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 yes1) 4. Property demage 5. Witnesses names, addresses and tel. nos. (to be underlined if it relates to passenger in A or B) other than to the vehicles A and B no yes Vehicle A Vehicle B sured policyholder (see insurance cert.) Name and address (capital letters) Insured policyholder (see insurance cert.) Name and address (capital letters) Telephone (home/office) Telephone (home/office) 12. Please mark relevant number Can the Insured recover the VAT on the vehicle? Can the Insured recover the VAT on the vehicle? Car no no was parked 7. Vehicle 1 7. Vehicle Make, type Make, type started to drive 2 Registration No. (or engine No.) 3 stopping 3 Registration No. (or engine No.) emerging from private property, from a field track 4 8. Insurance company 8. Insurance company Agent (or broker) entering from private property, from a field track 5 5 Agent (or broker) 6 entering a roundabout Policy No Green Card No. (if issued) Policy No. Green Card No. (if issued) circulating in a roundabout 7 Ins. Cert. or Green Card - valid until Ins. Cert. or Green Card - valid until 8 hit the other vehicle from behind 8 Is damage to the vehicle insured? driving in the same direction but in a different lane Is damage to the vehicle insured? 9 no yes yes 10 changing lanes 10 9. Driver (see driving licence) 9. Driver (see driving licence) Surname (capital letters) First Name First Name Surname (capital letters) 11 overtaking 11 12 Address turning to the right 12 Address 13 turning to the left 13 14 driving backwards 14 Driving licence No Group Driving licence No Group 15 entering the opposite traffic lane 15 16 coming from the right Issued by 16 Issued by 17 ignoring the right of way 17 Valid from to Valid from Total of marked numbers 10. Indicate by an arrow 10. Indicate by an arrow the point of impact the point of impact 13. Plan of the accident 2. by arrows the direction of the vehicles A. R. Indicate 4. the road signs 1. the layout of the road their position at the time of impact 5. names of the streets or roads 11. Visible damage 11. Visible damage 15. Signatures of A В the drivers 14. Remarks 14. Remarks 1) State name and address Do not alter anything in the statement after signature and the separation of the copies for the two drivers

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