**WITNESS STATEMENT**

**Criminal Procedure Rules, r 27.2; Criminal Justice Act 1967, s. 9; Magistrates’ Courts Act 1980, s.5B**

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| --- | --- | --- | --- | --- |
| URN | 21 |    |       |    |

 Statement of: **...................................................................................**

 Age **Over 18** Occupation

This statement (consisting of 2 page(s) each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false, or do not believe to be true.

Signature Date: ......................

 Tick if witness evidence is visually recorded [ ]  *(supply witness details on rear)*

I am the above named person and work as a traffic management operative for Kier / Chevron. I am authorised to set out traffic management in accordance with the requirements of Traffic Signs Manual Chapter 8

At...................(time)..............................(day).................................(date) I was working at (Exact location of incident including junctions, marker posts and post code) ..........................................................where (delete as appropriate) a total closure, Lane 1 closure, Lane 2 closure, Lane 3 closure, or Lane 4 closure had been implemented. I observed a vehicle drive through the closure into the works area. I wrote the vehicle registration, make and model down and reported the incident to the police and my supervisor.

The offending vehicle was a………….. (make and model and the registration was)

I would describe the driver as …………. (M/F Ethnicity, Age, Height, Hair colour, distinguishing features, clothes).

There were …. (number) passengers in the offending vehicle. Description of passengers (M/F Ethnicity, Age, Height, Hair colour, distinguishing features, clothes).

Describe traffic conditions (***please circle one)***  Light Medium Heavy

Was the weather (***please circle one)*** Fine Sunny Dull Raining Snowing

Road conditions (***please circle one)*** Dry Wet Greasy Icy Snow covered

Lighting Conditions (**p*lease circle one)***  Daylight Darkness (street lights present and lit)

Darkness (street lights present unlit) Darkness (no street lightning)

**Describe what happened (use continuation sheet if necessary)**