐ No

Serial Number: _____

Battery Type: _____ Battery Exp. Date: 06/2015

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: Sensenich (wooden)

Model: W69EK-63 S/N AE 4418

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	Continental	10-240 B	806241	10/01/2000	125	824	12	0
Eng. 2								
Eng. 3								
Eng. 4								

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

Aircraft destroyed. Propeller broken, engine and engine mounts damaged, canopy broken, tail broken, landing gear broken.

AIRPORT INFORMATION (If the accident/incident occurred on approach, takeoff or within 3 miles of an airport, complete this section)Airport Identifier: O21

Distance From Airport Center: _____ SM

Airport Name: Hoopa

Direction From Airport: _____ degrees MAG

Proximity to Airport ☐ Off Airport/Airstrip ☒ On Airport ☐ On AirstripAirport Elevation: 356 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/TWOR ☐ 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: 14 (L/R/C) Length: 2,325 ft Width: 50 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: 3S8City: Grants PassState: OregonCountry: USA**Time of Departure**Time: 1:30 PM DSTTime Zone: Pacific**Destination**Airport ID: PAOCity: Palo AltoState: CACountry: USA**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)

24 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

Pilot was totally uninjured. Aircraft was damaged but on it's landing gear, wings level. I simply did a post landing check list, shut off the fuel flow valve, and exited the aircraft in the step over the side, foot on the foot rest, normal manner. Completely uneventful.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Weather Observation Facility**Facility ID: O21 lacks Wx reporting systems.

Observation Time: _____

Time Zone: _____

Distance from Accident Site: _____ NM

Direction from Accident Site: _____ 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 | | |

Visibility30 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:
250 degrees MAG☐ Variable**Wind Speed**Velocity: 10 KTS

-or-

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

Wind GustsVelocity: 0 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

Temperature: _____ (C)
or 80 (F)Altimeter Setting: 3003 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 (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: Norman City: [REDACTED]
 Middle Initial: K State: [REDACTED]
 Last Name: Larsen Country: USA
 Age at time of Accident/Incident: 73 Date of Birth: [REDACTED] 1940 Certificate Number: [REDACTED]
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
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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 <u>01-23-2013</u> <i>mm/dd/yyyy</i>
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Medical Certificate Limitations

Must have available glasses for near vision.

Medical Certificate Waivers

None

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

09-24-2012
mm/dd/yyyy

Flight Review Aircraft

Make: Diamond Aircraft (528DC)
 Model: DA20-C1

Airplane Rating(s) <i>(Check all that apply)</i> ☐ None ☒ Single-Engine Land ☐ Single-Engine Sea ☐ Multiengine Land ☐ Multiengine Sea	Other Aircraft Rating(s) <i>(Check all that apply)</i> ☐ None ☐ Airship ☐ Free Balloon ☒ Glider ☐ Gyroplane ☐ Helicopter ☐ Powered Lift	Instrument Rating(s) <i>(Check all that apply)</i> ☒ None ☐ Airplane ☐ Helicopter ☐ Powered Lift	Instructor Rating(s) <i>(Check all that apply)</i> ☒ None ☐ Instrument Airplane ☐ Airplane Single-Engine ☐ Instrument Helicopter ☐ Airplane Multi-Engine ☐ Helicopter ☐ Gyroplane ☐ Glider ☐ Powered Lift ☐ Sport
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Type Ratings

Tail wheel endorsement (3-5-2008)
 Mountain Flying endorsement (1-14-2009)

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	822	584	822	0	16		4		33	
Pilot in Command (PIC)	685	486	685		8		0		25	
Time as Instructor	0	0	0		0		0			
This Make/Model										
Last 90 Days	17	17	17		0					
Last 30 Days	14	14	14		0					
Last 24 Hours	1	1	1		0					

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

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		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time										
Pilot in Command (PIC)										
Time as Instructor										
This Make/Model										
Last 90 Days										
Last 30 Days										
Last 24 Hours										

ADDITIONAL FLIGHT CREW MEMBERS (Exclusive of cabin attendants, complete the following information)

Pilot Name and Address		Degree of Injury ☐ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious
First Name: _____	City: _____	
Middle Initial: _____	State: _____ ZIP: _____	
Last Name: _____	Country: _____	

Pilot Certificate(s) (Check all that apply)		Seat Occupied ☐ Left ☐ Front ☐ Right ☐ Rear ☐ Center ☐ Single ☐ Unknown
☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign		
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military		

Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No	Total Flight Time at the Time of this Accident/Incident: _____ hrs
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Pilot Name and Address		Degree of Injury ☐ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious
First Name: _____	City: _____	
Middle Initial: _____	State: _____ ZIP: _____	
Last Name: _____	Country: _____	

Pilot Certificate(s) (Check all that apply)		Seat Occupied ☐ Left ☐ Front ☐ Right ☐ Rear ☐ Center ☐ Single ☐ Unknown
☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign		
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military		

Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No	Total Flight Time at the Time of this Accident/Incident: _____ hrs
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Pilot Name and Address		Degree of Injury ☐ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious
First Name: _____	City: _____	
Middle Initial: _____	State: _____ ZIP: _____	
Last Name: _____	Country: _____	

