

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

Rruga e Kavajes 112, Tirane, AL

VEHICLE A

6. Policyholder/Insured

(see insurance certificate)

Surname

Hoxha

First name

Agim

Address

Rruga e Kavajes 112, Tirane

Postcode

1020

Country

AL

Phone/ email

+355 69 123 4567

7.1 Motor vehicle

Make, type

Mercedes-Benz C-Class

Registration number

AA 447 KL

Country of registration

AL

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

SIGAL UNIQA Group Austria Sh.a.

Policy number

AL-2026-447182

Green Card number

AL/26/447182

Insurance certificate/Green Card valid

from

2026-01-01

to

2026-12-31

Agency (office or broker)

Name

Address

Rr. Sulejman Delvina, Nr.18, 1000 Tirana

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☐ no

☒ yes

9. Driver

(see driving licence)

Surname

Hoxha

First name

Agim

Date of birth

1985-04-11

Address

Rruga e Kavajes 112, Tirane

Postcode

1020

Country

AL

Phone/ email

+355 69 123 4567, agim.hoxha@example.com

Driving licence no.

AL 8842130

Category (A,B,...)

B

Licence valid until

2032-04-11

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

11. Visible damage to vehicle A

14. Remarks

Po kaloja drejt kryqezimin ne e Kavajes, ne korsine e djathte, me rreth 40 km/h. Automjeti B erdhi nga e djathta (...)

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

Anila Krasniqi, +355 69 100 0111

VEHICLE B

6. Policyholder/Insured

(see insurance certificate)

Surname

Rossi

First name

Mario

Address

Via Nomentana 685, Roma

Postcode

00141

Country

IT

Phone/ email

+39 333 1234567

7.1 Motor vehicle

Make, type

Fiat Panda

Registration number

FR 447 XK

Country of registration

IT

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

Generali Italia S.p.A.

Policy number

IT-2026-114770

Green Card number

IT/26/114770

Insurance certificate/Green Card valid

from

2026-02-01

to

2027-01-31

Agency (office or broker)

Name

Address

Piazza Duca degli Abruzzi 2, 34132 Trieste

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☒ no

☐ yes

9. Driver

(see driving licence)

Surname

Rossi

First name

Mario

Date of birth

1977-04-25

Address

Via Nomentana 685, Roma

Postcode

00141

Country

IT

Phone/ email

+39 333 1234567, mario.rossi@example.com

Driving licence no.

IT 8842130

Category (A,B,...)

B

Licence valid until

2029-04-25

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

11. Visible damage to vehicle B

14. Remarks

Mi avvicinavo all'incrocio con e Kavajes da destra, dalla strada secondaria. Ho visto il veicolo A troppo tardi e non gli (...)

easf.eu

| European Accident Statement

English

Annex - additional details

14. Notes (optional) (A)

Po kaloja drejt kryqezimin ne e Kavajes, ne korsine e djathte, me rreth 40 km/h. Automjeti B erdhi nga e djathta dhe nuk me dha perparesi. Demtime ne parafangon e perparme djathtas, ne parakolp dhe ne fenerin e djathte.

14. Notes (optional) (B)

Mi avvicinavo all'incrocio con e Kavajes da destra, dalla strada secondaria. Ho visto il veicolo A troppo tardi e non gli ho dato la precedenza. Danni alla fiancata sinistra, all'altezza della portiera anteriore. Riconosco la mia responsabilita.