

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 37 S.F.T.S.										COM. *4										PLACE CALGARY AIRPORT.										DATE 23-10-42		TIME 1045			
CALGARY, ALBERTA										*4										CALGARY AIRPORT.										H.O. FILE 1300-AJ903					
A/C TYPE HARVARD II										No. AJ903										CRASH CAT. C 4		SE x		ME		DAY x		NIGHT							
NAME										RANK		No.		DUTY		INJURIES						SERIOUS													
MANKS, W.H.H.										GB		P/O		119124		F.I.		NIL						FATAL		INJURY									
TIMMS, S.D.										GB		SGT		1315319		PP		NIL																	
																						CARD SERIAL NO.													
TYPE A/F & ENGINE										No.		EXTENT OF DAMAGE		REPORT FORM		SERIAL No.		DATE		HOURS FLOWN BY PILOTS															
HARVARD II										AJ903		Slightly								INST. NIGHT		ON TYPE		TOTAL		LAST 6 MOS.									
Wasp 11541/A213812										NIL.										DUAL SOLO		DUAL SOLO													
SIGNAL No. & DATE										UNIT No. & DATE										COM. No. & DATE										REPORT		FILE		DATE	
161										23-10																									
NATURE OF ACCIDENT																																			

MISCELLANEOUS
 CAUSES
 STAGE OF FLIGHT

HAND O.
 INSTS.
 WEATHER
 DRKNS.
 ALG SURF.
 OTHER
 UNDTD
 PRIMARY
 TRYING
 LANDING
 TAKE-OFF
 FLIGHT
 STATRY
 FATAL
 INJ
 3rd
 INJURY

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

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COMPASS SWINGING.

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

200/01 ✓

LANDED WITH UNDERCARRIAGE RETRACTED.

COMPOSITION:

Impossible to lower U/C. Pilot given permission to land with U/C retracted.

RECOMMENDATIONS:

PRIMARY CAUSE:

~~Mechanical failure.~~

Miss. Technical.

ACTION TAKEN:

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

NIL.

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

~~Landed with U/C retracted.~~

U/C defect

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____