

## Vehicle & Operator Services Agency Smoky Vehicle Reporting Form

| Type of Vehicle (HGV or PSV) |  |
|------------------------------|--|
|                              |  |

Vehicle Registration Mark

Company Name (if apparent)

| Road Name/Number where vehicle seen |  |
|-------------------------------------|--|
|                                     |  |

| Date & Time of sighting |  |
|-------------------------|--|
|                         |  |

| Your Name & Address (not compulsory) |  |
|--------------------------------------|--|
|                                      |  |
|                                      |  |
|                                      |  |
|                                      |  |

Please send this form by either:

Email: Send as an attachment with 'Smoky Vehicles' in the subject line to <u>enquiries@vosa.gov.uk</u> Fax: 01792 454313

Post:

The Enquiry Unit

Vehicle & Operator Services Agency

Welcombe House

91-92 The Strand

Swansea

SA1 2DH

Alternatively, you can telephone the Enquiry Unit on 0870 6060440 and quote the above details.

An executive agency of the Department for **Transport**