

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: Santa Barbara State: CA
 ZIP: 93117 Country: USA
 Latitude: N 34 25.4 Longitude: W 119 50.2
(Enter in decimal degrees or degrees:minutes:seconds)

Accident/Incident Date/Time

Date: 08/25/2019 Local Time: 2224
mm/dd/yyyy
 Time Zone: PST

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

AIRCRAFT INFORMATION

Registration Number: N 119TG

Manufacturer: LOCKHEED

Model: C-130A

Serial Number: 57-0520

Year of Manufacture: 1957

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

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

Maximum Gross Weight: 124,200 lbs

Weight at Time of Accident/Incident: 101,700 lbs

Number of Seats: 7 Flight Crew Seats: 4

Cabin Crew Seats: 3 Passenger Seats: 0

Number of Engines: 4

Category of Aircraft

- ☒ Airplane
- ☐ Balloon
- ☐ Blimp/Dirigible
- ☐ Glider
- ☐ Gyroplane
- ☐ Helicopter
- ☐ Powered Lift
- ☐ Rocket
- ☐ Ultralight
- ☐ Unknown

Type of Airworthiness Certificate (Check all that apply)

- | Standard | Special |
|---|---|
| ☐ Normal | ☒ Restricted |
| ☐ Aerobatic | ☐ Limited |
| ☐ Balloon | ☐ Provisional |
| ☐ Commuter | ☐ Special Flight |
| ☐ Transport | ☒ Experimental |
| ☐ Utility | ☐ Special Light-Sport |
| | ☐ Experimental Light-Sport |
| ☐ Certificate of Authorization or Waiver (COA) | |
| ☐ None ☐ Unknown | |

Landing Gear (Check all that apply)

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

Engine Type (Select one)

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

Fuel System Type (Reciprocating)

- ☐ Carburetor ☐ Fuel-Injected

Engine	Engine Manufacturer	Engine Model/Series	Manufacturer's Serial Number	Date of Mfg. <i>mm/dd/yyyy</i>	Rated Power ☒ Horsepower or ☐ lbs of Thrust	Total Time (hours)	Time Since: Inspection (hours)	Overhaul (hours)
Eng. 1	ALLISON	T-56-A-9	LM-67-3176-935		3750 ESHP	3079.2		
Eng. 2	ALLISON	T-56-A-9	LM-67-3145-743		3750 ESHP	126.2		
Eng. 3	ALLISON	T-56-A-9	LM-QEC-260-1092		3750 ESHP	6311.3		
Eng. 4	ALLISON	T-56-A-9	LM-67-3116-572		3750 ESHP	3163.3		

Last Inspection Type

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

Date Last Inspection: 8/07/19

mm/dd/yyyy

Airframe Total Time: 15,112.9 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: AIP PART 91

Description of Fire Extinguishing System

- ☐ None
☒ Specify: A 2 shot bromochloromethane (CB) extinguishing system 

Propeller 1

- ☐ Fixed Pitch
☒ Controllable Pitch
☐ Ground Adjustable

Manufacturer: HAMILTON STANDARD

Model: 54H60

Propeller 2

- ☐ Fixed Pitch
☒ Controllable Pitch
☐ Ground Adjustable

Manufacturer: HAMILTON STANDARD

Model: 54H60

ELT Installed: ☒ Yes ☐ No

If Yes:

ELT Manufacturer: ELT

Model or Part No.: ELT 406GPS

TSO No.: ☐ C91 (121.5 MHz) ☐ C91a (121.5 MHz)
☒ C126 (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: International Air Response, Inc.City: MesaState: AZZIP: 85212Fractional 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: SANTA BARBARA MUNICIPALDistance From Airport Center: ON AIRPORT INFO smAirport Identifier: KSBA

Direction From Airport: _____ degrees true

Proximity to Airport: ☐ Off Airport/Airstrip ☒ On Airport/Airstrip ☐ N/AAirport Elevation: 11 ft. msl**Runway Information**Runway ID: 07 (L/R/C) Length: 6052 ft Width: 150 ft**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

