



## Witness Statement

Your Name (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

\_\_\_\_\_  
Date