

**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: Fresno State: CA
 ZIP: 93722 Country: USA
 Latitude: 36 50 14 N (dd:mm:ss N/S) Longitude: 119 51 55 W (ddd:mm:ss E/W)

Date/Time

Date: 08/10/2014 Local Time: 1020
 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

50 ft MSL

AIRCRAFT INFORMATION

Manufacturer: Ryan
 Model: Navion
 Serial Number: NAV-4-1533
 Registration Number: N4533K Amateur-built: ☐ Yes ☒ No

Max Gross Weight: 3,150 lbs
 Weight at Time of Accident/Incident: 2,901 lbs
 Location of Center of Gravity at Time of Accident/Incident:
97.36 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 **Special**
☒ Normal ☐ Restricted
☐ Utility ☐ Limited
☐ Acrobatic ☐ Provisional
☐ Transport ☐ Experimental
☐ Special Flight
☐ Light Sport

Number of Seats: 4

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: 09/21/2013

mm/dd/yyyy

Airframe Total Time: 3,548 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 Hand held

ELT Installed

☒ Yes ☐ No

ELT Activated

☒ Yes ☐ No

ELT Manufacturer: Emergency Beacon Corp

Model/Series: EPC-102A

ELT Aided in Locating Accident/Incident

☐ Yes ☒ No

Serial Number: Unknown

Battery Type: Unknown

Battery Exp. Date: Unknown

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: McCauley

Model: D3A32C90-MN

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	IO520BB	573937	UNK	285	416	30	
Eng. 2								
Eng. 3								
Eng. 4								

OWNER/OPERATOR INFORMATION**Registered Aircraft Owner**Name: Jonathan S. FlaughnerFractional Ownership Aircraft: ☐ Yes ☒ No**Owner Address**City: ClovisState: CA ZIP: 93611Country: USA**Operator of Aircraft**☒ Same As Registered Owner

Name: _____

Doing Business As: _____

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

Operator Address☒ Same As Registered Owner

City: _____

State: _____ ZIP: _____

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****Manufacturer:** _____**Model:** _____**Damage to Other Aircraft**

- ☐ Destroyed ☐ Minor
☐ Substantial ☐ None

Registered Owner of Other Aircraft

First Name: _____

City: _____

Middle Initial: _____

State: _____ ZIP: _____

Last Name: _____

Country: _____

Pilot of Other Aircraft

First Name: _____

City: _____

Middle Initial: _____

State: _____ ZIP: _____

Last Name: _____

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.)

On short final, with no warning, motor made a muffled bang noise and quit producing thrust when pilot made a throttle advancement.

Pilot thought motor sounded as if it were drowning in gas (but not sure). Aircraft set down short of runway about 2 seconds after the motor quit producing thrust.

Total Time/Cycles On Part

_____ 416 Hours

_____ Cycles

Time Since This Part Inspected/Overhauled

_____ 30 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)

Public property: Two fence sections crumpled. One south of Herndon Ave and one just north of Herndon Ave just short of runway 30 at Sierra Sky Park (E79).

Aircraft: Main landing gear sheared off. Out board wings bent/crumpled, one flap completely ripped off the other significant damage. Horizontal stabilizers severely dented. Motor mount dislocated and cocked 45 degrees to right. Damage to tip tank leading edges. Belly of aircraft scratched and dented. Prop totally destroyed and severely "curled" backwards.

Accident scene photographed by Fresno PD.

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

Airport Identifier: E79

Distance From Airport Center: 0 SM

Airport Name: Sierra Sky Park

Direction From Airport: 120 degrees MAG

Proximity to Airport ☒ Off Airport/Airstrip ☐ On Airport ☐ On Airstrip

Airport Elevation: 321 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 ☐ Sideslip ☐ 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: 30 (L/R/C) Length: 2,473 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: MAE
City: Madera
State: CA
Country: USA

Time of Departure

Time: 0945
Time Zone: Pacific

Destination

Airport ID: E79
City: Fresno
State: CA
Country: 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)

78 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

Fuel from Epic pump # 1 (I believe) in front of Barber Aviation at MAE airport.

