



		NTSB ID: MKC90LA119		Aircraft Registration Number: N94615	
		Occurrence Date: 06/04/1990		Most Critical Injury: None	
		Occurrence Type: Accident		Investigated By: NTSB	
Location/Time					
Nearest City/Place MILFORD	State IA	Zip Code 51351	Local Time 2315	Time Zone CDT	
Airport Proximity: Off Airport/Airstrip		Distance From Landing Facility: 0		Direction From Airport: 0	
Aircraft Information Summary					
Aircraft Manufacturer CESSNA		Model/Series 152		Type of Aircraft Airplane	
Sightseeing Flight: No			Air Medical Transport Flight: No		
Narrative					
Brief narrative statement of facts, conditions and circumstances pertinent to the accident/incident:					
FACTUAL REPORT - AVIATION					

 National Transportation Safety Board FACTUAL REPORT AVIATION		NTSB ID: MKC90LA119			
		Occurrence Date: 06/04/1990			
		Occurrence Type: Accident			
Landing Facility/Approach Information					
Airport Name	Airport ID:	Airport Elevation 1439 Ft. MSL	Runway Used 0	Runway Length 0	Runway Width 0
Runway Surface Type:					
Runway Surface Condition:					
Type Instrument Approach: NONE					
VFR Approach/Landing: Forced Landing					
Aircraft Information					
Aircraft Manufacturer CESSNA		Model/Series 152		Serial Number 15285744	
Airworthiness Certificate(s):					
Landing Gear Type: Tricycle					
Homebuilt Aircraft? No	Number of Seats: 2	Certified Max Gross Wt. 1670 LBS	Number of Engines: 1		
Engine Type: Reciprocating	Engine Manufacturer: LYCOMING	Model/Series: O-235-L2C	Rated Power: 110 HP		
- Aircraft Inspection Information					
Type of Last Inspection Unknown	Date of Last Inspection	Time Since Last Inspection 0 Hours	Airframe Total Time Hours		
- Emergency Locator Transmitter (ELT) Information					
ELT Installed? Yes	ELT Operated? No	ELT Aided in Locating Accident Site?			
Owner/Operator Information					
Registered Aircraft Owner UNKNOWN		Street Address			
		City	State	Zip Code	
Operator of Aircraft IOWA LAKES COMMUNITY COLLEGE		Street Address 300 S. 18TH ST.			
		City ESTHERVILLE	State IA	Zip Code 51334	
Operator Does Business As:			Operator Designator Code:		
- Type of U.S. Certificate(s) Held: None					
Air Carrier Operating Certificate(s):					
Operating Certificate:			Operator Certificate:		
Regulation Flight Conducted Under: Part 91: General Aviation					
Type of Flight Operation Conducted: Instructional					
FACTUAL REPORT - AVIATION					

