TECHNICAL REPORT OF U.S. ARMY AIRCRAFT ACCIDENT

PART VII - IN-FLIGHT OR TERRAIN IMPACT AND CRASH DAMAGE DATA

For use of this form, see AR 385-40 and DA Pamphlet 385-40; the proponent agency is OCSA

REQUIREMENTS CONTROL SYMBOL
CSOCS-309

1. IN-FLIGHT COLLISION KINEMATICS AT INSTANT OF IMPACT

a. Airspeed At Impact *(knots)*

b. Vertical Speed *(feet per minute)* _____
☐ Up ☐ Down

c. Flight Path Angle *(degrees)* _____
☐ Up ☐ Down

d. In-Flight Attitude At Impact

(1) Pitch Angle

Degrees _____ ☐ Up ☐ Down

(2) Roll Angle

Degrees _____ ☐ Left ☐ Right

e. Obstacle Identity And Collision Height

Obstacle	Collision Height Above Ground *(feet)*
(1) ☐ Birds	
(2) ☐ Aircraft	
(3) ☐ Wires/Cables	
(4) ☐ Vehicles	
(5) ☐ Tree	
(6) ☐ Other	

f. Obstacle Strike Sequence *(Enter 1, 2, 3, etc. to show sequence of strike)*

_____ Prop/Rotor	_____ Landing Gear
_____ Rotor Mast	_____ Wing
_____ Tail Rotor	_____ Empennage
_____ Tail Boom	_____ WSPS
_____ Windscreen	_____ FLIR
_____ LWR Nose/Gun Turret	_____ Other *(Specify)*

g. Obstacle Conspicuity *(Within accident distance from pilot?s position, the obstacle in its surroundings was obscured)*

(1) ☐ Completely (2) ☐ Partially (3) ☐ Not Obscured

h. Wire or Cable Description

Type	Dia In Inches	No. Struck
(1) Power Transmission		
(2) Telephone or TV		
(3) Bracing *(guy/support)*		
(4) Other *(Specify)*		

i. WSPS (1) Installed ☐ Yes ☐ No (2) Cut Wire ☐ Yes ☐ No

j. Obstacle Struck Other Than Wire *(diameter in inches)*

2. TERRAIN COLLISION KINEMATICS AT INSTANT OF MAJOR IMPACT

a. Ground Speed at Impact _____ *(knots)*

b. Vertical Speed
☐ Up ☐ Down _____ *(FPM)*

c. Flight Path Angle
☐ Up ☐ Down _____ *(degrees)*

d. Indicate by Check Marks Which Two of The Three Preceding Parameters *(a, b, c)* Are The Most Accurate
a. ☐ b. ☐ c. ☐

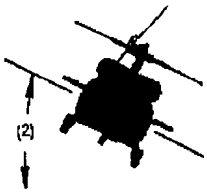
e. Impact Angle _____ *(degrees)*

f. Attitude at Major Impact

(1) Pitch

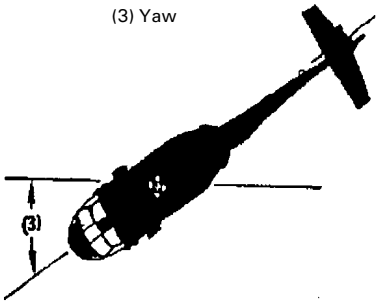
Degrees _____ ☐ Up ☐ Down

(2) Roll



Degrees _____ ☐ Left ☐ Right

(3) Yaw



Degrees _____ ☐ Left ☐ Right

3. ROTATION AFTER MAJOR IMPACT

a. Did Aircraft Rotate About Any Axis After The Above Major Impact *(If yes, complete items b, c, and d)*
☐ Yes ☐ No ☐ Unknown

b. Roll Degrees
☐ Left ☐ Right Degrees _____

c. Yaw Degrees
☐ Left ☐ Right Degrees _____

d. Pitch Degrees
☐ Up ☐ Down Degrees _____

4. IMPACT FORCES RELATIVE TO AIRCRAFT AXES *(G's)*

a. Vertical *(G's)*
☐ Up ☐ Down G's _____

b. Longitudinal *(G's)*
☐ Fore ☐ Aft G's _____

c. Lateral *(G's)*
☐ Left ☐ Right G's _____

5. CASE NO.	a. Date *(YYMMDD)*	b. Time	c. Acft Serial No.	6. OTHER ACFT SERIAL NO.

7. FUSELAGE INWARD DEFORMATION OR COLLAPSE AND INJURY RELATIONSHIP *(Check appropriate boxes)*

Fuselage Area	Amount or Type of Deformation or Collapse	Specific Area of Deformation or Collaspse				Fuselage Deformation Produced/Contributed to Injury			
		Cockpit (1)	Forward Cabin Area (2)	Mid Cabin Area (3)	Rear Cabin Area (4)	Cockpit (5)	Forward Cabin Area (6)	Mid Cabin Area (7)	Rear Cabin Area (8)
a. Roof	Up to 1 Foot								
	More Than 1 Foot But Less Than 3 Feet								
	More Than 3 Feet Foot								
b. Left Side	Up to 1 Foot								
	More Than 1 Foot								
c. Right Side	Up to 1 Foot								
	More Than 1 Foot								
d. Nose	Up to 1 Foot								
	More Than 1 Foot								
e. Floor	Up to 1 Foot								
	More Than 1 Foot								
f. Floor *(local deformation under seats)*	Vertical								
	Sideward								
	Forward/Rearward								

8. LARGE COMPONENT DISPLACEMENT *(Check appropriate boxes)*

Component	Displaced (1)	Torn Free (2)	Cockpit Penetrated/Entered (3)	Cabin Penetrated/Entered (4)
a. Transmission *(forward or main)*				
b. Transmission *(rear)*				
c. Rotor Blade *(forward or main)*				
d. Rotor Blade *(rear or tail)*				
e. Landing Gear *(specify location)*				
f. Other *(specify)*				

9. POSTCRASH FLAMMABLE FLUID SPILLAGE

a. Equipped With Crashworthy Fuel System ☐ Yes ☐ No

b. If So Equipped, Did Breakaway Valves Separate as Designed ☐ Yes ☐ No ☐ NA

c. Flammable Fluid Spillage Occurred ☐ Yes ☐ No

d. Auxiliary Fuel Tanks Installed ☐ Yes ☐ No ☐ Internal ☐ External Crashworthy ☐ Yes ☐ No

e. Amount and Type Fluid Spilled

Gallons	Fuel *(Type)*	Oil *(Type)*	Hyd Fluid *(Type)*	Other *(Specify)*
0 - 1				
> 1 - 2				
> 2 - 10				
> 10 - 20				
> 20				

10. SPILLAGE SOURCE

Part	a. Part Name/Nomenclature	b. Part Number	c. National Stock No.
(1) Cell/Tank/Reservoir			
(2) Filter			
(3) Fitting			
(4) Fluid Line			
(5) Value			
(6) Breakaway Valve			
(7) Other *(Specify)*			
(8) Other *(Specify)*			
(9) Other *(Specify)*			

11. REMARKS