



Claimant Instructions:

Please fill in the victim's name and VCF claim number at the top of page 1 of the Witness Presence Statement Form and provide these instructions and the Witness Presence Statement Form to the individual who is providing information as your witness. Your witness can send the form directly back to the VCF, or you can upload it to your claim or return it to the address noted below. Be sure to keep a copy of the completed form for your records. **Note:** If you upload the completed form to your online claim, select the **"Witness Presence Statement"** document type.

You may provide this form to individuals who witnessed the victim at an eligible location between September 11, 2001, and May 30, 2002. The person you ask to be a witness must have been eighteen years old or older on September 11, 2001, and must have personal knowledge of the victim's presence at the location. In general, witnesses must show that they directly observed the victim at the eligible location, or must have been a supervisor or dispatcher who ordered the victim to that location and has knowledge that the victim in fact reported to the location. The **only exception** to the age requirement is for witnesses who were in high school at the time and who are submitting this form for a fellow student who was also in school at the time, and the victim is unable to obtain an official school transcript or record to confirm their presence.

If you ask individuals to complete the Witness Presence Statement Form in support of your claim, and the Statements are the only proof of presence you plan to submit, you must submit Statements from a **minimum of two (2) people** and at least one **must** be from an individual who is **not related** to the victim or to the Personal Representative or Guardian when applicable.

Your witness may not use this form to give answers in a language other than English. If your witness needs to answer the questions in a language other than English, you may give them a written translation of the questions in their preferred language, and they may write their answers in that language. If you give your witness a written translation of the questions, we need all of the following: (1) the written translation of the questions, with the witness's answers; (2) a certified English translation of the questions and answers; and (3) a certification signed by the translator that includes: (a) a statement that the translator is competent to translate the document, and that the translation is true and accurate to the best of the translator's abilities; (b) the translator's address and phone number; and (c) the language being translated.

Witness Instructions:

Why have I received this form?

You are being asked to be a witness for the individual whose name is listed at the top of the attached Witness Presence Statement Form. This individual has filed a claim with the September 11th Victim Compensation Fund (VCF). As part of the individual's claim, he or she needs to prove that they were present in an area affected by the 9/11 attacks at some point between September 11, 2001, and May 30, 2002. The information you provide on the form may help prove that the individual was present at one of the areas affected by the 9/11 attacks.

Please be as detailed as possible about specific locations and activities. The areas affected by the 9/11 attacks are: (1) the site where the World Trade Center once stood; (2) [New York City Exposure Zone](#) (the area known as lower Manhattan south of Canal Street – see page 2 for a definition of the surrounding area and a map); (3) routes through New York City that were used debris from the World Trade Center site, including the barges and the Fresh Kills Landfill in Staten Island; (4) the Pentagon crash site; and (5) the Shanksville, Pennsylvania crash site.

Submitting vague answers such as, "I saw her there," or "He told me he was there," or referring to generic date ranges, may cause a delay in processing the claim, or the claim may be denied.



Where do I send my completed form?

Return the completed form to the individual who gave it to you or mail it directly to the VCF at the address below. Because this form is a legal document, you should keep a copy of the completed form for your own records.

September 11th Victim Compensation Fund
P.O. Box 34500
Washington, D.C. 20043

What will happen after I fill out this form?

A representative from the VCF may call you for more information regarding your answers. In most cases, the call will only take a few minutes. If you do not receive a call, you do not need to take any further action.

If you have not already done so, you may want to register with the VCF to preserve your right to file your own claim in the future. You can register by phone or online. Registering does not waive any rights or commit you to filing a claim. More information can be found at <https://www.vcf.gov/how-register>.

Who do I call if I have questions while completing this form?

