

32	JU.	TECH.	DISOB.	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	PRIMARY	HAND Q.	INSTS.	WEATHER	DRKNS.	ALG SURF.	OTHER	UNTD	PRIMARY	TAKING	LANDING	TAKE-OFF	FLIGHT	FATAL	INJ.	3rd.	2	1																																																			
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	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1																																																			
3	4	7	1	2	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	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
TYPE OF A/C		CAUSES OF ACCIDENTS										MISCELLANEOUS										STAGE OF FLIGHT																																																																														
PILOT		AIRFRAME FAILURE										ENGINE FAILURE										MISCELLANEOUS																																																																														
OTHERS		CAUSES OF ACCIDENTS										MISCELLANEOUS										STAGE OF FLIGHT																																																																														
UNIT 113 FIGHTER SQUAD.		COM. EAC		PLACE AERODROME				DATE 5-2-41		TIME 1045		MISCELLANEOUS																																																																																								
DARTMOUTH, N.S.		EAC		AERODROME				H.O. FILE 100-3-85				MISCELLANEOUS																																																																																								
A/C TYPE GOBLIN		No. 345		CRASH CAT. 8		SE X		ME		DAY X		NIGHT		MISCELLANEOUS																																																																																						
NAME		RANK		No.		DUTY		INJURIES		SERIOUS		FATAL		INJURY		MISCELLANEOUS																																																																																				
TWILE,		P/O		C 1328		P		UNINJURED								MISCELLANEOUS																																																																																				
TYPE A/F & ENGINE		No.		EXTENT OF DAMAGE		REPORT FORM		SERIAL No.		DATE		HOURS FLOWN BY PILOTS																																																																																								
GOBLIN		345		Seriously								INST. NIGHT		ON TYPE		TOTAL		LAST 6 MOS		HOURS FLOWN BY PILOTS																																																																																
WRIGHT		29802/3138		Seriously								13 7		- 19 20		303				HOURS FLOWN BY PILOTS																																																																																
SIGNAL No & DATE		UNIT No & DATE				COM. No & DATE				REPORT		FILE		DATE		HOURS FLOWN BY PILOTS																																																																																				
A 5		5-3-41														HOURS FLOWN BY PILOTS																																																																																				
NATURE OF ACCIDENT																																																																																																				

DUTY ON WHICH ENGAGED:

DIVE BOMBING CO-OP. WITH R.N.

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

UNDERCARRIAGE COLLAPSED ON LANDING AND
AIRCRAFT TURNED OVER ON ITS BACK.

DATE:

Monthly Accident Return.

COMPOSITION:

COURT OF INQUIRY

16-8-41

FLIGHT LIEUTENANT MICHALSKI (C1584)

FLYING OFFICER R.D. McROBERTS (C2177)

FLYING OFFICER T.R.C. MAYHEW (C4292)

RECOMMENDATIONS:

L. O. / 100 / 1000 w/ 1000

PRIMARY CAUSE:

UNDERCARRIAGE FAILED TO FUNCTION
PROPERLY. PILOT MADE AN ERROR IN HIS
COCK-PIT CHECK, IN THAT HE DID NOT ASCERTAIN
FULLY AS TO THE U/C BEING IN THE FULLY DOWN
AND LOCKED POSITION PRIOR TO LANDING.

ACTION TAKEN:

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

THAT A SUITABLE LIGHTING OR HORN SYSTEM BE INSTALLED
TO INDICATE WHEN WHEELS ARE FULLY DOWN AND LOCKED
AND IN THE FULLY UP POSITION.

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____