OPS-209



NYS OPRHP Snowmobile Unit 625 Broadway, 2nd Floor Albany, NY 12238 (518) 474-0446



REGISTRATION NUMBER OF REPORTING SNOWMOBILE

| DATE OF THIS REPORT | _ |
|---------------------|-----|
| | SNO |

SNOWMOBILE ACCIDENT REPORT

| | | | | | | | and Recreatio | | | | | | | | | | | |
|--|--|------------|----------------|-------------------------|--------------------------------|---|----------------|--------------------|------------|--|---------------------------------|-------------|----------------------|---------------|---------------|------------|-----------|--|
| • | 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, the | en the own | er shall m | ake the rep | ort. Failure | to comply | | requirements | | | | | by a fine o | of not more | than one | hundred do | ollars. | | |
| | | | | | | - | | | | | Γ | | | - | | | | |
| A. Date o | A. Date of Accident B. Time C. State D. Nearest City, Town, etc. | | | | | | E. County | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| F. Exact L | ocation (Na | ame of tra | il/area, GPS | coordinat | es. Fix loca | ation precis | ely) | | | | - | G. Type o | of Terrain | | | | | |
| | | | | | | | | | 1. Trail | | 3. Groome | ed Trail | | 4. Roadway | | 6. Other | (Specify) | |
| | | | | | | | | | 2. Woods | | 4. Field/La | awn | | 5. Body o | f Water | | | |
| 2. DATA (Check all appropriate items in box to the left of the number or fill in) A. Name & Address of Operator's Age C. Operator's Experience C. Operator's Experience | | | | | | | | | | | | | | | | | | |
| A. Name | & Address | of Operat | or | | | | | | | B. Opera | itor's Age | C. Operator | | | 's Experience | | | |
| | | | | | | | | | | | | | 1. < 1 Yea | | | 3. > 5 Y | | |
| D Name | & Address | of Owner | | | | | | | | | | | 2.1-5 Ye | | | | | |
| D. Nume | a Address | or owner | | | | | | | | E. Have you ever completed a Snowmobile Safety Course? Yes No F. Helmets Was the operator wearing a helmet? Yes No | | | | | | | | |
| | | | | | | | | | | F. Helm | iets | | | • | | | | |
| | | | | G Snov | vmobile | | | | | Was the passenger wearing a helmet? Yes No H. Snowmobile Track: Studded? I. Estimated Speed (MF | | | | | | | (MPH) | |
| Make | | | Model | 0.010 | | | Year Built | | | | Yes | | | | he operato | familiar v | | |
| | o: Oowne | er Rrente | ed Bborro | wed F | family m | achine | | | | No | | | | | rea? Yes □ | | | |
| | | 3. W | EATHER | AND SN | iow co | NDITION | NS (Check a | all ap | propriat | e items | in box te | o left of | number | | | | | |
| | | | A. We | ather Con | ditions | | | | B. Vis | ibility | C. S | now Condi | tions | | D. V | /ind | | |
| | 1. Clear | | 4. Snow | | | | 7. Other (Spec | cify) | | 1. Good | | 1. Smoot | h | | 1. None | | 4. Strong | |
| | 2. Cloudy | | 5. Sleet/H | ail/Freezin | g Rain | | | | | 2. Fair | | 2. Rough | | | 2. Light | | 5. Storm | |
| | 3. Rain 6. Fog/Smog/Smoke | | | | | | | 3. Poor | | 3. None | | | 3. Moderate | | | | | |
| | | 4. 0 | PERATIO | N AT TI | ME OF A | ACCIDEN | IT (Check a | all app | propriate | e items i | n box to | o left of r | number | or fill in) | | | | |
| | | | 4 | A. Underwa | iy | T | | | | | B. Not U | Inderway | 1 | | C. Numb | er of Pers | ons on | |
| | 1. Cruising 4. Towing (C | | (Other) | 1 | 7. Other (Spec | cify) | | 1. Attended | | | 3. Fueling | | Snowmobile (Specify) | | | | | |
| | 2. Maneuvering | | 5. Being Towed | | | - 1 | | | | 2. Parked | | | 4. Other (S | (Specify) | | | | |
| | 3. Towing | | | 6. Racing | | | | | | | •. • | <u> </u> | | | | _ | | |
| | 5. I YI | PE, NA I | URE OF | CLASSI | FICATIC | ON OF A | | | | - | items ii | n box to | left of n | umber d | or fill in) | | | |
| | 4.01 | | | | | 0.5 | | | ne Accider | it | | | | | 16. Other | Specify | | |
| | | | Snowmobile | | | 6. Fire or Explosion (Fuel) | | | | 11. Ran off Roadway/Trail | | | | io. outer | opeeny | | | |
| | | | | mobile | | 7. Fire or Explosion (Other than Fuel) 8. Struck Hidden Object in Snow | | | | | 12. Overturning 13. Skidding | | | | _ | | | |
| | 3. Collision with Person 4. Collision with Motor Vehicle | | | | 9. Disappearance of Snowmobile | | | | | 14. Fell Off | | | | | | | | |
| | 5. Collision with a Fixed Object | | | 10. Submersion | | | | | 15. Track | | | | | | | | | |
| B. PERSONAL INJURIES | | | | | | | | C. Property Damage | | | | | | | | | | |
| 1. Burns or Scalds | | | | 5. Fracture-Dislocation | | | lt | em Damag | le | - | This Vehicle | | | Other Vehicle | | | | |
| | 2. Crushed or Pinched | | | | 6. Other (Specify) 1. Snow | | | 1. Snowmo | obile | | \$ | | | \$ | | | | |
| | 3. Concussion | | | 2. Accesso 3. Damage | | | 2. Access | ory Equipm | nent | \$ | | | \$ | | | | | |
| | 4. Abrasion | | | | | | e to Other | Property | (Describe | escribe on Reverse) | | | \$ | | | | | |
| | 6. | GIVE A | BRIEF, | BUT CLI | EAR DES | SCRIPTIC | ON OF THE | ACC | IDENT. | USE AD | DITION | AL SHEE | TS IF NE | CESSA | RY. | | | |
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| | | MAKE | TWO CO | PIES OF | THIS F | ORM. SF | ND THE O | RIGIN | | | | OWMOR | | . SEND | |) THE I | AW | |
| NO | ГЕ - | | | | | | WHERE T | | | | | | | | | | | |
| | | | | 2 | | | | | | | | | • | | | | <u> </u> | |

