



State of West Virginia Uniform Citation NO: 100-1735761

The undersigned, being duly sworn, upon his oath deposes and says:

On _____ The _____ Day Of _____ At _____ Hours
Weekday Date Month Year Time

Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Driver License Type:

- Driving License
- GDL Level 1
- GDL Level 3
- CDL Instruction Permit
- Motorcycle Inst. Permit
- Instruction Permit
- GDL Level 2
- CDL
- Motorcycle Only
- Other: _____

Driver License Number _____ State _____ Social Security Number _____ Date of Birth _____

Gender: M F
Weight _____ Ft. _____ In. _____
Height _____ Eye Color _____ Class _____ Restrictions _____ Endorsements _____

License Plate Number _____ State _____ Plate Class _____ Vehicle Identification Number (VIN) _____

Make _____ Year _____ Body Style _____ Model _____ Color _____

Owner / Lessee Name: Same as Violator

Address: _____

City: _____ State: _____ Zip Code: _____

Fatality **Complete Only for Commercial Motor Vehicles**
CMV Type (Check 1): Veh: _____