If you have questions about how to complete this form, or you don't understand the questions, please call us:

Helpline 1-855-885-1555

Hearing-impaired 1-855-885-1558 (TDD)

Outside the US 1-202-514-1100

Information about the Geographic Area in New York City Covered by the VCF: The VCF covers two areas of New York City:

1. The area shown in the map below. This is the part of Manhattan that is south of the line that runs along Canal Street from the Hudson River to the intersection of Canal Street and East Broadway, north on East Broadway to Clinton Street, and east on Clinton Street to the East River.
2. Any area related to or along the routes that were used to remove debris from the World Trade Center site. Examples include the Fresh Kills landfill in Staten Island, and the barges that were used to move debris from the site to the landfill. Note: The routes of debris removal apply only to those individuals who loaded, unloaded, or drove the trucks containing WTC debris, worked on the barges transporting the debris, and/or worked at the Fresh Kills landfill.





Before completing this form, please carefully review the attached instructions. The instructions can also be found under “Forms and Resources” on the www.vcf.gov website. **You must have been at least 18 years of age at the time of September 11, 2001 to complete this form.** The only exception to the age requirement is if you were in high school at the time and you are submitting this form for a fellow student who was also in school at the time.

Victim Information

Title: _____ Mr. Ms. Dr. Mrs. Other: _____
Victim’s Full Legal Name: _____
First Name Middle Name Last Name
VCF Number: _____ VCF
(Input the 7 numbers after VCF)

Throughout the form, the word “victim” will always refer to the person listed above.

Witness Information

Title: _____ Mr. Ms. Dr. Mrs. Other: _____
Your Full Legal Name: _____
First Name Middle Name Last Name
Phone Number: _____ + _____
United States Phone Number International Phone Number International City, Country
Your Date of Birth: _____ / _____ / _____
Month Day Year

If you have registered or filed your own VCF claim, please put your claim number here.

VCF Number: _____ VCF
(Input the 7 numbers after VCF)

Your Relationship with the Victim

1. What is your relationship to the victim?



The Victim's Presence in a 9/11 Area

2. Between September 11, 2001, and May 30, 2002, where was the victim present? Select all that apply:

At the site where the World Trade Center once stood and the surrounding area (see page 2 of the Instructions for a definition of the surrounding area and a map);

New York City Exposure Zone (the area known as lower Manhattan south of Canal Street) – see page 2 of the Instructions for a definition of the surrounding area and a map;

On routes used by those involved in the removal of debris from the World Trade Center site or at the Fresh Kills Landfill in Staten Island;

The Pentagon crash site; or

The Shanksville, Pennsylvania crash site.

3. How do you know that the victim was present at the site(s) you checked above?

I saw him or her there (eyewitness); or

I know that he or she was there but did not see him or her there (not an eyewitness).

4. What was the victim doing in the area? Why was the victim there? Be as specific as possible in describing the victim's activities in the area.

5. **At what specific address/location was the victim present?** If you don't know the exact address, what were the cross streets or the closest landmark? Please be as detailed as possible if no address is available. The location "Ground Zero", "WTC site," and similar terms are NOT specific. These phrases have different meanings to different people, so we need more specific information about exactly where the victim was located.

6. On what specific dates was the victim present in the area between September 11, 2001, and May 30, 2002?



7. **Do you have any documents or other evidence that support your statements above? Do you have documents that show that the victim was in the area? Are you aware of documents that might exist that support your statements? If so, please describe them.** If you have such documents, you may submit them with this form. If you are aware of documents, please provide as much information as possible about where such documents might be found (including contact names, addresses, and/or telephone numbers).
8. **Answer this question only if you personally saw the victim in the area (eyewitness).** If you were not an eyewitness, please go to question 9. **Please describe how or why you were able to personally witness the victim in the area? What were you doing there and what brought you in contact with the victim?**
9. **If you did not personally witness the victim in the area, but you know they were there, please describe in as much detail as possible how you know they were in the area.**
10. **Is there any other information you think the VCF should know about where the victim was located, or when and why he or she was there?** If so, please include the details below and explain how you know the information.



If someone helped you fill out this form, or filled out part of the form for you, list that person's name here: _____.

I declare (or certify, verify, or state) under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Please note – the VCF does not accept electronic signatures. If you received this form electronically, you must print the signature page and sign by hand.

You do not need to have this form notarized.

Signature

Date Signed (mm/dd/yyyy)

Printed Full Name

If you are including additional pages with this form, please be sure your name and VCF claim number are included at the top of each page.