

UNCLASSIFIED

ABBREVIATED AVIATION ACCIDENT REPORT (AAAR)

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Source	PRAM							
1. Case Number	1a. Date of Accident	1b. Time	1c. Aircraft Serial Number	2a. Classification	2b. Category			
19820730010	Jul 30 1982	1600	7015009	E				
3. Type of Aircraft	4. Period Of Day	5. No Acft Involved	6. Nearest Installation					
CH47C	DAY	1	48396 - FT HOOD, TX					
7. Accident Location		a. Off Post	b. On Airfield	d. TEXAS				
8. Organization Involved in Accident								
Unit	UIC7	UIC6	UIC5	UIC4	UIC3	UIC2	Army Headquarters Element	Station
WCBJD0				WCBJAA	WH3QFF	WAT4FF	W3YBAA	48396
D CO				34SUPBN	6CAVBDE	3 CORPS	FORSCOM	FT HOOD, TX
9. Organization Accountable for Accident								
WCBJD0				WCBJAA	WH3QFF	WAT4FF	W3YBAA	48396
D CO				34SUPBN	6CAVBDE	3 CORPS	FORSCOM	FT HOOD, TX
10. Estimated Accident Cost								
a. Total Loss	b. Aircraft Damage		c. Man Hrs		d. Man Hrs Cost		e. Other Mil Damage	
No	\$0		0		\$0		\$0	
f. Civilian Damage		g. Injury		h. Total This Aircraft		i. Total Accident		
\$0		\$0		\$0		\$0		
11. General Data								
a. Mission				S/M	b. Flight Plan		c. Data Recorder	
S - SERVICE					VFR			
d. Night Vision		e. Fire		f. Fluid Spillage		g. Field Training		
		NONE		No				
12. Flight Data								
a. Emergency		Duration		Phase of Operation				
		0		A - STARTING ENGINE/RUN-UP				
b. Termination		Duration		Phase of Operation		Weight		Overgross
		AGL		KIAS		Weight		Overgross
13. Type Event								
01 - Precautionary Landing								
14. Accident Cause Factors			Human Error		Material Failure		Environmental	

	UNKNOWN	DEFINITE	NO
15. Summary			
DURING APU START, CREW CHIEF NOTICED UNUSUAL SOUND. UTILITY HYDRAULIC PRESSURE INDICATIONS WERE SERO. UTILITY PUMP SHAFT SHEARED DURING APU START.			
16. COMPONENT AND PART FAILURE/MALFUNCTION DATA			
Major Component Information			
a. Nomenclature	b. Type/Design/Series	c. Part Number	d. NSN
HYDRAULIC SYST			
Part Information			
a. Nomenclature	c. Part Number	d. NSN	e. MFG Code
SHAFT	261834	1650000140309	62983
g. Cause Failure		Functional Group	
Material	Maintenance	Design	Manufacture
DEFINITE ROLE	NONE		06 - HYDRAULIC 08 - OTHER
Type Failure		Cause Failure	
585 - SHEARED		999 - UNDETERMINED	
17. ENVIRONMENTAL			
a. General	(1) <input type="checkbox"/> IMC	(2) <input type="checkbox"/> VMC	(3) <input type="checkbox"/> Unknown
b. Environmental Conditions			
1. Weather Conditions		2. Other Conditions	
(a) Hail	<input type="checkbox"/>	(a) Animals	<input type="checkbox"/>
(b) Sleet	<input type="checkbox"/>	(b) Fowl	<input type="checkbox"/>
(c) Fog	<input type="checkbox"/>	(c) Surface	<input type="checkbox"/>
(d) Drizzle	<input type="checkbox"/>	(d) Noise	<input type="checkbox"/>
(e) Rain	<input type="checkbox"/>	(e) Chemicals	<input type="checkbox"/>
(f) Snow	<input type="checkbox"/>	(f) Radiation	<input type="checkbox"/>
(g) Lightning	<input type="checkbox"/>	(g) Glare	<input type="checkbox"/>
(h) Thunderstorm	<input type="checkbox"/>	(h) FOD	<input type="checkbox"/>
(i) Gusty Winds	<input type="checkbox"/>	(i) Temperature	<input type="checkbox"/>
(j) Freezing Rain	<input type="checkbox"/>	(j) Vibration	<input type="checkbox"/>
(k) Other	<input type="checkbox"/>	(k) Dust	<input type="checkbox"/>
c. Aircraft Icing	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	d. Turbulence	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
19. MOON ILLUMINATION DATA			
a. Above Horizon	b. Visible	c. Degrees Above Horizon	d. Percent Illumination
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
20. WIRE STRIKE DATA			
a. Wire Strike	b. WSPS Installed	c. WSPS Engaged	

<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes		
d. WSPS Cut Wire	e. WSPS Functioned	f. Wires Struck		
<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	Number wires 0 Dia.(inches)		
21. PERSONNEL DATA				
Person # 1	c. Grade	d. Sex	e. Duty	
	W4		PC - PILOT IN COMMAND	
f. SVC		g. UIC	h. Role	i. On Controls
O - OTHER		WCBJD0	U - UNKNOWN	<input type="checkbox"/> No <input type="checkbox"/> Yes
j. Lab Test		k. Hrs Slept 24	l. Hrs Worked 24	m. Hrs Flown 24
<input type="checkbox"/> Yes <input type="checkbox"/> No				
n. RL	o. FAC	p. Injury		q. MTDS Total Flt Hrs
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	-		0
Person # 2	c. Grade	d. Sex	e. Duty	
	O2		PI - PILOT	
f. SVC		g. UIC	h. Role	i. On Controls
O - OTHER		WCBJD0	U - UNKNOWN	<input type="checkbox"/> No <input type="checkbox"/> Yes
j. Lab Test		k. Hrs Slept 24	l. Hrs Worked 24	m. Hrs Flown 24
<input type="checkbox"/> Yes <input type="checkbox"/> No				
n. RL	o. FAC	p. Injury		q. MTDS Total Flt Hrs
<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	-		0
22. IMPACT/PROTECTIVE/ESCAPE/SURVIVAL/RESCUE DATA				
a. Aircraft Space Compromised		b. Escape/Survival Difficulties		c. Protective/Restraint Equip Functioned
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
24. FINDINGS AND RECOMMENDATIONS				
Findings				
Not Reported				
Recommendations				
Not Reported				

U N C L A S S I F I E D