|  |  |
| --- | --- |
| A. | DETAILS OF THE PERSON WHO RECEIVED THE INFRINGEMENT |
|  |
| Full name: | Infringement No: |
|  |
| Corporation name (if applicable): |
|  |
| ABN (if applicable): | Vehicle Rego No: |
|  |
| Occupation / Job title: |
|  |
| Residential address: |
|  |
| Suburb: | Postcode: |
|  |
| Telephone No: | Email: |
|  |
| B. | DECLARATION  |
|  |
| I, the person named above, make the following statutory declaration under the *Oaths and Affirmations Act 2018*: I did not deposit the waste and (select option) |
| [ ]  | I saw another person deposit the waste. (Go to C) |
| [ ]  | Someone else was the driver or person authorised to use the vehicle at the time the waste was deposited. (Go to C) |
| [ ]  | Someone else was the passenger in or near the vehicle at the time the waste was deposited. (Go to C) |
| [ ]  | I sold this vehicle to someone else or permanently disposed of the vehicle on this date \_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/20\_\_\_\_\_\_\_\_. (Go to C) |
| [ ]  | I believe the vehicle or number plates displayed on the vehicle were stolen. Police Reference Number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. |
| [ ]  | The waste was deposited by a passenger of a commercial passenger vehicle (i.e. taxi, uber etc). (Go to D) |
| C. | DETAILS OF NOMINATED PERSON  |
|  |
| Full name: |
|  |
| Residential address: |
|  |
| Suburb: | Postcode: |
|  |
| Driver licence / permit number: |
|  |

|  |  |
| --- | --- |
| D. | DECLARATION SIGNED IN FRONT OF AUTHORISED WITNESS |
|  |
| **It is an offence under the *Oaths and Affirmations Act 2018* (which may carry a fine in excess of $109,000 or imprisonment of 5 years or both) to make a statement in a statutory declaration that is untrue. I understand that I may be served with a summons to give evidence in relation to this statutory declaration.** |
|  |  |  |
| **Person making the declaration (declarant)** |
|  |
| **I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.**The following must be read aloud in the presence of the authorised witness before signing:*I, [full name of declarant] of [address], declare that the contents of this statutory declaration are true and correct.* |
| **Signature of declarant:** |  |
| **Declared at:** (place in the state of Victoria) |  |
| **On:** (date: DD/MM/YY) |  |
|  |
| **Authorised witness** |
|  |
| **I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration.*** *(If applicable)* I certify that I have read the statutory declaration to the declarant at the time the statutory declaration was made, due to illiteracy, limited English literacy, vision or cognitive impairment.
* *(If applicable)* I certify that I assisted the declarant in making the statutory declaration by… (write details of assistance provided, for example, translating the document): *(If applicable)* I certify that I assisted the declarant in making the statutory declaration by… (write details of assistance provided, for example, translating the document):
 |
| **Signature of authorised witness:** |  |
| **Full name of authorised witness:** |  |
| **On:** (date: DD/MM/YY) |  |
| **Position/title:** |  |
| **Address:** |  |
|  |
| SEND DECLARATION TO <INSERT LITTER AUTHORITY> |
|  |
| Email a scanned copy to: <insert email address for litter authority>Or post to: <insert postal address of litter authority> |

|  |
| --- |
| Authorised Witness |
| The following is a list of persons who may witness statutory declarations under Section 30 of the *Oaths and Affirmations Act 2018*. **For a complete list of authorised witnesses, refer to** [**www.justice.vic.gov.au/statdecs**](http://www.justice.vic.gov.au/statdecs) |
| * A person currently licensed or registered to practice in Australia as one of the following occupations:
* Architect
* Chiropractor
* Conveyancer
* Dentist
* Financial adviser or financial planner
* Legal practitioner
* Medical practitioner
* Midwife
* Migration agent
* Nurse
* Occupational therapist
* Optometrist
* Patent attorney
* Pharmacist
* Physiotherapist
* Psychologist
* Trademarks attorney
* Veterinary surgeon
* An accountant who meets at least one of the following criteria:
* Fellow of the national Tax Accountants’ Association
* Member of Chartered Accountants Australia and New Zealand
* Member of the Association of Taxation and Management accountants
* Member of CPA Australia
* Member of the Institute of Public Accountants
* Australian Consular Officer or Australian Diplomatic Officer
* Bailiff
* Clerk of a court
 | * Commissioner for Affidavits
* Judge
* Justice of the Peace
* Local government Council or
* Magistrate
* Registered marriage celebrant
* Master of a court
* Member of the Australian Defence Force who meets at least one of the following criteria:
* An officer
* A non-commissioned officer with 5 or more years of continuous service
* A warrant officer
* Member of the Parliament of a State
* Member of a Territory legislature
* Member of a local government authority
* Registered minister of religion
* Notary public, including a notary public exercising functions at a place outside either the Commonwealth or the external Territories of the Commonwealth
* Police officer
* Police reservist
* Protective service officer (PSO)
* Registrar, or Deputy Registrar, of a court
* A school principal
* Sheriff
* Sheriff’s officer
* Teacher employed on a permanent full-time or part-time basis at a school tertiary education institution
* Any authorised affidavit taker

**Where a statutory declaration is supplied to <insert litter authority>, a <insert litter authority> staff member is not permitted to witness the declaration.** |