

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																												
TECH.		DISOB.		NEG'VE		INEXP'CE		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	
PILOT				OTHERS				AIRFRAME FAILURE								ENGINE FAILURE																																											
CAUSES OF ACCIDENTS																																																											
UNIT No. 1. SPTS. (ITS)				COM.				PLACE Camp Borden.								DATE 28-9-40				TIME 10.40																																							
A/C TYPE Yale				No. 3398				CRASH CAT. C.2.				SE <input checked="" type="checkbox"/>		ME		DAY <input checked="" type="checkbox"/>		NIGHT																																									
NAME Young, R.				RANK LAC		NO. R65510P		DUTY Pilot		INJURIES Uninjured								SERIOUS FATAL INJURY																																									
																		CARD SERIAL No.																																									
TYPE A/F & ENGINE Yale				No. 3398				EXTENT OF DAMAGE				REPORT FORM				SERIAL No.				DATE				HOURS FLOWN BY PILOTS																																			
				Whirlwind																				INST.		NIGHT		ON TYPE		TOTAL		LAST 6 MOS.																											
SIGNAL No. & DATE 270 28-9-40				UNIT No. & DATE 3300 28-9-40				COM. No. & DATE				REPORT				FILE				DATE																																							
NATURE OF ACCIDENT																																																											

MISCELLANEOUS CAUSES

STAGE OF FLIGHT

- 16 HAND Q.
- 17 INSTS.
- 18 WEATHER
- 19 DRINKS.
- 20 AL'G SURF.
- 21 OTHER
- 22 UND'TD
- 23 PRIMARY
- 24 TAXING
- 25 LANDING
- 26 TAKE-OFF
- 27 FLIGHT
- 28 STATION
- 29 FATAL
- 30 INJ.
- 31 3RD.
- 32 INJURY

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

LS/PSW/PSS

Flying Training Intermediate.

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

Landing. Aircraft landed out of wind
& ground looped.

COMPOSITION:

RECOMMENDATIONS:

PRIMARY CAUSE:

Landed out of wind.

ACTION TAKEN:

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

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____