

APPENDIX B

**STATEMENT OF OCCURRENCE**

Statement of \_\_\_\_\_  
NAME DATE OF BIRTH (OPTIONAL)

ADDRESS \_\_\_\_\_

VESSEL NAME \_\_\_\_\_

I am providing this statement voluntarily, concerning: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNED

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESSED

\_\_\_\_\_  
DATE