

NATIONAL TRANSPORTATION SAFETY BOARD
RELEASE OF AIRCRAFT WRECKAGE

ACCIDENT IDENTIFICATION
NUMBER

WPR17LA112

PART I—RELEASE OF AIRCRAFT WRECKAGE

REGISTERED OWNER (name and address) Belsazar Uriarte [REDACTED] Montebello, CA 90640		REGISTRATION NUMBER—N N6832D
		MAKE Cessna
MODEL 175	DATE OF ACCIDENT 05/26/2017	LOCATION El Monte, CA
The National Transportation Safety Board has ☒ has not ☐ completed its investigation of the aircraft wreckage described above. All wreckage except that listed on the reverse side is hereby released to the registered owner, or owner's representative, for appropriate disposition. (If no parts are retained, insert NONE.) None		
SIGNATURE OF NTSB REPRESENTATIVE [REDACTED]	TITLE IIC Air Safety Investigator	DATE 05/31/2017

(This section may be signed by a person, not the owner or owner's representative, who has knowledge of the disposition of the aircraft wreckage and its parts. Such signature does not place a responsibility for disposition of the wreckage upon that person.)

I HEREBY ACKNOWLEDGE:



Receipt of the above described aircraft wreckage.



Removal of the parts, if any, listed on the reverse side of this form.

SIGNATURE [REDACTED] Owner SW Aircraft	TITLE Owner- Southwest Aircraft Recovery	DATE 05/31/2017
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REMARKS:

None

NATIONAL TRANSPORTATION SAFETY BOARD
RELEASE OF AIRCRAFT WRECKAGE

ACCIDENT IDENTIFICATION
NUMBER

WPR17LA112

PART II—RELEASE OF AIRCRAFT PARTS

REGISTRATION NUMBER

N6832D

MAKE

Cessna

MODEL

175

DATE OF ACCIDENT

05/26/2017

LOCATION

El Monte, CA

The National Transportation Safety Board has retained, for further examination, those parts, pieces, or components listed below. When the examination is complete, they will be returned to:

OWNER OR OWNER'S REPRESENTATIVE—

ADDRESS:

PARTS, PIECES, OR COMPONENTS RETAINED:

SIGNATURE OF NTSB REPRESENTATIVE

TITLE

DATE

The registered owner or owner's representative will acknowledge receipt of the materials by signing this form in the spaces designated below.

SIGNATURE OF OWNER OR OWNER'S REPRESENTATIVE

TITLE

DATE

ADDRESS: