

CASE NUMBER: _____



GRANTSVILLE CITY POLICE DEPARTMENT

WITNESS STATEMENT FORM

Date: _____	
Location: _____	Time of Occurrence: _____
Name: _____	DOB: _____ Age: _____
Address: _____	Home Phone: _____
City/State/Zip: _____	Day Time Phone: _____

Describe What You Saw: _____

Notice: You are notified that statements you are about to make may be presented to a magistrate or judge in lieu of your sworn testimony at a preliminary examination. Pursuant to Utah Code Annotated 76-8-504 and Utah Code Annotated 76-8-506, it is a crime to knowingly provide false information in this written statement.

By my signature below, I certify that this statement is true, accurate, and complete, to the best of my knowledge:

Witness

By my signature below, I certify that I obtained this statement without coercion or duress under circumstances guarantying its reliability:

Agent

