



The Hashemite Kingdom of Jordan
Civil Aviation Regulatory Commission

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WITNESS'S STATEMENT OF AIRCRAFT 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. Your name:

Your age:

3. Your address:

Phone number:

4. Your occupation:

Your employer:

5. Your location at the time of accident / incident

6. 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 reverse side of sheet for diagram and additional statement—If you use it, you have to sign it)

CARC / AAID Form 31-4