

# STATUTORY DECLARATION – LITTER

This statutory declaration is provided for use by individuals who have received a litter infringement under section 45 of the *Environment Protection Act 1970* (EP Act).

Use this form to dispute the infringement or nominate the person who was responsible for the vehicle at the time of the offence, by submitting a statutory declaration to Environment Protection Authority Victoria (EPA), in accordance with section 45I of the EP Act.

## Step 1. DETAILS OF THE PERSON WHO RECEIVED THE INFRINGEMENT

Full name:

Residential address:

Suburb:

State:

Postcode:

Infringement number:

## Step 2. NOMINATION OR DISPUTE STATEMENT (Complete either OPTION A OR OPTION B)

I, the person named above, do solemnly and sincerely declare that:

**OPTION A – NOMINATION** (Please cross X one of the below)

- I saw another person deposit the litter and the name and address of that person is:
- The person authorised to use the vehicle at the time of the offence was:
- The vehicle was disposed of/sold to another person on (DD/MM/YY):

Full name:

Residential address:

Suburb:

State:

Postcode:

### OPTION B – GROUNDS OF DISPUTE

Please provide a detailed statement as to why you are not responsible (i.e. I did not litter) and why a nomination is not possible (i.e. why I did not see who deposited the litter). If there are witnesses to support your statement, please provide their details below.

If insufficient space, please attach a separate page – must be initialled by person making declaration and Authorised Witness\*

### Witness to support dispute:

Full name:

Residential address:

Suburb:

State:

Postcode:

## Step 3. DECLARATION SIGNED IN FRONT OF AUTHORISED WITNESS

I acknowledge that this declaration is true and correct, and I make it with the knowledge that making a statutory declaration that I know to be untrue is an offence.

**Person named in Step 1 to complete**  
(in front of authorised witness\*)

Declared at:  
(Place and/or suburb)

In the State of Victoria on:  
(DD/MM/YY)

Signature of person making the declaration:

**Authorised witness\* to complete**

Before me:  
(Signature of witness)

Full name of witness:

Title and qualification of witness:

\*The authorised witness (e.g., justice of the peace, pharmacist, police officer, court registrar, bank manager, medical practitioner, dentist) must print or stamp his/her name, title and address under section 30 (2) of the *Oaths and Affirmations Act 2018*.

Address of witness:

## Step 4. SEND DECLARATION TO EPA

Post to: EPA Victoria, GPO Box 4395, Melbourne VIC 3001, or email a scanned copy to [contact@epa.vic.gov.au](mailto:contact@epa.vic.gov.au)