

VEHICLE ACCIDENT REVIEW

Section A (To be completed by driver) WHITNESS

Name MARK REED

Date 10/20/2014

Date, time and location of accident 11:00 AM WEST END OF

TAXIWAY A4

Weather conditions CLEAR & WINDY

Description of accident DAN AND I HAD PARKED THE TRUCK ON END OF TAXIWAY WE STOPPED SHORT OF THE NEW HYDRO SEED. THIS LEFT THE BACK HALF OF THE TRUCK ON THE TAXIWAY WE THEN WALKED OVER TO WORK ON REIL LIGHT. (TURN OVER)

Primary cause of accident

PILOT DROVE OFF TAXIWAY AND HIT TRUCK

How to prevent future accident. _____

Signed [Signature]

Date 10/20/2014

Section B (To be completed by driver's supervisor)

I have reviewed this accident with the driver involved and have the following comments:

Name _____ Date _____

Section C (Safety Committee Review)

The Committee has reviewed this accident and has found that it should be judged:
_____ Preventable _____ Non-Preventable

Consideration of the facts indicated the following action should be taken to prevent such an accident in the future: _____

_____ Driver notified in writing _____ Driver notified verbally

Name _____ Position _____ Date _____

CONT.

WHILE AT THE REIL DAN AND I SAW
A PLAIN PULL UP TO THE A4 TAXIWAY AND
STOP. I SAID TO DAN WE SHOULD MOVE
THE TRUCK. AS WE WALKED OVER HE TURNED
HIS PLAIN 180° BACK INTO THE WIND. HE
STARTED TO REV HIS ENGINE. I WENT OUTSIDE
THE EDGE LIGHTS TO WALK UP TO THE PLAIN
TO LET HIM KNOW WE HAD MOVED THE
TRUCK COMPLETELY OFF THE TAXIWAY. BEFORE
I COULD GET TO THE PLANE THE PILOT
REVED UP AND TURNED AROUND AGAIN. HE
SWUNG WIDE AND WENT OFF THE ASPHALT.
HIS WING WENT OVER THE TAXI LIGHT AND
THE ENGINE WAS REVED UP AND PICKED
UP SPEED. HE SHOT PAST ME AND DID
NOT SLOW DOWN. AS HE WENT PAST HIS
WING HIT OUR PICK UP AND SLID SIDELWAYS.
THE MOTOR THEN STOPPED. I WENT OVER AND
LOOKED FOR FUEL FROM THE WING AND SAW
NONE. AS I GOT CLOSE TO THE PLANE THE
CANOPY SLID OPEN. I ASKED "ARE YOU
OK" NO ANSWER. I GOT CLOSER AND
TAPPED HIS SHOULDER AND AGAIN ASKED
"ARE YOU OK". HE THEN REPLIED
"DON'T TOUCH ME". HE THEN REMOVE
HEAD GEAR AND GOT OUT OF PLANE.
HE WAS UP WALKING AROUND SO IT
APPEARED AS IF HE WAS OK.

CONT. #2

I THEN WENT TO CHECK ON PAN AS HE WAS IN THE TRUCK WHEN IT WAS HIT. HE WAS FINE.

I THEN CALLED ARNIE TO ASK WHAT WE SHOULD NOW DO. HE SAID HE WOULD BE RIGHT DOWN. AFTER HE SAW THE ACCIDENT HE WENT BACK TO GET HIS CAMERA.

I CALLED DON RYE TO REPORT AND ASK WHAT TO DO NEXT. DON REQUESTED I CALL THE POLICE.

JEFF ROADS OF MTN HOME POLICE AND WARN BAUER OF AIRPORT ADVISORY BOARD ARRIVED IN ABOUT 5 MIN. JEFF SAID THIS IS ALL FAA ISSUE AND MADE NO REPORT. WARN SAID HE WAS JUST THERE TO OBSERVE.

ARNIE TOLD ME IT IS THE PILOTS RESPONSIBILITY TO REPORT THIS TO FAA.

→ WE CAME BACK TO PILOT LOUNGE TO EXCHANGE ~~THE~~ INFO.

