Agreed Statement of Facts on Motor Vehicle Accident

Does **not** constitute an admission of liability, but a summary of identities and of the facts which will speed up the settlement of claims.

Must be signed by BOTH drivers.

1. Date of accident | time

2. Place exact location of accident

3. Injuries even if slight ☐ no ☐ yes[1)]

4. Property demage other than to the vehicles A and B ☐ no ☐ yes

5. Witnesses names, addresses and tel. nos. *(to be underlined if it relates to passenger in A or B)*

Vehicle A

6. Insured policyholder *(see insurance cert.)* Name and address *(capital letters)*

Telephone *(home/office)*

Can the insured recover the VAT on the vehicle? ☐ no ☐ yes

7. Vehicle
Make, type

Registration No. *(or engine No.)*

8. Insurance company
Agent *(or broker)*

Policy No. | Green Card No. *(if issued)*

Ins. Cert. or Green Card – valid until

Is damage to the vehicle insured? ☐ no ☐ yes

9. Driver *(see driving licence)*
Surname *(capital letters)* | First Name

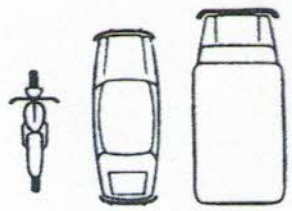
Address

Driving licence No. | Group

Issued by

Valid from | to

10. Indicate by an arrow the point of impact



11. Visible damage

14. Remarks

A

Vehicle B

6. Insured policyholder *(see insurance cert.)* Name and address *(capital letters)*

Telephone *(home/office)*

Can the insured recover the VAT on the vehicle? ☐ no ☐ yes

7. Vehicle
Make, type

Registration No. *(or engine No.)*

8. Insurance company
Agent *(or broker)*

Policy No. | Green Card No. *(if issued)*

Ins. Cert. or Green Card – valid until

Is damage to the vehicle insured? ☐ no ☐ yes

9. Driver *(see driving licence)*
Surname *(capital letters)* | First Name

Address

Driving licence No. | Group

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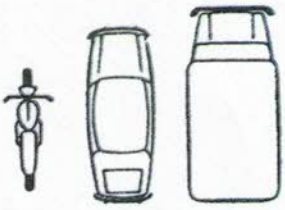
Valid from | to

10. Indicate by an arrow the point of impact



11. Visible damage

14. Remarks

B

12. Please mark relevant number

A			B
		Car	
☐	1	was parked	1 ☐
☐	2	started to drive	2 ☐
☐	3	stopping	3 ☐
☐	4	emerging from private property, from a field track	4 ☐
☐	5	entering from private property, from a field track	5 ☐
☐	6	entering a roundabout	6 ☐
☐	7	circulating in a roundabout	7 ☐
☐	8	hit the other vehicle from behind	8 ☐
☐	9	driving in the same direction but in a different lane	9 ☐
☐	10	changing lanes	10 ☐
☐	11	overtaking	11 ☐
☐	12	turning to the right	12 ☐
☐	13	turning to the left	13 ☐
☐	14	driving backwards	14 ☐
☐	15	entering the opposite traffic lane	15 ☐
☐	16	coming from the right	16 ☐
☐	17	ignoring the right of way	17 ☐
☐		**Total of marked numbers**	☐

13. Plan of the accident

Indicate:
1. the layout of the road
2. by arrows the direction of the vehicles A, B
3. their position at the time of impact
4. the road signs
5. names of the streets or roads

A **15. Signatures of the drivers** B

1) State name and address

Do not alter anything in the statement after signature and the separation of the copies for the two drivers