



Republic of South Africa

**OFFICE FOR WITNESS PROTECTION
INVESTIGATING OFFICER
DECLARATION FORM**



National Prosecuting
Authority of South Africa

Instructions to Investigating Officer

- Please read all instructions carefully.
- The form has four sections and a checklist.
- You are required to complete all the sections and **sign every page**.
- Section 1 is the Case Referral details and provides an easy summary of the case.
- Section 2 contains important details related to the witness that is required for the Office for Witness Protection to make a decision upon programme admission criteria.
- Section 3 is the Investigating Officer's declaration relating to the accuracy of the details provided to the Office for Witness Protection.
- Section 4 is the declaration of a Justice of the Peace or Commissioner of Oath.

You are required to complete this form in full. Use this checklist to ensure that you have provided all the required information to the Office for Witness Protection.

Completion of Section 1?	
Completion of Section 2?	
Completion of Investigating Officer's Declaration?	
Have you attached a copy of the case docket to this application?	
Have you contacted the Office for Witness Protection?	
Have you signed all pages?	

Signature of Deponent

Section 1 – Referral Details							
Witness Reference Number <i>(Office use)</i>							
Referral Agency Check Box							
SAPS	DPCI	SOCA	SCCU	IPID	NIA	Tribunal	Inquest
ICC	AFU	MIL INTEL		Judicial Commission		International Agency/Tribunal	
Incident / CAS Reference Number							
Cross-Referenced Projects							
Venue / Court where matter will be tried							

Commanding Officer	
Name	
Surname	
Station or Area	
Contact Telephone Number	
Cellular Phone Number	
E-mail address	
Prosecutor	
Name	
Surname	
DPP Jurisdiction	
Contact Telephone Number	
Cellular Phone Number	
E-mail address	

Signature of Deponent

Section 2 – Investigating Officer and Case Details		
Name		
Other Names		
Surname		
Rank		
Persal Number		
SAPS Station		
Office Telephone Number		
Cellular Phone Number		
E-mail address		
I am the Investigating Officer in the following matters in which this witness has to testify:		
Station	CAS / INCIDENT Reference	Charge(s)
Witness Details		
Name		
Other Names		
Surname		
Identity Number		
Particulars of matter(s) to testify		
CAS / INCIDENT		
Name(s) of Accused and/or Suspect(s)		
Date of Arrest <i>(if applicable)</i>		
In Custody or on Bail <i>(if applicable)</i>		
Is the Witness making an application for protection that will include related persons?	Yes	No
I can confirm that the above mentioned is a witness in above mentioned matter(s)	Yes	No
The witness has been, or is likely to be, threatened by the accused/implicated?	Yes	No
Is the witness classified as Section 204?	Yes	No
Has the accused been arrested?	Yes	No
If Yes, will you oppose bail?	Yes	No
Provide brief details to what the witness can testify to: <i>(Circle classification of witness, 1-4 below)</i>		
1. Innocent Bystander:	<div style="border-bottom: 1px dashed black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px dashed black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px dashed black; height: 20px; margin-bottom: 5px;"></div> <div style="border-bottom: 1px dashed black; height: 20px;"></div>	
2. Eye Witness:		
3. Victim:		
4. Section 204:		

Signature of Deponent

Section 2 – Investigating Officer and Case Details			
Are the accused/suspect(s) affiliated to any gang(s) or syndicates(s)?	Yes: Provide detail	No:	
Known area(s) where gang/syndicate operate:			
I have checked the CAS system and to my knowledge, the witness is a witness/accused/complainant in the following case(s).			
Station	CAS	Charges	Witness/ Accused/ Complainant
<i>It is my recommendation that the witness:</i>			
Be placed on the witness protection program?			Yes No
Be moved out of the province of his/her residence?			Yes No
Be allowed to stay with his/her family?			Yes No
I will apply for an informer's fee and or a reward.			Yes No

Section 3 – Declaration		
A. I have not made any promises to the witness to induce them to testify or enter the Witness Protection Programme.	Yes	No
B. I have treated all potential witnesses with respect, sensitivity, humanity and fairness.	Yes	No
C. I will make every effort to conduct an investigation to ensure that the case is ready for trial as soon as possible.	Yes	No
D. I agree to submit MONTHLY progress reports on the status of the investigation to the Office for Witness Protection.	Yes	No
D. I undertake to inform the Director, OWP if the case is withdrawn, removed from the roll or the investigation cease. I will also inform OWP should another Investigating Officer is appointed in my place.	Yes	No
E. I undertake to submit a report after the conclusion of the case expressing my view on the quality and value of the service delivered by OWP.	Yes	No
F. I understand the contents of the above declaration.	Yes	No
H. I have no objections to taking the prescribed oath.	Yes	No
I. I consider the oath binding on your conscience.	Yes	No
J. I declare that the above questions were answered to the best of my knowledge.	Yes	No
..... Signature Deponent		

Section 4 – Justice of the Peace / Commissioner of Oaths

A. I certify that the deponent has acknowledged that he / she knows and understands the contents of this declaration which was sworn to / affirmed before me and the deponents signature was placed thereon in my presence.

Signature: Justice of the Peace / Commissioner of Oath	Full Name and Surname	
	Designation	
	Business Address	
	Date	
	Place	