



# Florida Trail Association Witness Statement

*(Attach additional sheets if necessary)*



1. Did you see the accident?

2. When did the accident happen?

A. Time

B. Date

3. Where did the accident happen?

4. Tell, in your own way, how the accident happened.

5. Where were you when the accident occurred?

6. Was anyone injured, and if so, extent of injury known?

7. Describe the apparent damage to private property.

8. Describe the apparent damage to government property.

9. Please draw a diagram below of what happened at the worksite:

10. Name of witness completing this form

A. Signature of witness

B. Today's day

C. Witness' telephone number

D. Home address of witness (include city, state, zip code)