



NEW YORK STATE PARKS AND RECREATION
 SNOWMOBILE UNIT
 EMPIRE STATE PLAZA AGENCY BUILDING 1
 ALBANY, NY 12238



DATE OF THIS REPORT

REGISTRATION NUMBER
 OF REPORTING SNOWMOBILE

SNOWMOBILE ACCIDENT REPORT

Pursuant to the provisions of Section 25.25 of the New York State Parks and Recreation Law, the operator of a snowmobile involved in an accident resulting in death, personal injury or damage to property of \$1,000.00 or more must report the accident to Parks and Recreation, Snowmobile Unit within 7 days. If the operator is physically incapable of making such report, and there is another participant in the accident, then such participant shall make the report. In cases where the operator and the participants are physically incapable of making such report, then the owner shall make the report. Failure to comply with these requirements shall constitute an offense punishable by a fine of not more than one hundred dollars.

1. TIME AND PLACE OF ACCIDENT

A. Date of Accident	B. Time AM <input type="checkbox"/> PM <input type="checkbox"/>	C. State	D. Nearest City, Town, etc.	E. County
F. Exact Location (Name of trail/area, GPS coordinates; fix location precisely)			G. Type of Terrain	
			1. Trail	2. Woods
			3. Groomed Trail	4. Field/Lawn
			4. Roadway	5. Body of Water
			6. Other (Specify)	

2. DATA (Check all appropriate items in box to the left of the number or fill in)

A. Name & Address of Operator	B. Operator's Age	C. Operator's Experience	
		1. < 1 Year	3. > 5 Years
		2. 1-5 Years	4. Unknown
D. Name & Address of Owner	E. Have you ever completed a Snowmobile Safety Course? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	F. Helmets Was the operator wearing a helmet? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	Was the passenger wearing a helmet? Yes <input type="checkbox"/> No <input type="checkbox"/>		
G. Snowmobile		H. Snowmobile Track: Studded?	I. Estimated Speed (MPH)
Make	Model	Year Built	
Ownership: O--owner R--rented B--borrowed F--family machine		Yes	J. Was the operator familiar with the area? Yes <input type="checkbox"/> No <input type="checkbox"/>
		No	

3. WEATHER AND SNOW CONDITIONS (Check all appropriate items in box to left of number or fill in)

A. Weather Conditions			B. Visibility	C. Snow Conditions	D. Wind
1. Clear	4. Snow	7. Other (Specify)	1. Good	1. Smooth	1. None
2. Cloudy	5. Sleet/Hail/Freezing Rain		2. Fair	2. Rough	2. Light
3. Rain	6. Fog/Smog/Smoke		3. Poor	3. None	3. Moderate
					4. Strong
					5. Storm

4. OPERATION AT TIME OF ACCIDENT (Check all appropriate items in box to left of number or fill in)

A. Underway			B. Not Underway			C. Number of Persons on Snowmobile (Specify)
1. Cruising	4. Towing (Other)	7. Other (Specify)	1. Attended	3. Fueling		
2. Maneuvering	5. Being Towed		2. Parked	4. Other (Specify)		
3. Towing Sled	6. Racing					

5. TYPE, NATURE OF CLASSIFICATION OF ACCIDENT (Check all appropriate items in box to left of number or fill in)

A. Cause of the Accident					
1. Struck by Other Snowmobile	6. Fire or Explosion (Fuel)	11. Ran off Roadway/Trail	16. Other (Specify)		
2. Collision with Another Snowmobile	7. Fire or Explosion (Other than Fuel)	12. Overturning			
3. Collision with Person	8. Struck Hidden Object in Snow	13. Skidding			
4. Collision with Motor Vehicle	9. Disappearance of Snowmobile	14. Fell Off			
5. Collision with a Fixed Object	10. Submersion	15. Track Injury			
B. PERSONAL INJURIES			C. Property Damage		
1. Burns or Scalds	5. Fracture-Dislocation	Item Damage	This Vehicle	Other Vehicle	
2. Crushed or Pinched	6. Other (Specify)	1. Snowmobile	\$	\$	
3. Concussion		2. Accessory Equipment	\$	\$	
4. Abrasion		3. Damage to Other Property (Describe on Reverse)	\$	\$	

6. GIVE A BRIEF, BUT CLEAR DESCRIPTION OF THE ACCIDENT. USE ADDITIONAL SHEETS IF NECESSARY.

Empty space for accident description.

NOTE - MAKE 2 COPIES OF THIS FORM. SEND THE ORIGINAL TO NYS PARKS SNOWMOBILE UNIT. SEND 1 TO THE LAW ENFORCEMENT AGENCY IN THE AREA WHERE THE ACCIDENT OCCURRED AND KEEP 1 FOR YOUR RECORDS.

OVER

7. WHAT, IN YOUR OPINION, CAUSED THE ACCIDENT?

8. LIVES LOST

A. List Names & Addresses

9. PERSONS INJURED

A. List Names & Address, Nature & Extent of Injuries

10. PROPERTY DAMAGE

Describe Property Damage, Include Name and Address of Owner

11. WITNESSES

A. List Names & Addresses of All Known Witnesses

12. ASSISTANCE FURNISHED

A. List Known Police, Fire Dept., Rescue Squads, Etc.

13. PERSONS ON SNOWMOBILE (Other than Operator)

NAME	ADDRESS	AGE
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NAME	ADDRESS	AGE
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NAME	ADDRESS	AGE
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14. REMARKS (Include opinion how similar accidents can be prevented in the future)

15. NAME, ADDRESS OF OPERATOR AND REGISTRATION NUMBER OF OTHER VEHICLES INVOLVED

I declare under the penalties of perjury that to the best of my knowledge and belief, the description and statements made herein are true and correct.

OPERATOR'S SIGNATURE



TELEPHONE NUMBER

(COMPLETE ALL APPLICABLE SECTIONS OR FORMS WILL BE RETURNED)