



Snohomish County Sheriff's Office Vehicle Theft Victim Statement

Case # _____ - _____

Statement of: Last Name: _____ First: _____ Middle: _____

DOB: _____ Race: _____ Hispanic: Y / N Sex: _____ Hgt: _____ Wgt: _____ Eye: _____ Hair: _____

Home Address: _____ City: _____ Zip: _____

P. O. Box Number: _____ City: _____ Zip: _____

Employer: _____ City: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail Address: _____ Contact Phone: _____
(Established Family Member or Friend)

Place statement taken (City): _____ Date: _____ Time: _____

I (print name), _____, am the legal owner or the person who was in lawful possession of the following described vehicle:

COLOR	YEAR	MAKE	MODEL	LICENSE PLATE	(FEATURES SUCH AS UNIQUE STICKERS, ANTENNAS, BODY DAMAGE, & ETC)
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I did not give permission to anyone to take or use my vehicle (described above). I will assist in the prosecution of this case and I will testify in court under oath to the facts herein.

Victim Narrative (Describe where vehicle was, last seen, how theft discovered, and other details):

What valuables were in the vehicle? _____

Who do you think may have taken your vehicle? _____

Was the vehicle locked? _____

Were the keys in the vehicle? _____

Are you behind on payments? _____

Do you have theft insurance? _____

If I regain possession of this vehicle, I understand that I must notify the Sheriff's Office immediately of the recovery. I also understand that I may be held liable for any expenses resulting from my failure to notify the Snohomish County Sheriff's Office.

I understand that my vehicle may be towed and stored at my expense, for safekeeping, if recovered and I am not immediately available to take possession of it.

I understand making false reports to public officers: (1) A person commits the crime of making a false report if he/she willfully makes any untrue, misleading or exaggerated statement in any report to a police department or fire department. (2) Making a false report is a misdemeanor.

I HAVE READ EACH PAGE OF THIS STATEMENT CONSISTING OF _____ PAGE(S).
I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE ENTIRE STATEMENT IS TRUE AND CORRECT. _____(initial)

Signature: _____

Deputy: _____ # _____

1 of _____