

This form is used to describe how the accident happened. It does not mean that anyone admits liability. Please have it completed by both drivers.

1. Date of accident

2026-05-14

Time

17:20

2. Place

Anastasioy Tsocha 43, Athina, GR

VEHICLE A

6. Policyholder/Insured

(see insurance certificate)

Surname

Papadopoulos

First name

Giorgos

Address

Anastasioy Tsocha 16, Athina

Postcode

115 21

Country

GR

Phone/ email

+30 694 123 4567

7.1 Motor vehicle

Make, type

Toyota Yaris

Registration number

IZA 4471

Country of registration

GR

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

Ethniki Insurance

Policy number

GR-2026-551083

Green Card number

GR/26/551083

Insurance certificate/Green Card valid

from

2026-01-01

to

2026-12-31

Agency (office or broker)

Name

Address

Leoforos Syngrou 103-105, 117 45 Athina

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☐ no

☒ yes

9. Driver

(see driving licence)

Surname

Papadopoulos

First name

Giorgos

Date of birth

1977-06-13

Address

Anastasioy Tsocha 16, Athina

Postcode

115 21

Country

GR

Phone/ email

+30 694 123 4567, g.papadopoulos@example.com

Driving licence no.

GR 4471820

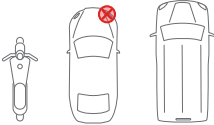
Category (A,B,...)

B

Licence valid until

2029-06-13

10. Indicate with an arrow the point of initial impact on vehicle A



11. Visible damage to vehicle A

14. Remarks

Dieschiza eytheia ti diastayrosi stin Anastasioy Tsocha, sti dexia lorida, me peripoy 40 chlm/ora. To ochima V irthe apo (...)

3. Injuries

Injured/slightly injured?

☒ no

☐ yes

4. Material damage

to vehicles other than A and B

☒ no

☐ yes

to objects other than vehicles

☒ no

☐ yes

12. Circumstances

Put a cross in each box that applies, to help explain the sketch. Cross out anything that does not apply.

A

01

☐

was parked / was stationary

02

☐

was leaving a parking place / was opening a car door

03

☐

was pulling into a parking place

04

☐

was leaving a car park, private property or a track

05

☐

was entering a car park, private property or a track

06

☐

was entering a roundabout

07

☐

was driving on a roundabout

08

☐

struck the rear of the other vehicle while going in the same direction and in the same lane

09

☐

was going in the same direction, but in a different lane

10

☐

was changing lanes

11

☐

was overtaking

12

☐

was turning right

13

☐

was turning left

14

☐

was reversing

15

☐

was crossing into the oncoming lane

16

☐

was coming from the right (at a junction)

17

☐

had ignored a priority sign or a red light

☐

Enter the number of boxes marked with a cross.

B

01

☐

02

☐

03

☐

04

☐

05

☐

06

☐

07

☐

08

☐

09

☐

10

☐

11

☐

12

☐

13

☐

14

☐

15

☐

16

☒

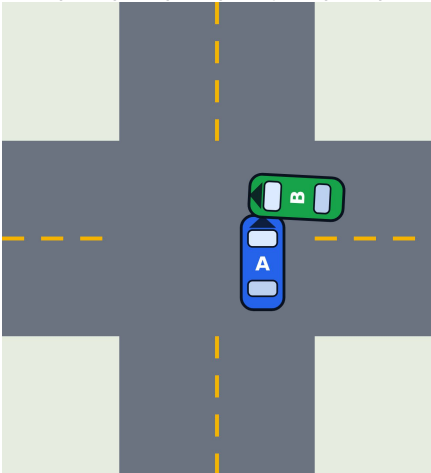
17

☒

2

13. Sketch of the accident at the moment of impact

Please show: 1. the lane layout 2. the direction of travel of vehicles A and B (with arrows) 3. their position at the moment of impact 4. road signs 5. street names



Both drivers must sign. Signing does not mean admitting liability - it only confirms the personal details and the description of the accident, which speeds up the claims process.

15. Signatures of both drivers

A



B



5. Witnesses

(underline passengers)

Names, addresses, phone numbers

Maria Dimitrioy, +30 694 100 0111

VEHICLE B

6. Policyholder/Insured

(see insurance certificate)

Surname

Georgioy

First name

Andreas

Address

Leoforos Makarioy 24, Leykosia

Postcode

1065

Country

CY

Phone/ email

+357 99 123456

7.1 Motor vehicle

Make, type

Nissan Qashqai

Registration number

KLM 447

Country of registration

CY

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

CNP Asfaltistiki Ltd

Policy number

CY-2026-778120

Green Card number

CY/26/778120

Insurance certificate/Green Card valid

from

2026-02-01

to

2027-01-31

Agency (office or broker)

Name

Address

Themistokli Dervi 15, 1066 Nicosia

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☒ no

☐ yes

9. Driver

(see driving licence)

Surname

Georgioy

First name

Andreas

Date of birth

1984-09-02

Address

Leoforos Makarioy 24, Leykosia

Postcode

1065

Country

CY

Phone/ email

+357 99 123456, a.georgiou@example.com

Driving licence no.

CY 8842130

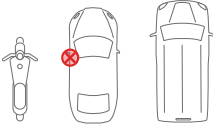
Category (A,B,...)

B

Licence valid until

2031-09-02

10. Indicate with an arrow the point of initial impact on vehicle B



11. Visible damage to vehicle B

14. Remarks

Plisiaza ti diastayrosi me tin Anastasioy Tsocha apo ta dexia, apo ton deytereiyonta dromo. Eida to ochima A poly (...)

easf.eu

| European Accident Statement

English

Annex - additional details

14. Notes (optional) (A)

Dieschiza eytheia ti diastayrosi stin Anastasioy Tsocha, sti dexia lorida, me peripoy 40 chlm/ora. To ochima V irthe apo ta dexia kai den moy parachorise proteraiotita. Zimies sto empros dexi ftero, ston profylaktira kai ston dexio provolea.

14. Notes (optional) (B)

Plisiaza ti diastayrosi me tin Anastasioy Tsocha apo ta dexia, apo ton deytereyonta dromo. Eida to ochima A poly arga kai den toy parachorisa proteraiotita. Zimies sto aristero plaino, sto ypsos tis mprostinis portas. Anagnorizo tin ypaitiotita moy.