VEHICLE ACCIDENT REVIEW

Section A (To be completed by driver)

Name Daniel w Reichert Date 10-20-2014
Date, time and location of accident 10-20-2014 11:00 Am End of Taxiway A4
MTN Home Air Port
Weather conditions Clear

Description of accident Air Plane Hit Truck

Primary cause of accident He was Turning around to get on runway
he hit the Excelsator to hard and lost control of Plane.
I was about 15 to 20 Feet off Taxiway, he hit the tailgate with
his Right wing of Plane.
How to prevent future accident. _____

Signed ~~Daniel w Reichert~~ Date 10-20-2014

Section B (To be completed by driver's supervisor)

I have reviewed this accident with the driver involved and have the following comments:

Name _____ Date _____

Section C (Safety Committee Review)

The Committee has reviewed this accident and has found that it should be judged:
_____ Preventable _____ Non-Preventable

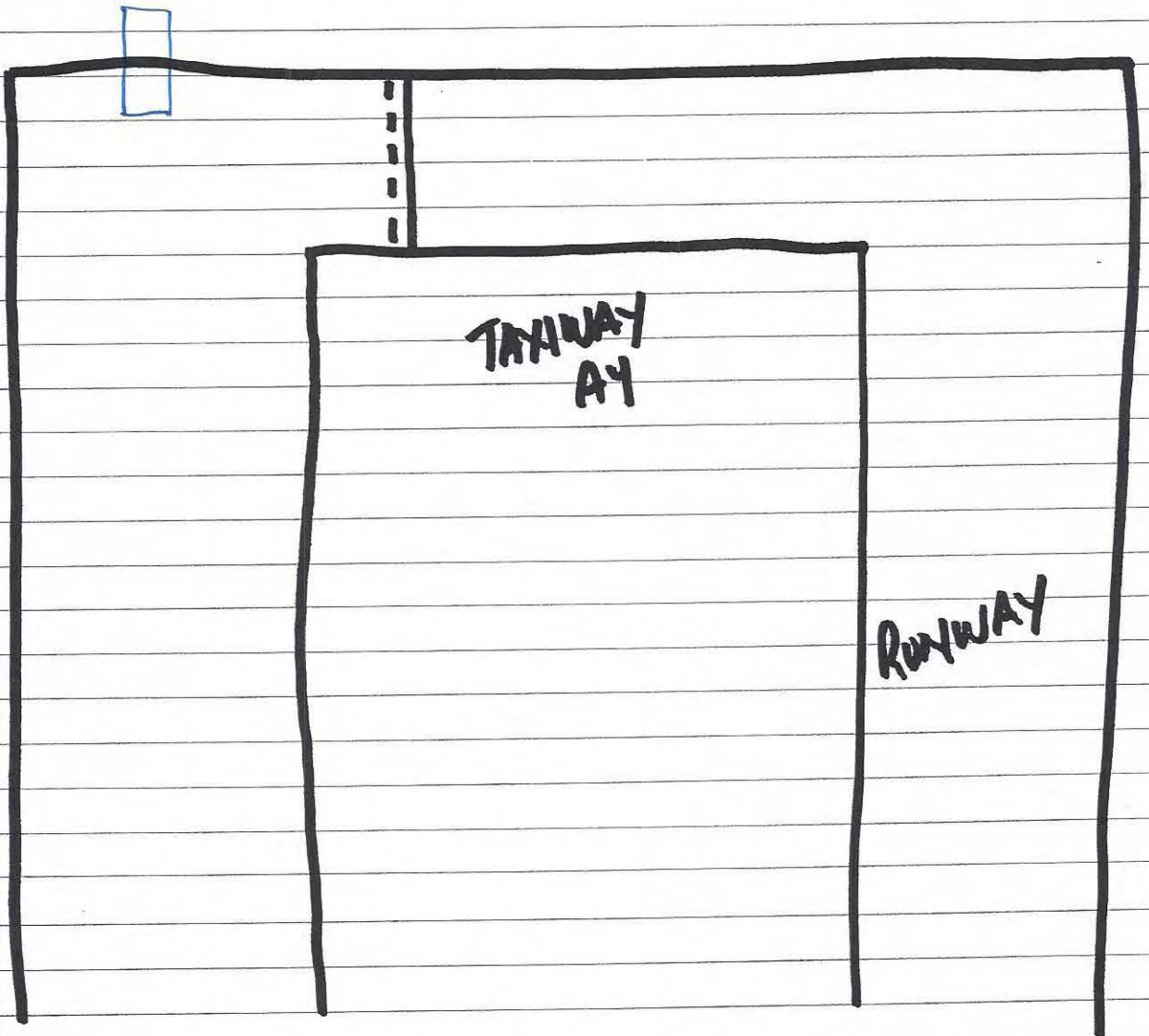
Consideration of the facts indicated the following action should be taken to prevent such an accident in the future: _____

