



Witness Statement

Your Name & phone # (Print) _____ Date of Incident _____

Accident/Injury Description and Location (Be Specific):

What did you witness?

Who was in the area?

How did it happen?

What equipment was involved?

Any other details you can share?

I have given the above statement and certify that it is true to the best of my knowledge.

Witness Signature and email address

Date