

32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1																																																																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32																																																																
<p style="text-align: center;">NATURE OF ACCIDENT</p>																																																																																															
<p style="text-align: center;">CAUSES OF ACCIDENTS:</p>																																																																																															
<p>PILOT OTHERS AIRFRAME FAILURE</p>																<p>ENGINE FAILURE</p>																																																																															
<p>UNIT 11 E.F.T.S.</p>																<p>COM. PLACE</p>																																																																															
<p>Cap de la Madeleine No. 3</p>																<p>L Mi. N.W. of Aerodrome</p>																																																																															
<p>DATE 1-8-41 TIME 1930</p>																<p>H.O. FILE 1100-46-16</p>																																																																															
<p>A/C TYPE Finch</p>																<p>No. 4616 CRASH CAT. C 14</p>																																																																															
<p>SE X ME</p>																<p>DAY X NIGHT</p>																																																																															
<p>NAME</p>																<p>RANK</p>				<p>No.</p>				<p>DUTY</p>				<p>INJURIES</p>				<p>SERIOUS</p>																																																															
<p>Zary, H.P.M.</p>																<p>LAC</p>				<p>R95580</p>				<p>P</p>				<p>Uninjured</p>				<p>FATAL INJURY</p>																																																															
<p>CARD SERIAL No.</p>																<p>OTHER</p>																																																																															
<p>TYPE A/F & ENGINE</p>																<p>No.</p>				<p>EXTENT OF DAMAGE</p>				<p>REPORT FORM</p>				<p>SERIAL No.</p>				<p>DATE</p>				<p>HOURS FLOWN BY PILOTS</p>																																																											
<p>Finch</p>																<p>4616</p>				<p>Seriously</p>				<p></p>				<p></p>				<p>INST. NIGHT</p>		<p>ON TYPE</p>				<p>TOTAL</p>				<p>LAST 6 MOS</p>																																																					
<p>Kinner</p>																<p>1829/6479 Nil</p>				<p></p>				<p></p>				<p></p>				<p></p>		<p>19 27 19 27</p>				<p></p>																																																									
<p>SIGNAL No. & DATE</p>																<p>UNIT No. & DATE</p>																<p>COM. No. & DATE</p>																<p>REPORT</p>																<p>FILE</p>																<p>DATE</p>															
<p>674 27-8-41</p>																<p></p>																<p></p>																<p></p>																<p></p>																<p></p>															

TYPE OF A/C

TYPE OF ENGINE

CATEGORY

MISCELLANEOUS CAUSES

STAGE OF FLIGHT

TECH.
 DISOB.
 NEG INCE
 INEXP INCE
 MISCEL.
 INSTRUCT.
 FLT. CNTR.
 OTHERS
 PRIMARY
 FL. CONTS.
 MOV. SURFS.
 STAB. SURFS.
 W. STRUTS
 LAND GEAR
 FLOATS
 FUSE OR HULL
 TAIL SKID OR W.
 ENGINE MOUNT.
 MISCEL.
 UND/TD
 PRIMARY
 FUEL SYS.
 COOL SYS.
 IGNIT SYS.
 LUBN SYS.
 ENG. STR.
 AIRSCREW A.
 ENG. CONTS.
 MISCEL.
 UNKNS.
 PRIMARY
 HAND Q.
 INSTS.
 WEATHER
 AL'G SURF.
 OTHER
 UND/TD
 PRIMARY
 TAXING
 LANDING
 TAKE OFF
 FLIGHT
 STATRY
 FATAL
 INJ.
 3rd.
 INJURY

DUTY ON WHICH ENGAGED:

Solo practice

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

Monthly Accident Return R170

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

COMPOSITION:

OFM/AOP/ES/OK/NK/O

Engine failed on take off and aircraft forced landed into some trees and overturned

RECOMMENDATIONS:

PRIMARY CAUSE:

Engine failure on take-off.
Pilot forced landed into trees.

ACTION TAKEN:

(A) DISCIPLINARY (B) TECHNICAL (C) OTHER

Immediate action is being taken to inspect all similar controls on a/c of this unit.

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

Aircraft struck trees and overturned

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____