Pilot Certificate(s) (Check all that apply)		Seat Occupied ☐ Left ☐ Front ☐ Right ☐ Rear ☐ Center ☐ Single ☐ Unknown
☐ None ☐ Student ☐ Recreational ☐ Commercial ☐ Flight Engineer ☐ Foreign		
☐ Private ☐ Flight Instructor ☐ Sport ☐ Airline Transport ☐ U.S. Military		

Type Rating/Endorsement for Accident/Incident Aircraft? ☐ Yes ☐ No	Total Flight Time at the Time of this Accident/Incident: _____ hrs
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PASSENGER(S) / OTHER PERSONNEL (Include flight attendants; continue on separate sheet if necessary)

Name and Address	Seat	Crew	Non-Revenue	Revenue	Non-Occupant	FAA	Fatal	Serious Injury	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: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
First Name: _____ City: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____	_____	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

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.

My name is Norman Larsen. I am a retired Silicon Valley Engineering Manager. I own 528DC, which is a 125 hp low wing, side by side seating, carbon fiber, small, sleek, GA aircraft. I was the PIC, and sole occupant of this aircraft (which is often called a Diamond Katana) at the time of the incident. I did all of my student flying in a Katana, flew various rentals for a short period, and purchased a Katana in 2009. Since that purchase, I have flown this type exclusively. So 71 % of my 822 total hours are in Katana's, the incident aircraft.

On 7-9-2014, I embarked on a 1,240 nm cross country trip, with 528DC, which had just completed its annual inspection. The final leg of the trip was from Grants Pass, OR, to Palo Alto, CA. On 7-18-2014 I embarked from Grants Pass, overflew Hoopa, and decided to land there to examine river fishing possibilities. Hoopa, 021, is a non towered airport without ATIS, AWAS, etc, at 356 feet of elevation, which is approached by flying south above the Trinity River until visual contact with the airport is made, at a PA of 1156, i.e. 800 AGL. Incident time was 2:30 PDST on a clear, 80 degree F. day.

My primary navigation tools were a current CF-16 WAC chart on my lap and a Garmin G696 GPS navigation system, panel mounted. The Garmin noted wind from 250 - 10, i.e. a 70 degree cross wind to runway 14, my selected runway. I would estimate the canyon ridge tops to be at an elevation from 2,000 to 3,000. I was flying up a river canyon at a low altitude, but I was not uncomfortable about it. I flew down the river at a flap setting of 15 degrees, at about 85 - 90 knots, at an estimated elevation of 1,200 feet. I was reluctant to descend to pattern altitude of 1156 until I made airport visual contact.

When I made visual contact, I immediately went to a 40 degree flap setting, which induced a mild altitude gain. So I was mildly high and fast at this point, but I very consistently land this aircraft in 600 - 1,000 feet of runway, and rw 14 is 2,325 x 50. I was not particularly alarmed. I could slip and correct the problem.

However, the above circumstances put me over the threshold at 70 knots (where 60 is desired) and I floated down the runway farther than normal. On touch down I applied maximum braking, but realized I probably was going to dribble off the asphalt at a ground speed of 20 knots. My clear pilot's decision was to accept that outcome. I immediately rejected the option of adding power for a go around. Attempting a slow, climbing turn in a box canyon is a high risk maneuver. Pancaking into the dry river bed, fully stalled, at a slow 20 knots was the correct decision.

That is what happened. If you examine the airport photo for 021 at www.airnav.com, my aircraft came to a stop on the white, rocky river bed, which was completely dry, at the end of runway 14. This is the lower left corner in the noted photo. I did a proper shut down and fuel valve shut off, and simply climbed out, totally uninjured. My assessment: Pure Pilot Error. Excessive approach speed caused the pilot to exit the end of runway 14 at approximately 20 knots and come to a stop at roughly 250 feet from the runway end.

I appreciate that it is your stated intention to send an accident investigator to the site on Monday, 7-12-14. I have hired a resident of Hoopa who has committed to salvaging the aircraft for an agreed upon fee and clean up the site once the investigator released it.

RECOMMENDATION (How could this accident/incident have been prevented?)**Operator/Owner Safety Recommendation**

I have a Mountain Flying endorsement (and had my survival kit in the aircraft). And as noted, I have lots of hours in this aircraft.

My honest assessment is that I need to rethink my notion that I can save a questionable situation with stick and rudder skills. I have made over 2,000 landings, mostly in a Katana. I was in a canyon setting and should have been more focused on correct speed, heading, and altitude in this reduced options scenario.

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

Signature: _____

Type or Print Name: _____

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

Signature: _____

Type or Print Name: _____

Title: _____



See docket item: WPR14CA299 Pilot Statement on 6120
signature and date final page.

FOR NTSB USE ONLY**NTSB Accident/Incident No.**

WPR14CA299

Reviewed by NTSB Regional Office

WPR-Seattle, WA

Name of Investigator

Andrew L. Swick

Date Report Received

07/23/2014