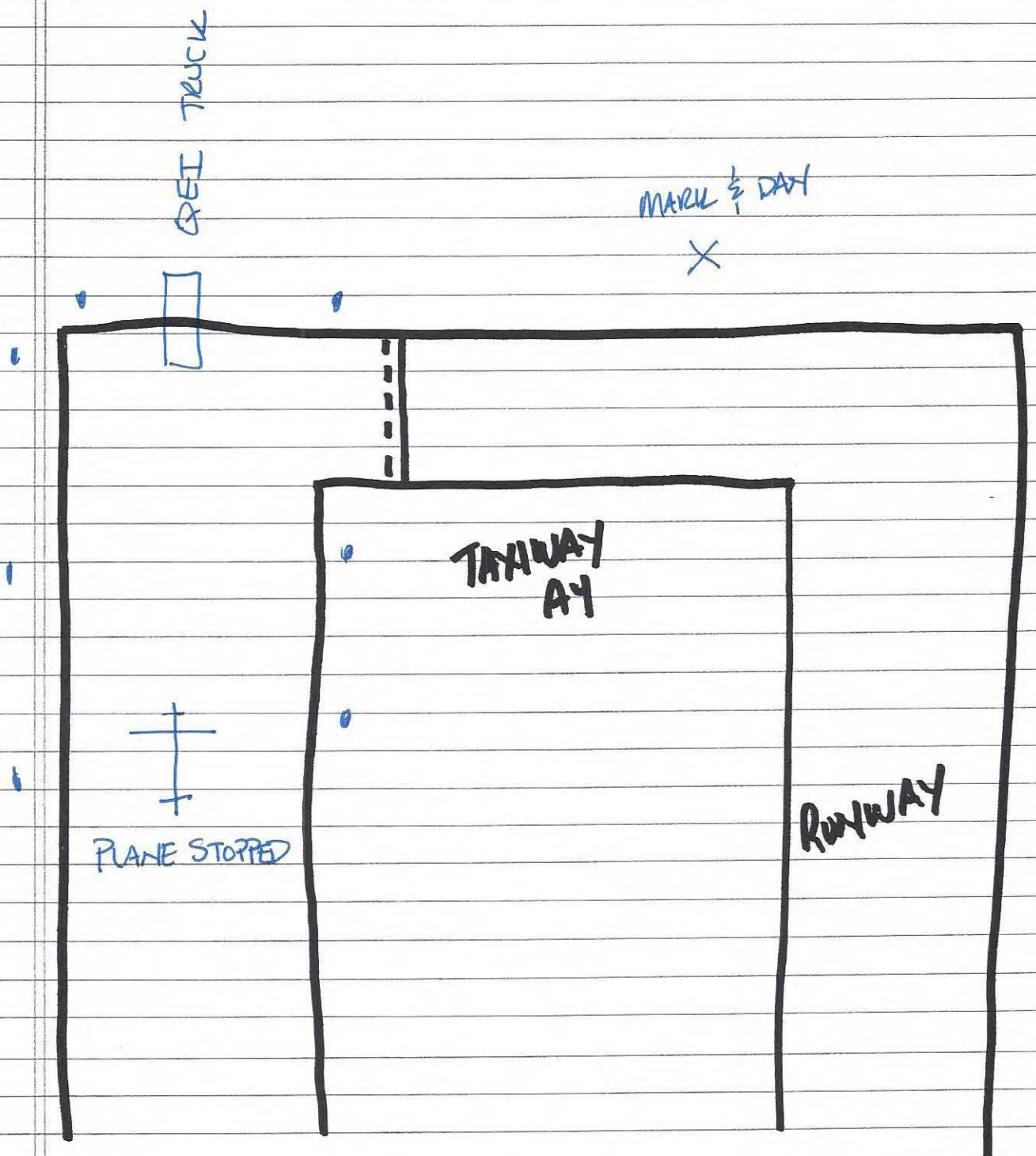
_____ Driver notified in writing _____ Driver notified verbally

