

32 P	31 JU	30 TECH.	29 DISOB.	28 NEG'NCE	27 INEXP'NCE	26 MISCELL.	25 INSTRUCT.	24 FLT. CONTR.	23 OTHERS	22 PRIMARY	21 FL. CONTRS.	20 MOV. SURFS.	19 STAB. SURFS.	18 W. STRUTS	17 LAND. GEAR	16 FLOATS	15 FUSE OR HULL	14 TAIL SKID OR W.	13 ENGINE MOUNT.	12 MISCEL.	11 UNDT/D	10 PRIMARY	9 FUEL SYS.	8 COOL SYS.	7 IGNIT. SYS.	6 LUB'N SYS.	5 ENG. STR.	4 AIRSCREW A.	3 ENG. CONTRS.	2 MISCEL.	1 UNDT/D	19 HAND O.	18 PRIMARY	17 INSTS.	16 WEATHER	15 DRKNS.	14 ALG SURF.	13 OTHER	12 UNDT/D	11 PRIMARY	10 TAXIING	9 LANDING	8 TAKE-OFF	7 FLIGHT	6 STATION	5 FATAL	4 FATAL	3 INU.	2 3rd.	1 INU.
PILOT		OTHERS			AIRFRAME FAILURE										ENGINE FAILURE																																			
CAUSES OF ACCIDENTS																																																		
UNIT 15 S.F.T.S.										COM. 4		PLACE Woodhouse Relief Field						DATE 27-1-42		TIME 1400																														
A/C TYPE Crane										No. 8685		CRASH CAT. C 2		SE		ME X		DAY X		NIGHT		H.Q. FILE 1100-86-85																												
NAME Wark, A.M.										RANK LAC		No. R118247		DUTY P.		INJURIES Uninjured.						SERIOUS																												
																				FATAL		INJURY																												
																								CARD SERIAL No.																										
TYPE A/F & ENGINE		No.		EXTENT OF DAMAGE		REPORT FORM		SERIAL No.		DATE		HOURS FLOWN BY PILOTS																																						
												INST. NIGHT		ON TYPE				TOTAL		LAST 6 MOS.																														
Crane		8685		Slight										1 1		63 56																																		
Jacobs Fort 8131				Nil																																														
Jacobs Stbd. 8130				Slightly																																														
SIGNAL No. & DATE				UNIT No. & DATE				COM. No. & DATE				REPORT				FILE				DATE																														
A 3				28-1-42																																														
NATURE OF ACCIDENT																																																		

MISCELLANEOUS CAUSES
 STAGE OF FLIGHT

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

Precautionary landing.

OR COMMANDING OFFICER'S REPORT:

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE: **R170**

Ground loop left after landing.

COMPOSITION:

LS/PSS/035

U/C accident

RECOMMENDATIONS:

Nil

PRIMARY CAUSE:

~~Inexperience. Incorrect use of controls
in landing.~~

2. Swing

2

ACTION TAKEN:

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

**Log Book endorsed in accordance with C.A.P.
100, Sec.4, Para.25.**

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

~~Inexperience.~~

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____