

Statutory Declaration – Individuals

To give notice of the name and address of some other person who was in charge of the vehicle or vessel concerned at all relevant times relating to the offence.

- Note:**
- **Print clearly in CAPITAL letters using a black or blue pen.**
 - **Complete and return this form by the due date on the penalty notice or letter. Do NOT make payment as a new penalty notice will be issued to the person you name.**

I, Surname _____

Name(s) _____

(Person named on the penalty notice)

Address _____

Phone no. _____

give notice that the person named below was responsible for the offence:

Surname of
person or name
of company _____

Given name(s) _____

Mailing address _____

Suburb _____

State _____

Postcode _____

Phone no. _____

Company
ABN/ACN _____Date of birth
(dd mm yyyy) _____

Licence no. _____

State/country of issue _____

(Please put a 'X' in the appropriate box.) He/she:

☐

was the driver/person responsible

OR ☐

was the vehicle owner

I do solemnly and sincerely declare that the details above are correct and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the *Oaths Act 1900*.

Declarant (My name is at the top of this notice)

Declared at (Suburb/place) _____

In the state of _____ on (Date) ____ / ____ / 20 ____

Declarant's signature **X** _____

Note: A person who makes a statement or provides information in the above notice knowing it to be false or misleading in a material particular is liable to a penalty of up to \$5500.

Witness (Please put a 'X' in appropriate box)

☐

Justice of the Peace. JP No. _____

☐Australian legal practitioner/Notary public/
Commissioner of Affidavits☐Other authorised witness (if interstate/overseas) under
the *Oaths Act 1900* or equivalent legislation under other
jurisdictions. *Specify* _____

I am satisfied as to the declarant's identity and the form is completed.

Full name of witness _____

Witness' signature **X** _____

Privacy statement

The information in this form is required by SDRO to determine who is responsible for the fine. The information may be provided to the person you named, to third parties with your consent or as required or permitted by law. You may correct or update personal information by contacting SDRO.

State Debt Recovery Office

Enquiries 1300 138 118

TTY (02) 6354 7255

Mail PO Box 786

Strawberry Hills NSW 2012

Email fines@osr.nsw.gov.au

Website www.sdرو.nsw.gov.au

RETURN THIS DOCUMENT BY POST, DO NOT FAX.