



National Transportation Safety Board

Washington, D.C. 20594

11-19-86

Dear Mr. Rodina:

Your request for information has been received by the National Transportation Safety Board, Accident Inquiries Section. The checked paragraph(s) indicates the action taken.

- (X) The requested accident report is still under investigation. The factual portion of the accident report will be completed within seven (7) months from the date of the accident. The probable cause report will be completed within 13 months of the date of the accident. However, you will receive a status report in the event that the above timeframes are not met.

I have enclosed for your immediate information a copy of the Preliminary Resume report (6120.19) concerning the accident you requested. This is the only information available at this time.

- () In order to comply with your request, the following information is needed.
- Date of the accident;
 - Location of the accident;
 - Registration number of the aircraft (if applicable); and
 - Pilot/Operator's name (if applicable).
- () Enclosed is a copy of the National Transportation Safety Board's factual report of the investigation.
- () Enclosed is a copy of the National Transportation Safety Board's determination of the probable cause.
- () A copy of the determination of probable cause will be sent to you when it has been released by the National Transportation Safety Board.

If I can be of further or future assistance, please contact me on (202) 382-6735

Sincerely,

Cathleen Gilbert

AA

National Transportation Safety Board
**PRELIMINARY REPORT
 AVIATION**

2 NTSB Accident/Incident No. M I A 8 7 F A 0 1 3
 3 Investigation By 1 NTSB 2 FAA delegated

1 1 Accident 2 Incident 4 I.C.A.O. Preliminary Report Submitted (NTSB only) 1 Yes 2 No

5 Report Status 1 Initial report 2 Preliminary Report

Location/Date
 6 Nearest City/Place ST. CROIX 7 State USVI 8 Zip Code (First 5 Nos.) 00820 9 Date (Nos. for M, D, Y) 10-28-86 10 Local time (24 hour clock) 09 15 11 Time Zone AST

Aircraft Information
 12 Registration No. N604SS 13 Aircraft Manufacturer GRUMMAN 14 Model/Series No. G-73 S/N J-4
 15 Type of Aircraft 1 Airplane 3 Glider 5 Blimp/Dirigible 7 Gyroplane
 2 Helicopter 4 Balloon 6 Ultralight A Specify _____ 16 Home Built 1 Yes 2 No

Other Aircraft—Collision Between Aircraft
 17 Registration No. 18 Aircraft Manufacturer 19 Model/Series No.

Accident Information
 20 Aircraft Damage 1 None 2 Minor 3 Substantial 4 Destroyed
 21 Property Damage (Multiple entry) 1 None 2 Residence 3 Residential area 4 Commercial Bldg. 5 Vehicle 6 Airport Facility 7 Trees 8 Crops 9 Wires, Poles 10 Other property
 22 Accident/Incident Phase of Operation 1 Standing 2 Taxi 3 Takeoff 4 Climb 5 Cruise 6 Descent 7 Approach 8 Landing 9 Maneuvering 10 Hover A Specify _____
 23 Injury Index (Most critical injury) 1 None 2 Minor 3 Serious 4 Fatal

Injury Summary 24 Fatal 1 25 Serious 4 26 Minor 10 27 None

Crew	A Name	B Address (City, State only)	C Certificate No.	D Injury Code	Passenger	A Name	B Injury Code
	RALPH SWIDDELL,	ST. CROIX USVI	1768892	2	1 PASSENGER		4
	JOHN D. KIRSHNER,	ST. CROIX USVI	1635733	2	4 PASSENGERS		3
					8 PASSENGERS		2
Injury Codes None—1 Minor—2 Serious—3 Fatal—4					Ground Personnel A Name NONE B Injury Code		

Operator Information
 42 Name Virgin Island Seaplane Shuttle, INC. 43 Operator Designator Code FHEA 44 Doing Business as (dba)

45 Street Address SEAPLANE RAMP 46 City CHRISTIANSTED ST. CROIX 47 State USVI 48 Zip Code 00820

Type of Certificate(s) Held 49 None (Go to Block 53)
 50 Air Carrier Operating Certificate (Check all applicable) 1 Flag carrier/domestic (121) 2 Supplemental 3 All cargo (418) 4 Large helicopter (127) 5 Commuter air carrier 6 On-demand air taxi
 51 Operating Certificate Other operator of large aircraft
 52 Operator Certificate 1 Rotorcraft—external load operator (133) 2 Agricultural aircraft operator (137)

Regulation Flight Conducted Under 53
 1 14 CFR 91 (only) 2 14 CFR 91D 3 14 CFR 103 4 14 CFR 105 5 14 CFR 121 6 14 CFR 125 7 14 CFR 127 8 14 CFR 133 9 14 CFR 135 10 14 CFR 137 11 14 CFR 129 (Foreign flag) A Specify _____

PRELIMINARY INFORMATION — SUBJECT TO CHANGE

National Transportation Safety Board

NTSB Accident/Incident Number

PRELIMINARY REPORT
AVIATION

ACCIDENT/INCIDENT

M I A 8 7 F A 0 1 3

Type of Flight Operation Conducted

(Complete 54, 55, 56 ONLY if flight was a revenue operation conducted under 121, 125, 127, 129, 135)

54	55	56
1 <input checked="" type="checkbox"/> Scheduled 2 <input type="checkbox"/> Non-scheduled	1 <input checked="" type="checkbox"/> Domestic 2 <input type="checkbox"/> International	1 <input checked="" type="checkbox"/> Passenger 2 <input type="checkbox"/> Cargo
		3 <input type="checkbox"/> Passenger/cargo 4 <input type="checkbox"/> Mail contract ONLY

(Complete 57 ONLY if 54, 55, 56 not applicable)

57	4 <input type="checkbox"/> Executive/corporate	7 <input type="checkbox"/> Other work use
1 <input type="checkbox"/> Personal	5 <input type="checkbox"/> Aerial application	8 <input type="checkbox"/> Public use
2 <input type="checkbox"/> Business	6 <input type="checkbox"/> Aerial observation	9 <input type="checkbox"/> Ferry
3 <input type="checkbox"/> Instructional (Including air carrier training)		10 <input type="checkbox"/> Positioning A Specify _____

Flight Plan/Itinerary

58 Flight Plan Filed	1 <input checked="" type="checkbox"/> None	2 <input type="checkbox"/> VFR	3 <input type="checkbox"/> IFR	4 <input type="checkbox"/> IFR/VFR	5 <input type="checkbox"/> Company (VFR)	6 <input type="checkbox"/> Military (VFR)
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59 Itinerary—Last Departure Point	60 State	61 Airport I.D.	62 Destination (If "local," mark X here 1 <input type="checkbox"/>)	63 State	64 Airport I.D.
1 <input checked="" type="checkbox"/> Same as accident/incident location Nearest city/place A _____		SSB	A ST. THOMAS	USVI	SPB

Weather Information

65 Source	67 Sky/Lowest Cloud Condition	68 Lowest Ceiling	69 Visibility (decimals)
1 <input type="checkbox"/> Accident site (Pilot/witness)	1 <input type="checkbox"/> Clear	1 <input checked="" type="checkbox"/> None	15 SM
2 <input checked="" type="checkbox"/> Weather Observation Facility A Facility Identifier STX	2 <input checked="" type="checkbox"/> Scattered	2 <input type="checkbox"/> Broken	70 Temperature 83 °F
	3 <input type="checkbox"/> Thin broken	3 <input type="checkbox"/> Overcast	71 Dew Point 73 °F
	4 <input type="checkbox"/> Thin overcast	4 <input type="checkbox"/> Obscured	
66 Time of Weather Observation 0947 (local)	A 1500 Ft. AGL	A _____ Ft. AGL	
72 Wind Direction 080 Degrees (Mag.)	73 Wind Speed 10 Kts.	74 Gusts _____ Kts.	75 Altimeter 3006 "Hg
			76 Weather Conditions (at accident site) 1 <input checked="" type="checkbox"/> VMC 2 <input type="checkbox"/> IMC
			77 Precipitation 1 <input type="checkbox"/> Yes 2 <input checked="" type="checkbox"/> No

Narrative

78 (Brief resume of facts. The information shall not contain opinion, conjecture, or statements reflecting on the character or integrity of the persons involved.)

On October 28, 1986, at 0915 AST, N-604SS, a Grumman G-73, registered to Virgin Island Seaplane Shuttle and operating as Virgin Island Flight 117, scheduled passenger service between St. Croix and St. Thomas U.S. Virgin Islands, crashed shortly after takeoff from St. Croix Harbor. Visual meteorological conditions prevailed and no flight plan was filed. The aircraft was destroyed and sank in waters 80 ft. deep. One passenger was killed, 4 passengers received serious injuries, the remaining 8 passengers and 2 crewmembers sustained minor injuries.

