



# WITNESS STATEMENT

for an oil spill, hazardous material release, or other related event

Person making statement: [Redacted]

Address: [Redacted]

City: [Redacted] State: [Redacted] Zip: [Redacted]

Phone: [Redacted]

Relationship to incident: OWNER  
(responsible party, 3<sup>rd</sup> party witness, employee, etc)

Name of involved vessel or facility or company:

PEGASUS

Location / U.S. Navigable Waterway: PYB

Date/Time of incident: 3:00 A.M. 15<sup>TH</sup>

Substance spilled/released: UNKNOWN

Fuel onboard (potential spill) DIESEL

Estimated quantity in the water: ?

Appearance (color, thickness, rainbow sheen, etc.): RED

Size of area covered (square feet): ?

Describe the circumstances of this incident as you know them. Include if possible the source and cause of the incident, any injuries or wildlife impact, and response actions.

FIRE ?

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The above statement is true and correct to the best of my knowledge  
[Redacted Signature] 7/15/22  
Signature Date