

PLEASE READ CAREFULLY THEN COMPLETE AND SIGN ONE OF THE THREE PARTS BELOW IN BLOCK CAPITALS AND RETURN THE WHOLE ORIGINAL FORM TO : TRAFFIC CRIMINAL JUSTICE OCU, PO BOX 510, DA15 0BQ. (DO NOT RETURN A PHOTOCOPY.) THE FORM MUST BE COMPLETED BY THE ADDRESSEE AND NOT HANDED TO ANYONE ELSE.

PART 1 (I am the person to whom this form is addressed and I was the driver)

I was the driver at the time shown overleaf. I confirm the following details:

Form for Part 1 with fields for Title, Surname, Forename, Address, Post Code, Telephone number, Driving Licence No., Date of Birth, Signature, and Signature date.

PART 2 (If you were NOT the Driver at the time of the alleged offence, please enter the driver's details and complete this part only)

I was not the driver of the vehicle at the time shown overleaf. The driver / hirer was:

Form for Part 2 with fields for Title, Surname, Forename, Address, Post Code, Telephone No., and Signature.

Table with Metropolitan Police Service header and fields for Exhibit No., Cust No., Serial No., Ex. Book No., OCU, Other Str. Ref., and Lab Ref. No.

Form for Part 2 with fields for Description of exhibit, From place/person, Taken by, Date, Time, Sealed by, Date, Time.

I IDENTIFY THIS EXHIBIT AS THAT REFERRED TO IN MY STATEMENT. Signature and Signature(s) of additional witness(es).

PART 3 (If you were NOT the keeper or owner of the vehicle, please enter the keeper or owner details and complete this section)

The vehicle shown overleaf was transferred/acquired on:

Form for Part 3 with fields for Name/Company, Address, Date of Birth, and Telephone No.

Barcode area with MP 1404/04, MPSZ12101269, and Form 420B.

Form for Part 3 with fields for Date of Birth, Telephone No., Signature, and Signature date.