Runway/Landing Surface (Check all that apply)

- ☒ Asphalt ☐ Grass/Turf ☐ Macadam ☐ Water
☐ Concrete ☐ Gravel ☐ Metal/Wood
☐ Dirt ☐ Ice ☐ Snow ☐ 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/TWOR ☐ ILS ☐ ASR
☐ VOR/DME ☐ Localizer Only ☐ Visual
☐ TACAN ☐ LOC-back course ☐ Contact
☐ RNAV ☐ Circling
☐ 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 2" Responsibilities at the Time of Accident/Incident

"Flight Crewmember 2" was pilot flying ☐ Yes ☒ No

First Name: MAURICE

City of Residence: CHANDLER

Middle Initial: **A**

State: **AZ** ZIP: **85286**

Last Name: MAYBEN JR

Country: **USA**

Age at time of Accident/Incident: 65 Date of Birth: [REDACTED] mm/dd/yyyy

Certificate Number: [REDACTED]

Degree of Injury ☒ None ☐ Fatal ☐ Minor ☐ Unknown ☐ Serious		Seat Occupied ☐ Left ☐ Front ☐ Unknown ☒ Right ☐ Rear ☐ Center ☐ Single		Restraint Type Available ☐ None ☐ Lap only ☐ 3-point ☒ 4-point ☐ 5-point ☐ Unknown Used ☐ None ☐ Lap only ☐ 3-point ☒ 4-point ☐ 5-point ☐ Unknown		Inflatable Restraints ☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	
Pilot Certificate(s) <i>(Check all that apply)</i> ☐ 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>06/05/2019</u> <i>mm/dd/yyyy</i>	

Medical Certificate Limitations

MUST WEAR AND POSSESS GLASSES FOR NEAR VISION

Medical Certificate Special Issuance

Date of Last Flight Review or Equivalent, Including FAR 121/135 Checks: <u>01/31/2019</u> <i>mm/dd/yyyy</i>	Flight Review Aircraft Make: <u>LOCKHEED</u> Model: <u>C-130A</u>
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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 ☐ 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 ☐ Airplane Single-Engine ☒ Airplane Multi-Engine ☐ Gyroplane ☐ Powered Lift ☒ Instrument Airplane ☐ Instrument Helicopter ☐ Helicopter ☐ Glider ☐ Sport
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Type Ratings

DC-9, L-382 SIC PRIVILEGES ONLY

Student Endorsements *(Include dates)*

Flight Time <i>(Enter appropriate number of hours in each box)</i>	All Aircraft	This Make & Model	Airplane Single Engine	Airplane Multiengine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air
						Actual	Simulated			
Total Time	10,400	94	38	10,000	4200	1100	300			
Pilot in Command (PIC)	4800			4800	2400	500	150			
Time as Instructor	240			240	50	25				
This Make/Model					19	14				
Last 90 Days	97	88		88	19	14				
Last 30 Days	85	85		85	16	13				
Last 24 Hours	9	9		9	2	.1				

ADDITIONAL FLIGHT CREWMEMBERS (Exclusive of cabin crew, complete the following information)						
Crew Name and Address First Name: <u>STEVEN</u> City of Residence: <u>MESA</u> Middle Initial: <u>K</u> State: <u>AZ</u> ZIP: <u>85205</u> Last Name: <u>FERRELL</u> Country: <u>USA</u>			Seat Occupied ☐ Left ☐ Front ☒ Center ☐ Rear ☐ Right ☐ Single ☐ Unknown ☐ Unknown		Injury ☒ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	
Pilot Certificate(s) (Check all that apply) ☐ None ☐ Flight Instructor ☐ Commercial ☒ US Military ☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign ☐ Student ☐ Sport ☒ Flight Engineer			Restraint Type: Available ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown Used ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown		Inflatable Restraints ☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	
Type Rating/Endorsement for Accident/Incident Aircraft? ☒ Yes ☐ No			Total Flight Time at the Time of this Accident/Incident: <u>7000</u> hrs			
Crew Name and Address First Name: _____ City of Residence: _____ Middle Initial: _____ State: _____ ZIP: _____ Last Name: _____ Country: _____			Seat Occupied ☐ Left ☐ Front ☐ Center ☐ Rear ☐ Right ☐ Single ☐ Unknown ☐ Unknown		Injury ☐ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	
Pilot Certificate(s) (Check all that apply) ☐ None ☐ Flight Instructor ☐ Commercial ☐ US Military ☐ Private ☐ Recreational ☐ Airline Transport ☐ Foreign ☐ Student ☐ Sport ☐ Flight Engineer			Restraint Type: Available ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown Used ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown		Inflatable Restraints ☐ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	
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 cabin crew; continue on separate sheet if necessary)						
Name and Address First Name: <u>JOHN</u> City: <u>APACHE JUNCTION</u> Middle Initial: _____ State: <u>AZ</u> ZIP: <u>85119</u> Last Name: <u>GIANNASI</u> Country: <u>USA</u> ☒ Crew ☐ Passenger ☐ Other		Seat ☐ Left ☐ Center ☐ Right ☐ Unknown Row: <u>NAV</u>	Injury ☒ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	Restraint Type Available ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown Used ☐ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	Inflatable Restraints ☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	Age ☐ Under 5 years If Under 5, ☐ Child Restraint ☐ Lap-Held ☐ Unknown
First Name: <u>GARY</u> City: <u>PEORIA</u> Middle Initial: <u>A</u> State: <u>AZ</u> ZIP: <u>85383</u> Last Name: <u>GODT</u> Country: <u>USA</u> ☒ Crew ☐ Passenger ☐ Other		☐ Left ☐ Center ☐ Right ☐ Unknown Row: <u>Flight</u>	☒ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	☒ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	☐ Under 5 years If Under 5, ☐ Child Restraint ☐ Lap-Held ☐ Unknown
First Name: <u>SCOTT</u> City: <u>MESA</u> Middle Initial: <u>R</u> State: <u>AZ</u> ZIP: <u>85205</u> Last Name: <u>CASH</u> Country: <u>USA</u> ☒ Crew ☐ Passenger ☐ Other		☐ Left ☐ Center ☐ Right ☐ Unknown Row: <u>Flight</u>	☒ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	☒ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	☐ Under 5 years If Under 5, ☐ Child Restraint ☐ Lap-Held ☐ Unknown
First Name: <u>ALEC</u> City: <u>MESA</u> Middle Initial: <u>H</u> State: <u>AZ</u> ZIP: <u>85205</u> Last Name: <u>NOONAN</u> Country: <u>USA</u> ☒ Crew ☐ Passenger ☐ Other		☐ Left ☐ Center ☐ Right ☐ Unknown Row: <u>Flight</u>	☒ None ☐ Minor ☐ Serious ☐ Fatal ☐ Unknown	☒ None ☐ Lap Only ☐ 3-point ☐ 4-point ☐ 5-point ☐ Unknown	☒ Not Installed ☐ Installed ☐ Not Deployed ☐ Deployed ☐ Unknown	☐ Under 5 years If Under 5, ☐ Child Restraint ☐ Lap-Held ☐ Unknown

FLIGHT ITINERARY INFORMATION					
Last Departure Point Airport ID: <u>KSMX</u> City: <u>SANTA MARIA</u> State: <u>CA</u> Country: <u>USA</u>		Time of Departure Time: <u>2204</u> Time Zone: <u>PST</u>		Destination Airport ID: <u>KIWA</u> City: <u>MESA</u> State: <u>AZ</u> Country: <u>USA</u>	
Type Flight Plan Filed ☐ None ☐ Company VFR ☐ Military VFR ☐ VFR ☒ VFR/IFR ☐ IFR ☐ Unknown Activated? ☒ Yes ☐ No ☐ Unknown					
Type of ATC Clearance/Service (Check all that apply) ☐ None ☐ VFR ☐ Special VFR ☒ IFR ☐ Special IFR ☒ VFR On Top ☒ VFR Flight Following ☐ Traffic Advisory ☐ Cruise ☐ Unknown / NA					
Airspace where the accident/incident occurred (Check all that apply) ☐ Class A ☐ Class B ☐ Class C ☒ Class D ☒ Class E ☐ Class G ☐ Demo Area ☐ Warning Area ☐ Prohibited Area ☐ Restricted Area ☐ Military Operations Area (MOA) ☐ Airport Advisory Area ☐ Jet Training Area ☐ TRSA ☐ FAR 93 Altitude of In-Flight Occurrence: <u>1500</u> ft msl					
WEATHER INFORMATION AT THE ACCIDENT/INCIDENT SITE					
Source of Pilot Weather Information (Check all that apply) ☒ National Weather Service ☐ Flight Service Station ☐ TV/Radio ☐ Automated Report ☐ Commercial Weather Service (DUATS) ☐ On-Board Weather			Weather Observation Facility Facility ID: <u>KSBA</u> Observation Time: <u>UNKNOWN</u> Time Zone: <u>PACIFIC</u> Distance from Accident Site: <u>N/A</u> nm Direction from Accident Site: <u>N/A</u> degrees true		
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: <u>18</u> (C) or _____ (F) Dew Point: <u>16</u> (C) or _____ (F) Altimeter Setting: <u>29.91</u> in. Hg or _____ MB	
Wind Direction ☐ Variable -or- Direction: <u>080</u> degrees true	Wind Speed ☐ Calm ☐ Light and Variable -or- Speed: <u>04</u> kts	Wind Gusts ☒ Not Gusting -or- Speed: _____ kts	Visibility <u>9</u> miles RVR: _____ feet RVV: _____ miles Density Altitude: _____ ft		
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	
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	
NOTAMS (D and FDC), AIRMETs, SIGMETs, PIREPs in effect at the time of the accident/incident: <u>UNKNOWN AT THAT TIME</u>					

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)*

EXTERNAL FUEL TANK ATTACHED TO RIGHT OUTER WING IMPACTED GROUND FOLLOWING TOUCHDOWN OF LEFT MAIN LANDING GEAR AND THEN SEPARATED FROM AIRCRAFT AND CAUGHT FIRE AWAY FROM AIRCRAFT. EXTERNAL FUEL PYLON ON RIGHT WING REMAINED ATTACHED TO AIRCRAFT. PROPELLERS #3 AND #4 DAMAGED FROM IMPACT WITH GROUND. ENGINE #3 AND #4 STATUS UNKNOWN. EXTENSIVE EXTERNAL DAMAGE ON RIGHT HAND LOWER FUSELAGE AND VENTRAL SURFACE BEGINNING JUST AFT OF COCKPIT AND PROCEEDING TO CARGO RAMP HINGE (NEAR TAIL). EXTERNAL DAMAGE RIGHT MAIN LANDING GEAR BAY. PUNCTURE HOLES IN RIGHT OUTER WING 7 FEET INBOARD OF WINGTIP. WRINKLES IN AIRCRAFT SKIN NEAR FUSELAGE FRAMES 245 AND 737 (POSSIBLY DUE TO SLINGING OF AIRCRAFT FOR PURPOSE OF MOVEMENT FOLLOWING ACCIDENT. HEAT DAMAGE TO RIGHT EXTERNALLY ACCESSED FUSELAGE BAY IN

**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 and location, services obtained, and intended destination. Provide as much detail as possible.

SEE ATTACHED NARRATIVE OF FLIGHT SIGNED BY PILOT-IN-COMMAND MARK REBHOLZ.

RECOMMENDATION (How could this accident/incident have been prevented?)

Operator/Owner Safety Recommendation

UNKNOWN AT THIS TIME. LIKELY FAILED PARTS ARE BEING INSPECTED DO DETERMINE CAUSE OF FAILURE. COMPANY ACCIDENT INVESTIGATION IN PROCESS AT THIS TIME IN ACCORDANCE WITH COMPANY SAFETY MANAGEMENT SYSTEM PROCEDURES. RECOMMENDATIONS CAN BE PROVIDED UPON REQUEST FOLLOWING COMPLETION OF INVESTIGATION.

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.)

THERE APPEARS TO HAVE BEEN A BLEED AIR DUCT FAILURE WHICH IMPACTED MULTIPLE OTHER SYSTEMS. COMPANY ACCIDENT INVESTIGATION IN PROCESS AT THIS TIME IN ACCORDANCE WITH COMPANY SAFETY MANAGEMENT SYSTEM PROCEDURES. RESULTS CAN BE PROVIDED UPON REQUEST FOLLOWING COMPLETION OF INVESTIGATION.

Total Time/Cycles
On Part

TBD _____ Hours

TBD _____ Cycles

Time Since This Part
Inspected/Overhauled

TBD _____ Hours

FUEL & SERVICES INFORMATION

Fuel on Board at Last Takeoff

(Convert from pounds, as necessary)

4100 _____ Gallons

Fuel Type

☐ 80/87☐ 115/145☐ Jet B☐ Other, specify _____☐ 100 Low Lead☒ Jet A☐ JP8☐ 100/130☐ Jet A-1☐ Automotive

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

ALL SEVEN CREW MEMBERS EXITED USING THE CREW ENTRY DOOR.

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

Pilot of Other Aircraft

Name: _____

Name: _____

City: _____

City: _____

State: _____ ZIP: _____

State: _____ ZIP: _____

Country: _____

Country: _____

ADDITIONAL INFORMATION (Please type or print in ink)

Use this space if additional space is needed for any answers.

ISSUANCE OF REPORT DELAYED BY OPERATOR DUE TO OPERATOR TRAVEL TO ACCIDENT LOCATION TO SURVEY
AIRCRAFT DAMAGE AND MEET WITH INVESTIGATING FAA VAN NUYS FSDO ON 9/16/2019

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

Date of this Report

09192019

mm/dd/yyyy

Name of Pilot/Operator: William N Grantham (Operator)

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.

