

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						
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
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						
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
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 # 4 B & G			COM. 1		PLACE Aerodrome			DATE 3-9-41		TIME 11:45				
Fingal Ontario			1		Aerodrome			H.Q. FILE 1100-17-19						
A/C TYPE Battle			No. 1719		CRASH CAT. C		SE x	ME	DAY x	NIGHT				
NAME			RANK	No.	DUTY	INJURIES			SERIOUS					
Warren J.F.			F/O C	2364	P	Uninjured.			FATAL	INJURY				
Gallagher E.G.			F/O C	377	OC	Uninjured.								
Colter E.L.			LAC	R61640	AFM	Uninjured.								
									CARD SERIAL NO.					
TYPE A/P & ENGINE		No.	EXTENT OF DAMAGE		REPORT FORM	SERIAL No.	DATE	HOURS FLOWN BY PILOTS						
Battle		1719	SLIGHT					INST.	NIGHT	ON TYPE		TOTAL		LAST 6 MOS.
Merlin		2715	SLIGHT			WARREN				DUAL	SOLO	DUAL	SOLO	124
SIGNAL No & DATE		UNIT No & DATE		COM No & DATE		REPORT		FILE		DATE				
		A 39 3-9-41												
NATURE OF ACCIDENT														

CAUSE OF ACCIDENTS
 MISCELLANEOUS
 FLIGHT

PRIMARY
 HAND O.
 INSTS.
 WEATHER
 DRKNS.
 ALG SURF.
 OTHER
 UNDTD
 PRIMARY
 TAXTING
 LANDING
 TAKE-OFF
 FLIGHT
 STABRY
 FATAL
 INJ.
 INJURY
 3RD
 INJURY
 2ND
 INJURY

DUTY ON WHICH ENGAGED:

Test flight.

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

**Forced landing on aerodrome
with wheels retracted due to glycol
failure resulting in over-heated
engine.**

PRIMARY CAUSE:

Failure of glycol cooling system.

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

FORCED LANDDD WITH WHEELS RETRACTED

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

R 170

DATE:

COMPOSITION:

1 B / 7 / 10 / 12 / 13

RECOMMENDATIONS:

100/13

NIL

ACTION TAKEN:

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

NIL

RECORDED BY _____ DATE _____

CHECKED BY _____ DATE _____