

KNOWN USER INFRINGEMENT NOTICE DECLARATION

Statutory Declarations Act 1959

DO NOT MAKE PAYMENT AS A NEW NOTICE WILL BE ISSUED TO THE PERSON YOU NOMINATE

Please print <u>u</u>	jour full n	AME and Address Belo	W . This section must be	completed by	the persor	n making the de	claration.	
l,		SURNAME			GIVEN NAME/S			
of						ADDRESS	POSTCODE	
			PHONE				OCCUPATION	
		LICENCE NO.		STAT	E OF ISSUE		DOB	
Make the following declaration under the Statutory Declarations Act 1959:								
1. Declare tha	it at the tim	ne of the offence as sta	ted in infringement num	ber				
2.								
I was in	I was in possession or control of the vehicle registered Registration number				number:			
I was not in possession or control of the vehicle registered								
3. At the time of the offence, the person who was in possession or control of the vehicle was:								
			SURNAME				GIVEN NAME/S	
						ADDRESS	POSTCODE	
		LICENCE NO.		STAT	E OF ISSUE		DOB	
Tick here if more space is required and please attach the additional information to this document.								
			ent to take all reasonable step you will remain responsible fo			uthority as per <i>Sect</i>	ion 33 of the Road Transport (General)	
I understand tha	t a person wh	o intentionally makes a false	statement in a statutory decl	aration is guilty o	f an offence. 1		which is imprisonment for a term of	
4 years under Section 11 of the Statutory Declarations Act 1959. I believe the statements in this declaration are true in every particular.								
Signature						EOD (CODDODATIONS DOSITION IN COMPANY	
FOR CORPORATIONS, POSITION IN COMPANY								
Declared before a person Authorised under the Statutory Declarations Act 1959								
Declared at						LOCATION ON	DATE	
Before me			WITNESS NAME	Signature				
Witness Appointment								
Address of witness								