

Liability Declaration - RAMLA

In the accident matter between:

and

Liability Declaration

I, the undersigned

_____ ID No. _____

Do hereby state that:

1. I am an adult male/female residing at _____
2. I have been involved in a vehicle accident reported to **AR No** _____
at _____ Police Station _____
at the _____ about _____ time
3. I am the driver "____" (as to police report) mentioned in this report, driving the
vehicle registered _____.
4. I hereby state that I acknowledge being liable/partly liable for the cause of the
accident. The damage has been roughly detected as follows:
5. I do note that the other vehicle involved – Vehicle Reg. No. _____ in
the accident is a private/commercial vehicle.

Date:

DEPONENT Signature

Liability Declaration - RAMLA

I hereby certify that the Deponent has acknowledged that he/she knows and understands the contents of the foregoing declaration which was taken by him personally at _____ on this th day of _____ 2010.

Police Officer / other Witness

DESIGNATION AND AREA : _____

FULL NAMES : _____

Rank: _____

Police Station : _____

Alternatively:

I am a witness for the above and my details are as follows:

First Name:

Name:

Date of Birth:

ID / Passport Number:

Postal Address:

Postal Code

Physical Address:

Postal Code

Telephone Landline:

Telephone work:

Cell phone:

E-mail or Fax: