

National Transportation Safety Board

RELEASE OF AIRCRAFT WRECKAGE

ACCIDENT IDENTIFICATION
NUMBER

WPR22LA259

PART 1 -- RELEASE OF AIRCRAFT

REGISTERED OWNER (name and address) Zachary Waznicki [REDACTED] SAN JUAN CAPO, CA 92675		REGISTRATION NUMBER -- N N718TB
		MAKE Socata
MODEL TB20	DATE OF ACCIDENT 07-17-2022	LOCATION San Marcus, 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 Senior Air Safety Investigator	DATE 01-10-2024
---	--	---------------------------

(This section may be signed by a person, not the owner's representative, who has the knowledge of the disposition of the 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]	TITLE	DATE
--------------------------------	--------------	-------------

REMARKS

National Transportation Safety Board RECEIPT OF AIRCRAFT PARTS	ACCIDENT IDENTIFICATION NUMBER WPR22LA259
--	---

PART II -- RELEASE OF AIRCRAFT

REGISTRATION NUMBER N718TB	MAKE Socata	MODEL TB20
DATE OF ACCIDENT 07-17-2022	LOCATION San Marcus, 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 Senior Air Safety Investigator	DATE 01-10-2024
--	--	-------------------------------

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

SIGNATURE OF OWNER OR OWNER'S REPRESENTATIVE ADDRESS	TITLE	DATE
---	--------------	-------------