



Unsafe Driver DashCam Complaint Form

WWW.ReportingDriver.org

Link to Dashcam Video: _____

Type of Complaint: _____

OFFENDING VEHICLE

License Number: _____ State: _____

Make: _____ Model: _____ Color: _____

DRIVER

Do you personally know the offending driver? Yes No

If yes, driver's name: _____

If no, describe the offending driver: _____ Sex: _____ Hair Color: _____

Clothing Description: _____

Could you make a positive I.D. on driver? Yes No

Were there passengers in the offending vehicle? Yes No

Number of passengers: _____

Location of offense: _____

Street and direction of your vehicle: _____

Street and direction of the offending vehicle: _____

DESCRIBE WHAT HAPPENED:

IN THE EVENT THIS MATTER IS HEARD IN COURT,
Are you willing to testify in court as a witness? Yes No

Phone: _____
Date: _____

Print Name: _____ Email: _____