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| **I,** |  | **ID no** |  |
| **and who reside at** |  | | |
| **and employed by** |  | **as a** |  |
| **hereby state that on** |  | **at approximately** |  |
| **an incident took place at the** |  | **and the details are as follows :** | |

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**STATEMENT CONTINUED**

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| **FULL NAME** |  | **SIGNATURE** |  | **DATE** |

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| **STATEMENT TAKEN BY** |  | **SIGNATURE** |  |
| **NAME OF TRANSLATOR** |  | SIGNATURE |  |
| **NAME OF WITNESS** |  | **SIGNATURE** |  |