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

Opened canopy and climbed out.

WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE**Weather Observation Facility**Facility ID: KFATObservation Time: 101753ZTime Zone: PacificDistance from Accident Site: 9 NMDirection from Accident Site: 118 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 | | |

Visibility10 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:
290 degrees MAG☒ Variable**Wind Speed**Velocity: 3 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

Nothing pertinent to the accident. No active notams for E79.

Temperature: 28 (C)
or (F)Altimeter Setting: 29.96 in. HG
or MBDensity Altitude: 2,028 ftDew Point: 12 (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: Jonathan City: Clovis
 Middle Initial: S State: CA ZIP: 93612
 Last Name: Flaugher Country: USA

Age at time of Accident/Incident: 59 Date of Birth: mm/dd/yyyy 55 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
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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>05/19/2014</u> mm/dd/yyyy
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Medical Certificate Limitations

Must wear glasses for near vision

Medical Certificate Waivers

None

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

12/28/13
 mm/dd/yyyy

Flight Review Aircraft

Make: Ryan
 Model: Navion

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
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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	4,714	117	4,714	0	414	703	42			
Pilot in Command (PIC)	4,269	117	4,269	0	274	703	42			
Time as Instructor	1,921		1,921	0	137	350	4			
This Make/Model										
Last 90 Days	13	13	13	0	0	0	0			
Last 30 Days	7	7	7	0		0	0			
Last 24 Hours	1	1	1	0	0	0	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										
First Name: _____			City: _____			☐ None		☐ Fatal								
Middle Initial: _____			State: _____			☐ Minor		☐ Unknown								
Last Name: _____			Country: _____			☐ Serious										
Pilot Certificate(s) (Check all that apply)						Seat Occupied										
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer								
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military								
☐ Foreign																
Type Rating/Endorsement for Accident/Incident Aircraft?				☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs										
Pilot Name and Address						Degree of Injury										
First Name: _____			City: _____			☐ None		☐ Fatal								
Middle Initial: _____			State: _____			☐ Minor		☐ Unknown								
Last Name: _____			Country: _____			☐ Serious										
Pilot Certificate(s) (Check all that apply)						Seat Occupied										
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer								
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military								
☐ Foreign																
Type Rating/Endorsement for Accident/Incident Aircraft?				☐ Yes ☐ No		Total Flight Time at the Time of this Accident/Incident: _____ hrs										
Pilot Name and Address						Degree of Injury										
First Name: _____			City: _____			☐ None		☐ Fatal								
Middle Initial: _____			State: _____			☐ Minor		☐ Unknown								
Last Name: _____			Country: _____			☐ Serious										
Pilot Certificate(s) (Check all that apply)						Seat Occupied										
☐ None		☐ Student		☐ Recreational		☐ Commercial		☐ Flight Engineer								
☐ Private		☐ Flight Instructor		☐ Sport		☐ Airline Transport		☐ U.S. Military								
☐ Foreign																
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)						Seat	Crew	Non-Revenue	Revenue	Non-Occupant	FAA	Fatal	Serious Injury	Minor Injury	No Injury	Unknown
Name and Address																
First Name: <u>Carlie</u>			City: <u>Clovis</u>			RF		☒							☒	
Middle Initial: <u>M</u>			State: <u>CA</u>													
Last Name: <u>Flaughter</u>			ZIP: <u>93611</u>													
			Country: <u>USA</u>													
First Name: <u>Hannah</u>			City: <u>Clovis</u>			RR		☒							☒	
Middle Initial: <u>C</u>			State: <u>CA</u>													
Last Name: <u>Flaughter</u>			ZIP: <u>93611</u>													
			Country: <u>USA</u>													
First Name: _____																
Middle Initial: _____																
Last Name: _____																
First Name: _____																
Middle Initial: _____																
Last Name: _____																
First Name: _____																
Middle Initial: _____																
Last Name: _____																
First Name: _____																
Middle Initial: _____																
Last Name: _____																

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.

