

Claim number -

Site plan of accident (please draw vehicles, streets layout, traffic signs, traffic directions, etc.)

using the following signs: A – registration No. _____ B – registration No. _____ C – registration No. _____

| Before accident | During accident | Immediately after accident |
|--|-----------------|----------------------------|
| | | |

Additional information

Has the accident been reported to the police? – (please specify police unit and result of proceedings) yes no

Has the accident been reported to other institutions: fire service/ambulance/towing?* – (please specify name) yes no

Is the vehicle subject to co-ownership/assignment/use/pledge/lease? – (please specify name and address) yes no

- 1. _____
- 2. _____
- 3. _____

Is the damaged party VAT registered? – if "Yes", please fill in the following yes no

- 1. Is the vehicle a company vehicle? yes no
- 2. Is the vehicle entered in the fixed assets register? yes no
- 3. Is the vehicle mileage record kept? yes no
- 4. Is the damaged party entitled to deduct VAT from repair costs? – if "No" please state the reason yes no

Was the driver of the harmed party's vehicle under the influence of alcohol or other intoxicants during the accident? yes no N/A

Was the vehicle used with the owner's agreement? yes no

Has the damage been reported to a different insurer? – (please indicate name of the insurance company) yes no

Was there any previous non-fixed damage at the vehicle? – if yes, please specify yes no

Was any damage caused apart from damage to the vehicle or personal injuries? – (please list the damages, persons and injuries) yes no

Was the driver under the influence of alcohol or other intoxicants/escaped from the place of accident?* – (please specify) yes no N/A

Vehicle location (for technical inspection)

Address _____

Telephone and contact details _____

Payment instructions Bank account Assignment to repair workshop Postal order Will be provided later

Please transfer payment to the following bank account

Bank name _____

Account holder details _____

Please transfer payment to the repair workshop

Postal order to the following address

Repair workshop name _____

Address _____

Repair workshop address _____

Recipient name _____

I hereby agree to communicate exclusively via email regular mail registered mail

I hereby declare that the above-mentioned information is true and to the best of my knowledge.