**1.**

|  |  |
| --- | --- |
| Police Ref: |  |

**WITNESS STATEMENT**

C.J. ACT 1967, s.9 MC Act 1980, ss 5A(3)(a) and 5B; MC Rules 1981, r70

**Statement of: ………………………………………………………………………………………………………………**

**Age if under 18: ……………………………………………………………………..(if over 18 insert ‘over 18’)**

Page 1

**Occupation: ………………………………………………………………………………………………………………….**

This statement consisting of five (5) pages signed by me is true to the best of my knowledge and belief and I make it knowing that, if tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything which I know to be false, or do not believe to be true.

**Dated:** ……………………………………………….

**Signature:** …………………………………………

1. **Details of the Incident**

|  |  |
| --- | --- |
| Date of Incident: | Time: am/pm |
| Exact location of incident including junctions and postcode where possible: | |

1. **Details of your vehicle (if applicable)**

|  |  |
| --- | --- |
| Make, Model, Colour: | \*Are you the owner of the vehicle? YES NO |
| Registration number: | \*Were you the driver of the vehicle? YES NO |
| \*If NO please provide details of the: | |
| Driver at time of incident: | |
| Taxi / Buses: (Please provide details of Plate number, driver number, licensing authority, route employer details  etc): | |

1. **Other Vehicles involved (if known)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Make & Model** | **Registration Number** | **Colour** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |

**Please describe the driver(s) of the vehicles in section 4 in section 5 below. Please ensure Vehicle 1 - 3 identified in section 4 corresponds with the relevant driver number in Section 5.**

1. **Details of other parties involved?** (Describe as best you can e.g. male/female, ethnic appearance, age, height, hair colour/length, distinguishing features ie: scars/tattoos or any other information)

|  |  |
| --- | --- |
| **1** |  |
| **2** |  |
| **3** |  |

1. **Describe conditions at the time of the incident**

Was the traffic: Please circle one option: Light Medium Heavy

Was the weather: Please circle: Fine Sunny Dull Raining Snowing

Other please specify: ………………………………………………………………………………………………………………………

Were the road conditions: Please circle: Dry Wet Greasy Icy Snow covered

Other please specify: ………………………………………………………………………………………………………………………

Was visibility: Please circle: Clear Daylight Foggy Dusk Dark

Other please specify: ………………………………………………………………………………………………………………………

1. **Please state fully what happened**

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| Page 2 |

Are you making any allegations against anyone involved? YES / NO

If ‘YES’ please give details:

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Was there any conversation between you and the other driver? YES / NO

If ‘YES’ what was said:

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Was the registration mark of the other vehicle recorded by you YES / NO

at the time of the incident?

If 'NO', please give the name of the person(s) here (provide full details in Section 8):

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**PLEASE NOTE: Any original note of the registration number of the other vehicle is an important exhibit, it must be retained in a safe place and be kept for production at Court or seizure by Police if required.**

**If you have any photographs or CCTV, Dash Cam footage please attach it to this form once completed.**

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**ANY PHOTOGRAPHS, DASH CAM FOOTAGE, CCTV YOU SUPPLY, NEED TO BE EXHIBITED.**

**They are your exhibits and you should use your initials. For example if your name is Sam Jones they should be listed as per the below example.**

**An example is provided for you:**

|  |  |
| --- | --- |
| ***PIECE OF PAPER CONTAINING REGISTRATION NUMBER*** | ***SJ/1*** |
| ***DATA STICK CONTAINING DASH CAM*** | ***SJ/2*** |

**I produce the following in evidence to support my case as:**

|  |  |
| --- | --- |
| **ITEM** | **EXHIBIT NUMBER**  **YOUR INITIALS AND NUMBER** |
|  |  |
|  |  |
|  |  |
|  |  |

**Please note: WITHOUT the FULL registration number and independent witnesses, West Midlands Police may not be able to investigate this matter further.**

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**Any Additional Information**

Page 5

**Not to be disclosed**

1. **Witnesses:**

Please give the FULL Names, Addresses, Telephone numbers and e-mail address of any witnesses, please indicate the relationship of the witness to you and whether they are an independent witness.

Note: An independent witness is someone not involved in the incident, and not known to any party.

|  |  |
| --- | --- |
|  | Independent?  Y / N |
| **Witness 1:** |  |
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|  |
| **Witness 2:** |  |
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| **Witness 3:** |  |
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| **Witness 4:** |  |
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**Additional Information**

**Not to be disclosed**

**Personal Details:**

|  |  |
| --- | --- |
| Surname: | First Name(s): |
| Title: (Mr/Mrs/Miss/Ms) | Date of Birth: |
| Address: | Telephone numbers:  Home:  Mobile:  Other: |
| Postcode: |
| Occupation: |
| Religion: | Ethnicity: |
| e-mail address: | |
| Please indicate your preferred method of contact: | |

**Court Declaration**

Are you willing to attend court to give evidence in this case if necessary? YES / NO

If you were required to attend Court, are there any dates during the next 6 months which would be inconvenient? If so please provide dates:

|  |
| --- |
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**If you have any photographs or CCTV footage please attach it to this form once completed.**

**PLEASE ENSURE THAT YOU HAVE SIGNED ALL PAGES**

**YOU HAVE NOW FINISHED YOUR PART OF THE FORM. PLEASE TAKE IT TO THE POLICE STATION FRONT OFFICE WHERE IT WILL BE CHECKED PRIOR TO SUBMISSION.**

Station Stamp:

**For Police use only:**

|  |  |
| --- | --- |
| Checked By: |  |
| Print Name: |  |
| Personal Number: |  |
| Date: |  |

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