



New York State
Parks, Recreation and
Historic Preservation

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



REGISTRATION NUMBER
OF REPORTING SNOWMOBILE

DATE OF THIS REPORT

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	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	3. Groomed Trail	4. Roadway	6. Other (Specify)
			2. Woods	4. Field/Lawn	5. Body of Water	

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 ☐ No ☐		
		F. Helmets Was the operator wearing a helmet? Yes ☐ No ☐		
		Was the passenger wearing a helmet? Yes ☐ No ☐		
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 ☐ No ☐	
		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	4. Strong	
2. Cloudy	5. Sleet/Hail/Freezing Rain		2. Fair	2. Rough	2. Light	5. Storm	
3. Rain	6. Fog/Smog/Smoke		3. Poor	3. None	3. Moderate		

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.

NOTE -

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

OVER



7. WHAT, IN YOUR OPINION, CAUSED THE ACCIDENT?		
8. LIVES LOST		9. PERSONS INJURED
A. List Names & Addresses		A. List Names & Address, Nature & Extent of Injuries
10. PROPERTY DAMAGE		
Describe Property Damage, Include Name and Address of Owner		
11. WITNESSES		12. ASSISTANCE FURNISHED
A. List Names & Addresses of All Known Witnesses		A. List Known Police, Fire Dept., Rescue Squads, Etc.
13. PERSONS ON SNOWMOBILE (Other than Operator)		
NAME	ADDRESS	AGE
NAME	ADDRESS	AGE
NAME	ADDRESS	AGE
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
		