WPR19LA242

Reviewed by NTSB Regional Office

AS-WPR

Name of Investigator

Tealeye Cornejo

Date Report Received

09/19/19

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 <i>(Use additional sheet if necessary)</i>		
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 and location, services obtained, and intended destination. Provide as much detail as possible. We blocked in to Santa Maria at 0410Z (2110L) Sunday evening August 25, 2019. We had just completed a Pacific crossing from Hilo, and we were stopping for fuel and a short rest break for the crew. Our plan was to continue on the final leg to Mesa-Gateway Airport near Phoenix. Our crew included myself as Captain, two First Officers, two Flight Engineers, and two flight mechanics. We were an augmented crew to allow us to fly the long duty periods required for international over-water legs. The flight was operated on a Special Airworthiness Certificate ferry flight to our maintenance base in Mesa for an inspection. We had to fly an ILS approach to KSMX because of coastal fog. After fueling at KSMX, we requested from Santa Barbara Approach an IFR clearance to VFR conditions on top. We departed KSMX, contacted SBA, and cancelled IFR as soon as we broke out on top. Very soon after cancelling IFR we heard a loud popping noise, and those in the cargo compartment called it a loud bang. At the same time we noticed the torque gages giving unusual and fluctuating readings. We immediately suspected a pneumatic duct problem. A crew member in the cargo compartment then announced that we had misting hydraulic fluid mixed with smoke in the cargo compartment. We also began seeing fire-warning lights in the T-handles and other anomalies. The crew members in the cargo compartment began donning supplemental oxygen. The cockpit crew turned off the four engine bleeds. We noticed the utility hydraulic pressure fluctuating, and a crew member advised we should lower the landing gear before we experienced a total utility system failure. We lowered the gear, and noticed the nose gear came down quickly, followed by the left main. The right main took quite a bit longer. As soon as we had all three green indications we turned off the numbers 2 and 4 hydraulic pumps. We also checked that we were depressurized, then selected Aux Vent and removed the cockpit overhead hatch for ventilation. I directed the fresh air vent directly on my face, and the other crew members donned their oxygen masks. I notified SBA that we were experiencing a hydraulic system problem, and multiple other problems, and requested the KSBA weather. The airport was VFR, so I chose to divert to KSBA rather than attempt an ILS into Santa Maria. I declared an emergency and requested radar vectors for terrain clearance. I then noticed the aircraft was yawing back and forth, and the number 4 engine RPM gage indicated wild fluctuations of 20-30%. We had so many anomalies I didn't want to take the time to troubleshoot the RPM fluctuations, and I suspected it had something to do with the blown pneumatic duct. The numbers 3 and 4 fire handles were illuminated, indicating fires on those engines. I directed the co-pilot and Flight Engineer to feather number four engine. The yawing stopped as soon as the engine was secured. I was flying a radar vector heading from Santa Barbara Approach, and advised them that we were now on three engines. I was concerned with terrain clearance and flew at the three-engine climb speed posted on the TOLD card. I advised the crew that we would not shut down any more engines unless we had secondary indications and a greater emergency. As we climbed I was able to identify the lights of Santa Barbara, and then the rotating beacon of the airport. The SBA controller handed us off to the tower controller. As soon as I was assured of clearing the terrain northwest of the airport I began a descent for runway 7. The runway was in sight, and I maneuvered the aircraft for a visual approach. I advised the tower that I would be making S turns to lose altitude, and that we had no flaps, therefore a fast approach speed, and we would likely use the full length of the runway. While descending I asked the crew to review the QRH to see if we had missed any items on the abnormal procedures, and also directed them to try an alternate means to get some partial flaps. At this time we had no utility system, meaning no flaps, no brakes, and no nose wheel steering. We also had no emergency system because of the loss of pneumatic duct pressure that drives the emergency system hydraulic pump. I also briefed that upon landing I would reverse the inboard engines only. Crew members reported to me that the cargo compartment had smoke and misting hydraulic fluid, and I found out after landing that all crew members were in the cockpit to escape the toxic smoke and fumes. We touched down on speed in the touchdown zone and I applied full inboard reverse as soon as the nose wheel touched. I had no difficulty maintaining the centerline. However, the right wing began to drop and the aircraft drifted to the right. I applied full left rudder, and began using number 1 engine reverse to try to keep the aircraft on the runway. I was able to slow the divergence from the runway, but we continued to the right and departed the right side of the runway. As we came closer to the parked aircraft at the airline terminal I gave up on stopping the right turn and initiated a ground loop to the right, which was easy because the wing was dragging on the ground. The aircraft stopped after turning about 270 degrees to the right of the runway heading. The crew evacuated the aircraft, then a flight engineer returned to the aircraft with a firefighter and disconnected the aircraft battery. I was the last crew member to exit the aircraft, and as I exited I saw a fire burning about a quarter mile away near the runway. At that time I didn't know what the fire was, and I found out later it was our right side external pylon fuel tank which had departed the wing when the right main gear failed. The tank was empty except for unusable fuel. The entire flight, from takeoff in Santa Maria to landing in Santa Barbara was only about 15 minutes long. Each of the crew members on the aircraft participated in the troubleshooting and resolution of the emergencies we experienced, and they all contributed with sound advice and actions. The combined experience of every crew member resulted in a successful emergency landing in trying conditions.		
Mark Rebholz, Captain 08-31-2019		