**Witness Statement**

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| --- | --- | --- | --- |
| Injured Employee | | | |
| Name of witness | | Home Telephone # (   ) | |
| Address | | | |
| City | State | | Zip |
| Work Telephone # (   ) | | | |
| Relationship to injured worker | | | |
| Date of Accident | | Time of Accident | |
| Other employees involved in accident | | | |
| Other employees who witnessed accident | | | |
| Were you in the area where the accident happened?  Yes  No | | | |
| Did you see the accident happen?  Yes  No | | | |
| Was it obvious the employee was hurt?  Yes  No | | | |
| Was employee using a tool or machinery when injured?  Yes  No | | | |
| Have you ever heard the employee complain of a similar injury?  Yes  No | | | |
| Have you ever heard the employee talk of any other on-the-job injury?  Yes  No | | | |
| Did the employee violate a safety rule?  Yes  No | | | |
| Was the employee ever warned about unsafe work habits?  Yes  No | | | |
| Explain exactly what happened (continue on a separate sheet if necessary): | | | |
|  | | | |
|  | | | |
| Where did it happen? | | | |
| What part of the body appeared to be injured? | | | |
| What do you think was the cause of the accident? | | | |
|  | | | |
| What do you think could have prevented the accident from happening? | | | |
|  | | | |
| The following is my statement of what I heard the injured employee sat (continue on separate sheet if necessary): | | | |
|  | | | |
| Additional comments: | | | |
|  | | | |

**The above statement is a true and correct account of what I observed and heard.**

Signature of Witness \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Witness to Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*It is a crime to knowingly provide false, incomplete, or misleading information to any party to a workers’ compensation transaction for the purpose of committing fraud. Penalties include imprisonment, fines, and denial of insurance benefits.*