

The Hashemite Kingdome of Jordan Civil Aviation Authority

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WITNESS'S STATEMENT OF GROUND ACCIDENT / INCIDENT The purpose of this statement is intended solely for use in determining the facts, condition, circumstances, and the probable cause of the subject accident without apportion blame or liability. Date: 1. Place of Accident/Incident: Date: Time: 2. Type of vehicle: 3. Identification of vehicle: 4. Your name: Your age: 5.Your address: **Phone number:** Your employer: 6. Your occupation: 7. Your location at the time of accident / incident 8. Tell in your own words what you saw and heard before and at the time the accident/incident occurred (you can use Arabic language): **Signature** (Use reveres side of sheet for diagram and additional statement—If you use it, you have to sign it)