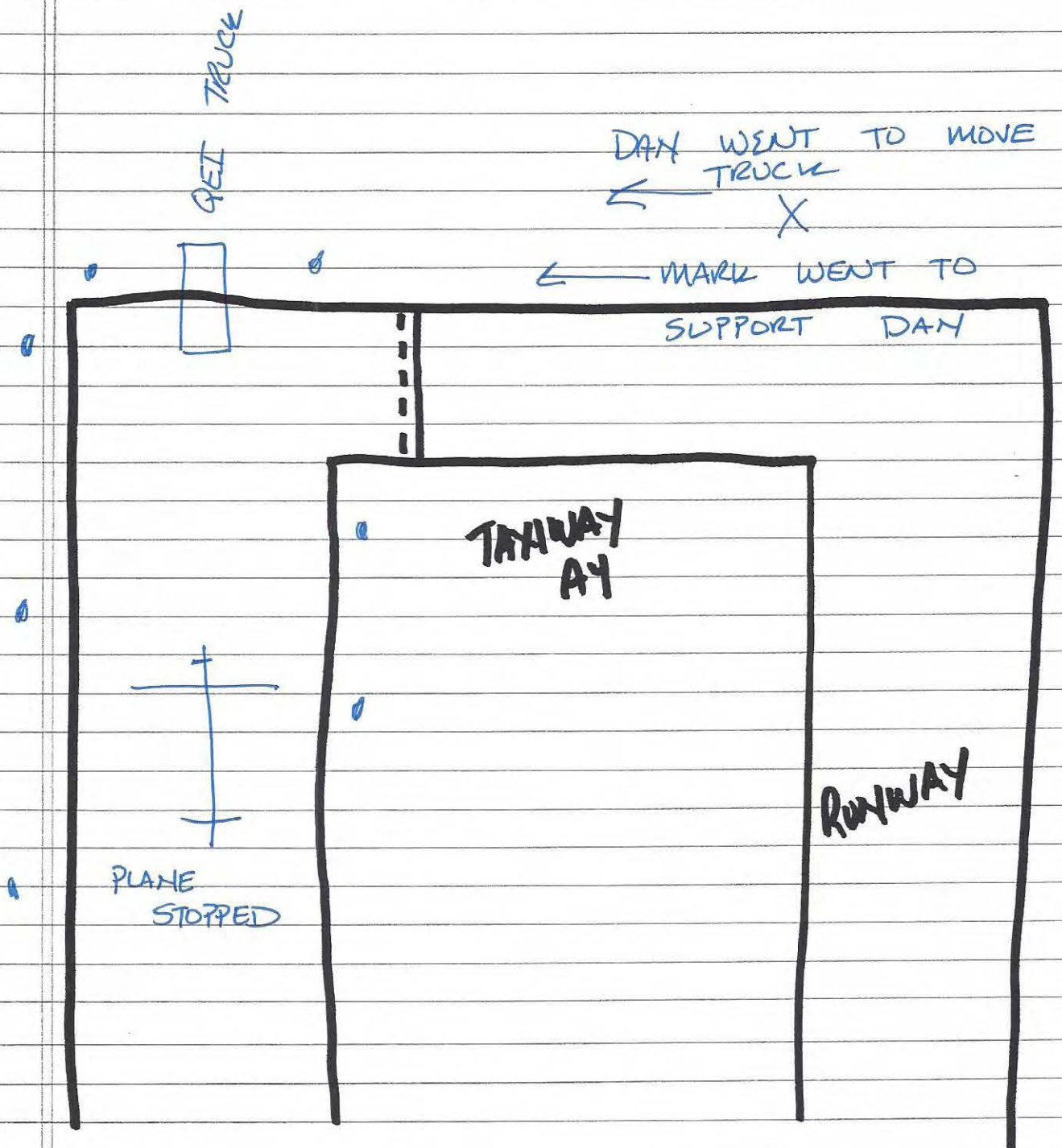
Name _____ Position _____ Date _____

GET TRUCK
1/2 ON 1/2 OFF
TAXIWAY

MARK & DAN
WORKING ON
REIL X

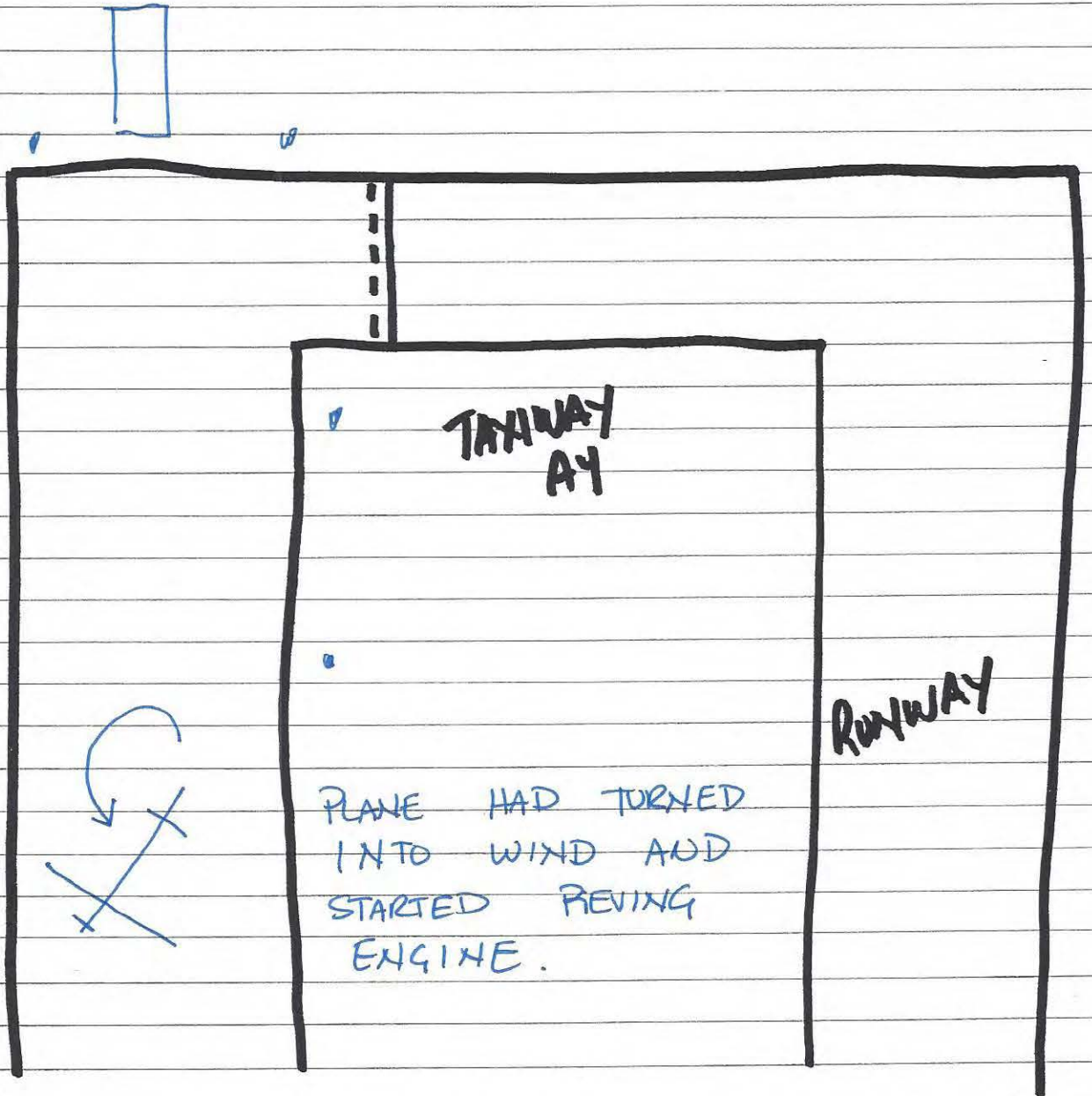






MARK WALKED UP TO
SIGNAL PLANE THAT TAXIWAY
WAS CLEAR

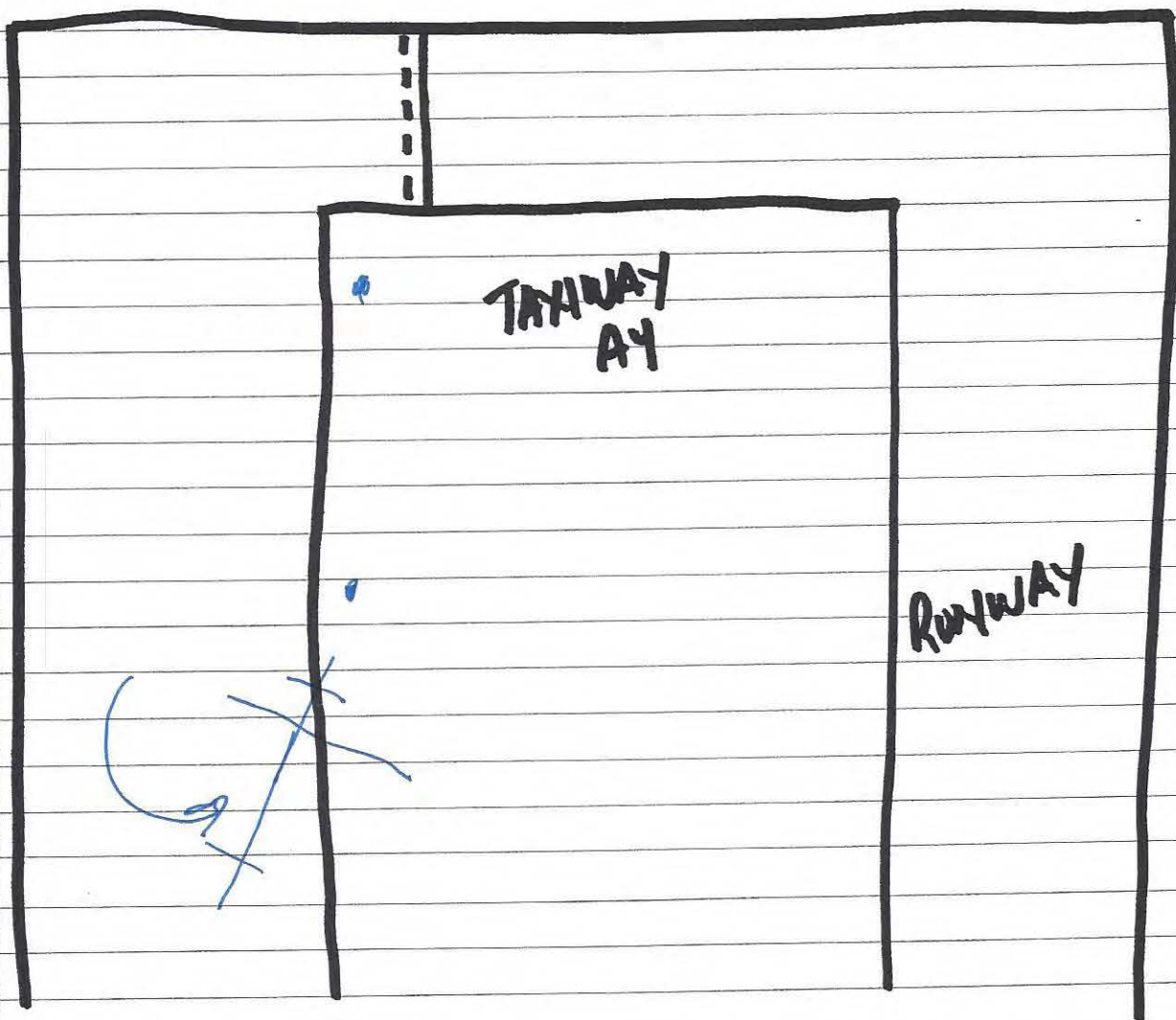
DAY MOVED
GET TRACK
OFF TAXIWAY

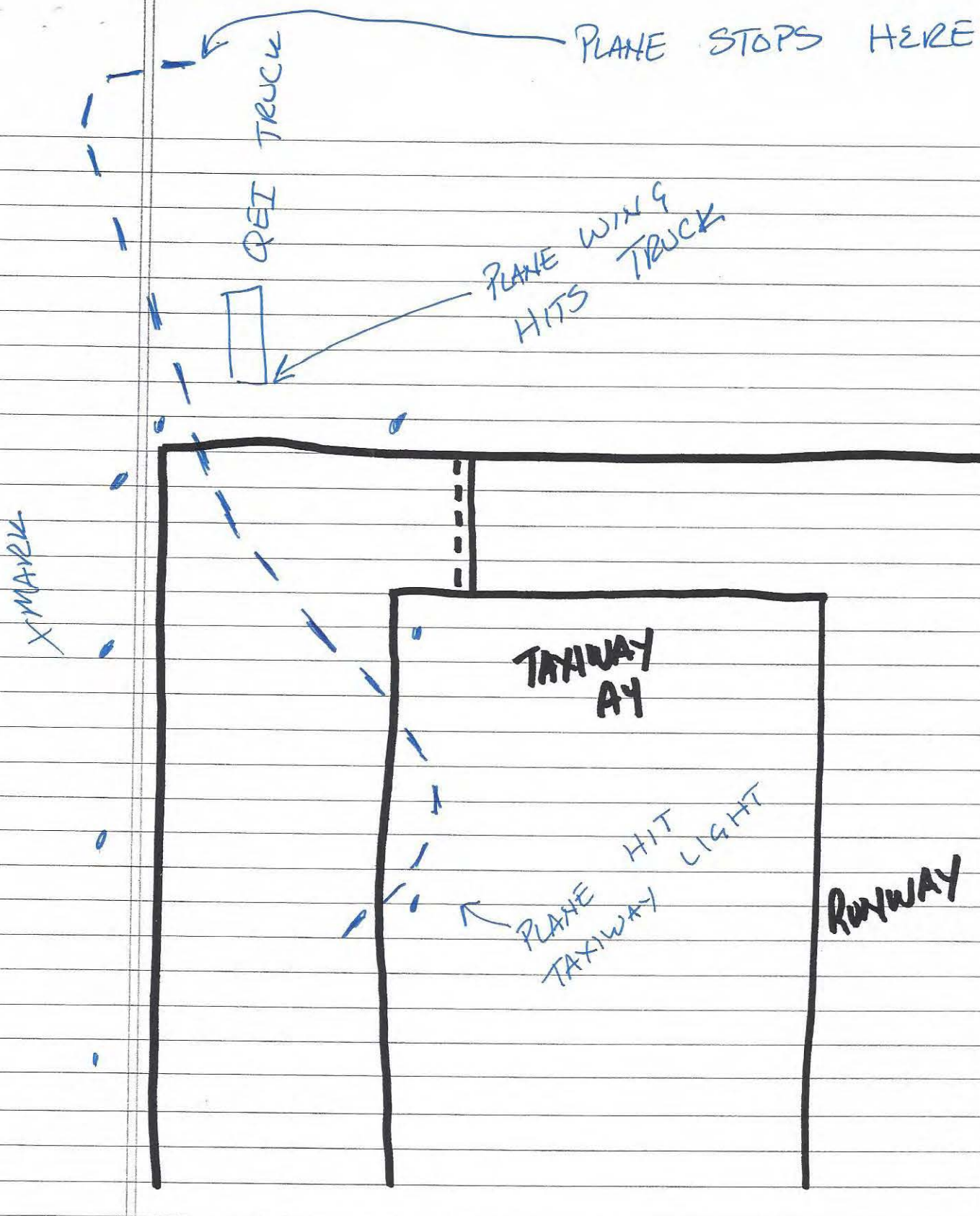


COULD GET EYE
PILOT HE HAD
AGAIN.

GET TRUCK

BEFORE MARK
CONTACT WITH
TURNED





PATH OF PLANE (- - - -)

SHEET # 6

DRIVER'S PRELIMINARY ACCIDENT REPORT

Please place this in glove compartment of insured vehicle.

Please read these instructions NOW—so you will know what to do IF INVOLVED IN AN ACCIDENT.

1. Pull over where you may safely stop and observe the circumstances.
2. Help see that any person who is injured receives medical attention promptly; however, do not obligate yourself for medical or other expense beyond necessary first aid.
3. Be courteous—do not argue—keep calm.
4. Get names and addresses of all witnesses. (Please complete on the inside.)
5. Carefully examine and make notes of each item of damage. If there is opportunity to do so, make note of all statements by others, physical marks, or other things that will verify your report of how the accident happened.
6. Give your name and address to the injured person or a police officer before leaving the scene.
7. Do not talk about the accident, except to a police officer, or our adjuster.
8. Do not sign any statements or reports except official police reports.
9. Complete this report before leaving the scene. Your claims adjuster will ask for this information.

