

# Witness Statement

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Date of Incident: \_\_\_\_\_

Dealer Name: \_\_\_\_\_

Dealer Address: \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Details:

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_