

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
PILOT		OTHERS		AIRFRAME FAILURE										ENGINE FAILURE																	
CAUSES OF ACCIDENTS																															
UNIT #12 T.D.		COM. I		PLACE FORT ERIE		DATE 5-6-41		TIME 12:00																							
TORONTO, ONTARIO						H.Q. FILE 1100-35-61																									
A/C TYPE ██████████ "FORT"		No. 3561		CRASH CAT. C		SE X		ME		DAY X		NIGHT																			
NAME				RANK		No.		DUTY		INJURIES				SERIOUS																	
CARR-HARRIS B.G.				W/C		C52		P		UNINJURED.				FATAL INJURY																	
												CARD SERIAL NO.																			
TYPE A/F & ENGINE		No.		EXTENT OF DAMAGE		REPORT FORM		SERIAL No.		DATE		HOURS FLOWN BY PILOTS																			
FLEET		3561										INST. NIGHT		ON TYPE		TOTAL		LAST 6 MOS.													
KINNER														DUAL SOLO		DUAL SOLO															
SIGNAL No. & DATE		UNIT No. & DATE		COM. No. & DATE		REPORT		FILE		DATE		STAGE OF FLIGHT																			
		T141 5-6-41										MISCELLANEOUS CAUSES																			
NATURE OF ACCIDENT																															
DISOB. TECH. NEG. NCE. INEXP. NCE. MISCEL. INSTRUCT. FLT. CONTR. OTHERS. PRIMARY. FL. CONTRS. 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. LUB'N SYS. ENG. STR. AIRSCREW A. ENG. CONTRS. MISCEL. UND/TD. ✓ HAND O. INSTS. WEATHER. DRKNS. ALG SURF. OTHER. UND/TD. PRIMARY. TAXING. LANDING. TAKE-OFF. FLIGHT. STAIRY. FATAL. INJ. 3RD.																															

DUTY ON WHICH ENGAGED:

TEST FLIGHT.

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

FORCED LANDING WITH THE FAIRING DOWN AND COVERING ONE WHEEL. AIRCRAFT NOSED OVER.

PRIMARY CAUSE:

MECHANISM FOR RETRACTABLE FAIRING ON STARBOARD WHEEL FAILED TO OPERATE.

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

DATE:

COMPOSITION:

FB/UDM

RECOMMENDATIONS:

ACTION TAKEN:

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

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____