**DECLARATION FORM**

We (*informants’ full names*)

1.…………………………………………………………………………………..I.D#.................................................................2........................................................................................I.D#..................................................................3........................................................................................I.D#..................................................................declare that we have examined this application, all accompanying statements and supporting documentation and to the best of our knowledge and belief, they are true, correct and complete. We further state that no ZIMRA employee has provided us with any information relating to the case we have reported on this form and that we are not a near relative of any person currently employed by ZIMRA.

We further declare that:

We are aware that even after completion of this form, if it is later discovered that the case is already being done or has been reported before we will be notified accordingly.

Signature…………………………………………………………………Date…………………………

Signature…………………………………………………………………Date…………………………

Signature…………………………………………………………………Date…………………………