The flightcrew stated that shortly after takeoff, the aircraft rolled to the left and could not be leveled with full right aileron. The aircraft then stalled and the wings leveled. Shortly after stall recovery, the aircraft again rolled to the left and descended crashing into the water in a left wing low, nose level attitude. The pilots and passengers then exited the aircraft.

Post crash inspection of the aircraft revealed the left aileron cable separated in the wing center section and the cable showed evidence of having

(Please continue to next page.)

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Narrative (continued)

been burned. An electrical wiring bundle in the area of the separated aileron cable additionally showed evidence of having been burned.

The investigation continues.

(Attach additional pages if necessary.)

Administrative Data

79 Notification From HOWARD GUNTHER FAA-SJU	80 Date (Nos. for M. D. Y) 11-3-86	81 Local Time (24 hour clock) 0950	82 Time Zone EST
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83 FAA District Office/Coordinator RAUL POMALEZ FAA, FSDO-61 SAN JUAN	84 Other Federal Agencies Involved in Investigation		
	1 <input type="checkbox"/> FBI	3 <input type="checkbox"/> DEA	5 <input type="checkbox"/> Customs
	2 <input type="checkbox"/> USCG	4 <input type="checkbox"/> DOD	A Specify _____

Investigator(s) Assigned

85 Investigator-in-Charge JEFFREY KENNEDY <i>Jeffrey Y. Kennedy</i>	86 Form Preparation Date (Nos. for M. D. Y) 11-3-86	87 Form Receipt Date (For NTSB use only) 11-3-86
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88 Other NTSB Personnel Assigned NONE	D _____	G _____
A _____	E _____	H _____
B _____	F _____	I _____
C _____		

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**PRELIMINARY REPORT
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ACCIDENT/INCIDENT

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Accident/Incident Phase of Operation	Occurrence
500 Standing	100 Abrupt maneuver
501 Pre Flight	110 Altitude deviation, uncontrolled
502 Starting engine(s)	120 Cargo shift
503 Engine(s) operating	130 Airframe/component/system failure/malfunction
504 Engine(s) not operating	140 Decompression
505 Idling rotors	150 Ditching
510 Taxi	160 Dragged wing, rotor, pod, or float
511 Pushback/tow	170 Fire/explosion
512 To takeoff	171 Fire
513 From landing	172 Explosion
514 Aerial taxi	180 Forced landing
520 Takeoff	190 Gear collapsed
521 Ground run	191 Main gear collapsed
522 Initial climb	192 Nose gear collapsed
530 Climb	193 Tail gear collapsed
531 To cruise	194 Complete gear collapsed
540 Cruise	195 Other gear collapsed
541 Normal	196 Gear not extended
542 Holding (IFR)	200 Hard landing
550 Descent	210 Hazardous materials leak/spill (fumes/smoke)
551 Normal	220 In flight collision with object
552 Emergency	230 In flight collision with terrain
553 Uncontrolled	240 In flight encounter with weather
560 Approach	250 Loss of control—in flight
561 VFR pattern—downwind	260 Loss of control—on ground
562 VFR pattern—base turn	270 Midair collision
563 VFR pattern—base to final	280 Near collision between aircraft
564 VFR pattern—final approach	290 Nose down
565 Go Around (VFR)	300 Nose over
566 IAF to FAF/outer marker (IFR)	310 On ground collision with object
567 FAF/outer marker to threshold (IFR)	320 On ground collision with terrain
568 Circling (IFR)	330 On ground encounter with weather
569 Missed approach (IFR)	340 Overrun
570 Landing	350 Loss of power
571 Flare/touchdown	351 Loss of power (total)—mech failure/malfunction
572 Landing roll	352 Loss of power (partial)—mech failure/malfunction
580 Maneuvering	353 Loss of power (total)—non-mechanical
581 Aerial application maneuver	354 Loss of power (partial)—non-mechanical
582 Turn to reverse direction	355 Engine tearaway
583 Turn to landing area (Emergency)	360 Propeller blast or jet exhaust/suction
590 Hover	370 Propeller/rotor contact
600 Other	380 Roll over
610 Unknown	390 Undershoot
	400 Undertermined
	410 Vortex turbulence encountered
	420 Missing aircraft
	430 Miscellaneous/other

89 Phase of Operation (Enter code)

1 522
 2 522
 3 553
 4 _____
 5 _____

90 Occurrence (Enter code)

1 130
 2 250
 3 230
 4 _____
 5 _____

91 Altitude MSL (Inflight occurrence)

1 50
 2 50
 3 _____
 4 _____
 5 _____

PRELIMINARY INFORMATION = SUBJECT TO CHANGE