| 7. WHAT, IN YOUR OPINION, CAUSED THE ACCIDENT? | | | | | | | |
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| 8. LIVES LOST A. List Names & Addresses | 9. PERS A. List Names & Address, Nature & Exten | SONS INJURED | | | | | |
| A. List Names & Addresses | A. List Names & Address, Nature & Extern | t of Injuries | | | | | |
| | | | | | | | |
| | | | | | | | |
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| 10. PROPER | | | | | | | |
| Describe Property Damage, Include Name and Address of Owner | | | | | | | |
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| | | | | | | | |
| | • | | | | | | |
| 11. WITNESSES A. List Names & Addresses of All Known Witnesses | A. List Known Police, Fire Dept., Rescue | ANCE FURNISHED Squads, Etc. | | | | | |
| | | 54666, 2.6. | | | | | |
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| | | | | | | | |
| 13. PERSONS ON SNOWMO | BILE (Other than Operator) | | | | | | |
| NAME ADDRESS | | AGE | | | | | |
| | | | | | | | |
| NAME ADDRESS | | AGE | | | | | |
| | | | | | | | |
| NAME ADDRESS | i | AGE | | | | | |
| | | | | | | | |
| 14. REMARKS (Include opinion how similar accidents can be prevented | d in the future) | | | | | | |
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| 15. NAME, ADDRESS OF OPERATOR AND REGISTRATION NUMBER OF OTHER VEHICLES INVOLVED | | | | | | | |
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| 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 | מישיט איז | | | | | | |
| OPERATOR'S SIGNATORE | | TELEPHONE NUMBER | | | | | |
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