N4533K Flew two flights on mishap date. Mishap occurred at the end of the second flight terminating flight just short of runway 30 at Sierra Sky Park (E79) on Herndon Ave in Fresno CA. PIC Jonathan S. Flaughner occupied front left seat on both flights. Passengers were Hannah and Carlie Flaughner (PIC's daughters). At end of 2nd sortie, the aircraft engine lost power without warning on very short final resulting in landing short. Prior to that moment, there were no indications that anything was wrong with the aircraft.

First flight uneventful. One quart of oil was added prior to first flight to bring total to 9 quarts. Fuel sumps were sample checked and appeared free of water and debris. Take off about 0835L, climbed to 6000 feet and did some sight seeing and flight orientation in vicinity of Lake Millerton about 10 miles North East of Fresno. Descended to 2000 feet and proceeded to land at Madera municipal airport (MAE) to refuel. This first flight lasted approximately 35 minutes. Did not notice anything unusual with N4533K at this time. Engine and all systems were working fine. Hannah Flaughner occupied right front seat on first flight.

Between flights, I refueled N4533K at the "Epic" fuel pump island in front of Barber Aviation at Madera airport. Used pump 1 (I believe). Added approximately 43 Gallons of 100LL to fill all tanks. The aircraft has 2 main wing tanks filled through a common filler neck on the right wing. Put approximately 27 gallons into main wing fuel tanks. The two tip tanks are filled via filler necks on the tank (each has it's own). Put about 7 gallons in the right tip tank and about 9 Gallons in left. After refueling, checked all sumps and fuel was clear and free of visible debris or water. Preflight did not reveal any leaks or drips. Oil pressure and temps were normal and in green arcs throughout both flights.

Second flight was uneventful until the very end. Take off was at approximately 0945. Flew from Madera airport back to vicinity of Millerton Lake for more sight seeing and orientation for 2nd passenger. Carlie Flaughner was in front right seat during 2nd flight. Descended to 2000 feet and proceeded back to Sierra Sky Park. Entered downwind (following railroad tracks) and left the perch (45 degrees off threshold at approximately 1200 feet) for base leg configured to land with landing gear down and flaps extended. Base leg and final appeared normal until short final. Flew base leg and final at approximately 90 mph IAS. Initial PAPI indications on final were white/white until about 1/4 mile from runway. At about 1/8 mile from runway, glide path adjusted to white/red. Also at this point the aircraft needed another power and pitch adjustment to maintain airspeed/glide path. From this instant on, events proceeded very quickly. As PIC advanced throttle, there was a muffled bang or chug and motor began making noises as if drowning (pilot's impression). The motor did not produce thrust from that point on and aircraft began rapidly sinking. From the moment I noticed the engine was not responding until touch down seemed like approximately 2 seconds. The aircraft clipped a 4 foot fence on the south side of Herndon, landed in the eastbound lanes, crossed a median and came to a rest in another 4 foot fence on the north side of Herndon Ave aligned roughly with runway center line. Landing gear sheared off somewhere at or after impact with first fence. The propeller continued under (apparently) some residual engine power or momentum until contact with the ground eventually brought it to a stop. I shut off battery, generator and magneto switches and we egressed the aircraft after coming to a stop. Passing drivers stopped to help and direct traffic. Due to leaking fuel, PIC returned to cockpit briefly to turn fuel master shutoff valve to the off position. 911 emergency services were called by passerby's. None of the aircraft occupants was injured and there were no other people or cars involved. The only apparent damage other than to the aircraft, was to the two fences.

Fresno Police department took accident scene photos.

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

Unknown at this time. Do not know why motor lost power. Had I had earlier warning, I could have flown a more precautionary pattern from the perch, however there were no indications of impending motor failure before adding power just before engine "banged".

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**

08/15/2014

*mm/dd/yyyy***Signature and Name**

Signature:

Type or Print Name: Jonathan S. Flaughner

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.**

WPR14LA337

Reviewed by NTSB Regional Office

WPR

Name of Investigator

LINK

Date Report Received

8/15/2014