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First Pilot Information																																																																																				
Name On File		City		State	Date of Birth Age 20																																																																															
Sex: M	Seat Occupied: Unknown	Principal Profession: Unknown		Certificate Number: On File																																																																																
Certificate(s): Private																																																																																				
Airplane Rating(s): Single-engine Land																																																																																				
Rotorcraft/Glider/LTA: None																																																																																				
Instrument Rating(s): None																																																																																				
Instructor Rating(s): None																																																																																				
Type Rating/Endorsement for Accident/Incident Aircraft? No				Current Biennial Flight Review?																																																																																
Medical Cert.: Class 2		Medical Cert. Status: Valid Medical--no waivers/lim.		Date of Last Medical Exam: 12/1989																																																																																
<table border="1"> <tr> <th rowspan="2">- Flight Time Matrix</th> <th rowspan="2">All A/C</th> <th rowspan="2">This Make and Model</th> <th rowspan="2">Airplane Single Engine</th> <th rowspan="2">Airplane Multi-Engine</th> <th rowspan="2">Night</th> <th colspan="2">Instrument</th> <th rowspan="2">Rotorcraft</th> <th rowspan="2">Glider</th> <th rowspan="2">Lighter Than Air</th> </tr> <tr> <th>Actual</th> <th>Simulated</th> </tr> <tr> <td>Total Time</td> <td>193</td> <td>116</td> <td>193</td> <td></td> <td>18</td> <td></td> <td>4</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pilot In Command(PIC)</td> <td>155</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 90 Days</td> <td>34</td> <td>34</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 30 Days</td> <td>19</td> <td>19</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 24 Hours</td> <td>9</td> <td>9</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						- Flight Time Matrix	All A/C	This Make and Model	Airplane Single Engine	Airplane Multi-Engine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Actual	Simulated	Total Time	193	116	193		18		4				Pilot In Command(PIC)	155										Instructor											Last 90 Days	34	34									Last 30 Days	19	19									Last 24 Hours	9	9								
- Flight Time Matrix	All A/C	This Make and Model	Airplane Single Engine	Airplane Multi-Engine	Night							Instrument					Rotorcraft	Glider	Lighter Than Air																																																																	
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Last 24 Hours	9	9																																																																																		
Seatbelt Used? Yes		Shoulder Harness Used? Yes		Toxicology Performed? No																																																																																
				Second Pilot? No																																																																																
Flight Plan/Itinerary																																																																																				
Type of Flight Plan Filed: None																																																																																				
Departure Point	State		Airport Identifier	Departure Time	Time Zone																																																																															
HARTLEY	IA		0Y4	2300	CDT																																																																															
Destination	State		Airport Identifier																																																																																	
ESTHERVILLE	IA		EST																																																																																	
Type of Clearance: None																																																																																				
Type of Airspace:																																																																																				
Weather Information																																																																																				
Source of Briefing: No record of briefing																																																																																				
Method of Briefing:																																																																																				
FACTUAL REPORT - AVIATION																																																																																				

 National Transportation Safety Board FACTUAL REPORT AVIATION			NTSB ID: MKC90LA119		
			Occurrence Date: 06/04/1990		
			Occurrence Type: Accident		
Weather Information					
WOF ID	Observation Time	Time Zone	WOF Elevation	WOF Distance From Accident Site	Direction From Accident Site
3SE	2250	CDT	1337 Ft. MSL	10 NM	180 Deg. Mag.
Sky/Lowest Cloud Condition: Scattered			25000 Ft. AGL		Condition of Light: Night/Dark
Lowest Ceiling: None			0 Ft. AGL		Altimeter: "Hg
Temperature: -18 °C		Dew Point: -18 °C		Wind Direction: 140	Density Altitude: 0 Ft.
Wind Speed: 13		Gusts:		Weather Conditions at Accident Site: Visual Conditions	
Visibility (RVR): 0 Ft.		Visibility (RVV) 0 SM		Intensity of Precipitation: Unknown	
Restrictions to Visibility: None					
Type of Precipitation: None					
Accident Information					
Aircraft Damage: Substantial			Aircraft Fire: None		Aircraft Explosion: None
Classification: U.S. Registered/U.S. Soil					
- Injury Summary Matrix	Fatal	Serious	Minor	None	TOTAL
First Pilot				1	1
Second Pilot					
Student Pilot					
Flight Instructor					
Check Pilot					
Flight Engineer					
Cabin Attendants					
Other Crew					
Passengers					
- TOTAL ABOARD -				1	1
Other Ground	0	0	0		0
- GRAND TOTAL -	0	0	0	1	1

 <p>National Transportation Safety Board</p> <p>FACTUAL REPORT</p> <p>AVIATION</p>	NTSB ID: MKC90LA119	
	Occurrence Date: 06/04/1990	
	Occurrence Type: Accident	
Administrative Information		
<p>Investigator-In-Charge (IIC)</p> <p>JOHN R. HRUBAN</p>		
<p>Additional Persons Participating in This Accident/Incident Investigation:</p> <p>LEROY MONSON DSM FSDO CE 61</p>		
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