

**ADVICE TO WITNESS
(PROMISE OF CONFIDENTIALITY)**

OPNAV 5102-11

THIS IS PART OF A NAVY SAFETY INVESTIGATION
LIMITED DISTRIBUTION AND SPECIAL HANDLING REQUIRED BY OPNAVINST 5100.23E
THIS STATEMENT IS PRIVILEGED AND IS EXEMPT FROM DISCLOSURE

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PLEASE READ THIS STATEMENT CAREFULLY
CERTIFY THAT YOU UNDERSTAND IT BY YOUR SIGNATURE AT THE BOTTOM

I understand that:

- a. I have been requested to voluntarily provide information to a SIR Board conducting an investigation of a defined Navy shore mishap.
- b. I AM NOT being requested to provide statement under oath or affirmation.
- c. Disclosure of personal information by me is voluntary, and that failure to provide such information will have no direct effect on me.
- d. The purpose of the information provided by me is to determine the cause of a mishap and/or the damage and/or injury occurring in connection with that mishap.
- e. All information provided by me to the Mishap Board will be used ONLY for safety purposes.
- f. The information provided by me shall NOT be used:
 - 1) In any determination affecting my interests.
 - 2) As evidence to obtain evidence in determining misconduct or line of duty status of killed or injured personnel.
 - 3) As evidence to determine my responsibility or that of other personnel from the standpoint of discipline.
 - 4) As evidence to assert affirmative claims on behalf of the government.
 - 5) As evidence to determine the liability of the government for property damage caused by the mishap.
 - 6) As evidence before administrative bodies, such as Officer/Enlisted Separation Boards, Judge Advocate General Manual investigations/inquiries.
 - 7) In any other punitive or administrative action taken by the Department of the Navy.
 - 8) In any other investigation or report of the mishap about which I have been asked to provide information.
- g. **Witness signature:** _____ **Date:** _____ **Initials:** _____

1. Summation of witness interview by investigator (Continue on reverse and/or attach separate sheet(s) as necessary)

2. PRINTED NAME OF INVESTIGATOR (First, Middle, Last)	3. DATE
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4. SIGNATURE	5. TELEPHONE NUMBER
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6. INVESTIGATOR'S ADDRESS (WHERE YOU MAY BE LOCATED)