I. OTHER VEHICLE(S)

1) Driver's Name EARL PITS	Age 89
Driver's License No. [REDACTED]	Phone No. 83747
Vehicle Make THORPEDO	Model T211
Vehicle Year 1961	Vehicle Color LSA
Insurance Company AVING. COMPANY	Address [REDACTED]
2) Other Driver's Name DAN REICHERT	
Age 53	Driver's License No. [REDACTED]
Phone No. 83646	Vehicle Make MERIDIAN
Vehicle Model TRUCK	Vehicle Year 1961
Insurance Company FEDERATED MUTUAL	Address COMPANY

LIGHT SPORT
AIRCRAFT

II. WITNESSES

1) Name MARK REED	Age 57	Phone No. [REDACTED]
Address [REDACTED]	2) Name BOB	
Age [REDACTED]	Phone No. [REDACTED]	Address [REDACTED]
3) Name [REDACTED]	Age [REDACTED]	Phone No. [REDACTED]
Address [REDACTED]	4) Name [REDACTED]	
Age [REDACTED]	Phone No. [REDACTED]	Address [REDACTED]

III. INJURY TO PERSONS (List names of all persons in car)

1) Name NONE	Age [REDACTED]
Address [REDACTED]	Phone No. [REDACTED]
Nature of Injury [REDACTED]	Taken To [REDACTED]
2) Name [REDACTED]	Age [REDACTED]
Address [REDACTED]	Phone No. [REDACTED]
Nature of Injury [REDACTED]	Taken To [REDACTED]

IV. DETAILS

Make [REDACTED]	Year [REDACTED]	PLATE [REDACTED]	Speed (MPH) [REDACTED]
Street [REDACTED]	City/State [REDACTED]	Other Vehicle [REDACTED]	Insured [REDACTED]
Complete diagram: [REDACTED]			
Damage to Other Vehicle: [REDACTED]			

ROAD CHARACTER

- ☒ Straight ☐ Level
☐ Curve ☐ Hill
☐ Defective Shoulder
☐ Holes, Deep Ruts, Bumps
☐ Loose Material on Surface
☐ Other: [REDACTED]

LIGHT

- ☒ Daylight ☐ Dusk
☐ Dawn
☐ Dark—Street Lighted
☐ Dark—Street Not Lighted

ROAD SURFACE

- ☒ Dry ☐ Muddy
☐ Wet ☐ Icy

TRAFFIC CONTROL

- ☐ Stop Sign
☐ Stop-and-Go Signal
☐ Yield
☐ Other: [REDACTED]
☐ No Traffic Control Present

WEATHER

- ☒ Clear ☐ Fog
☐ Raining ☐ Snowing
☐ Other: [REDACTED]

CHECK THESE POINTS

- | Your | Other | |
|--------------------------|--------------------------|--|
| ☐ | ☐ | Driving under the influence of intoxicants |
| ☐ | ☐ | Exceeded lawful speed |
| ☐ | ☐ | Did not grant right of way to vehicle |
| ☐ | ☐ | Followed too closely |
| ☐ | ☐ | Improper passing |
| ☐ | ☐ | On the wrong side of the road |
| ☐ | ☐ | Failed to give proper signal |
| ☐ | ☐ | Improper turn |
| ☐ | ☐ | Disregarded traffic signal |
| ☐ | ☐ | Improper starting from parked position |
| ☐ | ☐ | Improper parking location |
| ☐ | ☐ | Other improper actions (specify below): [REDACTED] |
| ☐ | ☐ | No improper driving or parking |

NONE

THIS PAGE COPIED AND GIVEN
TO EARL MRS 10/20/2014 ~ NANN

ADDENDUM # 1

RE: ACCIDENT REPORT OF 10/20/2014
AT MOUNTAIN HOME AIRPORT.

- DURING THE TIME OF THE ACCIDENT A STRONG WIND WAS BLOWING, SKETCH #4 OF 6 SHOWS THE DIRECTION OF THE WIND. THE PLANE AS SHOWN ON SKETCH #4 IS POINTING INTO THE WIND,

THE WIND WAS STRONG ENOUGH THAT TUMBLE WEEDS WERE GOING BY. ABOUT 20 MPH AND GUSTY.

MARK REED

~~Mark Reed~~

11/17/2014

QUALITY ELECTRIC, INC.