

NOTIFICATION OF AN ACCIDENT WITH A THIRD PARTY

If you suffered damage for which a third party can be held liable, fill in Section A.
However, if you caused damage to a third party, please complete part B.

Do not use this declaration to declare an accident between two motor vehicles. In this case please use the European Accident Statement.

GENERAL DATA

Your name:

Address:

Phone nr:

Account number:

CLAIM

Damage Date:

Place l'accident/claim:

Was drawn up an police report?

PRnr:

Prepared by police zone:

tel:

Any witnesses?

Name:

Address:

Phone nr:

PART B: YOU CAUSED DAMAGE TO A THIRD PARTY

What happened exactly?

What damage have you caused?

Damage to property: (if damage to a motor vehicle, also provide make, model and license)

Physical damage:

Data from the party who has suffered damage

Name:

Address:

Phone nr:

Appropriate insurance plan and policy no:

Date:

Signature: