

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

290 Fulham Palace Road, London, GB

VEHICLE A

6. Policyholder/Insured

(see insurance certificate)

Surname

Smith

First name

John

Address

290 Fulham Palace Road, London

Postcode

SW6 6HP

Country

GB

Phone/ email

+44 7700 900123

7.1 Motor vehicle

Make, type

Ford Focus

Registration number

LM71 XKD

Country of registration

GB

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

Aviva Insurance Limited

Policy number

AV-2026-447182

Green Card number

GB/26/447182

Insurance certificate/Green Card valid

from

2026-01-01

to

2026-12-31

Agency (office or broker)

Name

Address

St Helen's, 1 Undershaft, London EC3P 3DQ

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☐ no

☒ yes

9. Driver

(see driving licence)

Surname

Smith

First name

John

Date of birth

1984-07-22

Address

290 Fulham Palace Road, London

Postcode

SW6 6HP

Country

GB

Phone/ email

+44 7700 900123, john.smith@example.com

Driving licence no.

SMITH807224J99

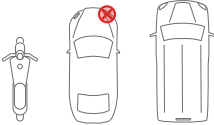
Category (A,B,...)

B

Licence valid until

2031-07-22

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



11. Visible damage to vehicle A

14. Remarks

I was driving straight across the junction along Fulham Palace Road in the right-hand lane at about 40 km/h. (...)

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

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12

☐

13

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14

☐

15

☐

16

☒

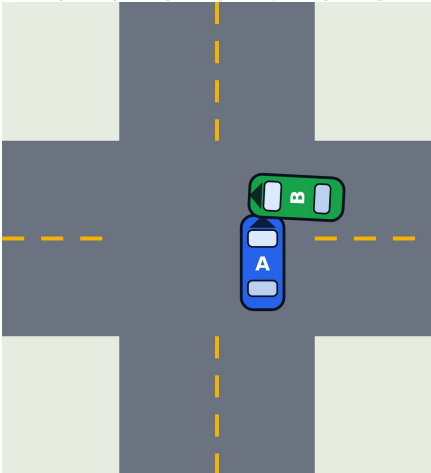
17

☒

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

Sarah Brown, +44 7700 900111

VEHICLE B

6. Policyholder/Insured

(see insurance certificate)

Surname

Murphy

First name

John

Address

14 Rathgar Road, Dublin

Postcode

D06 F8K2

Country

IE

Phone/ email

+353 86 1234567

7.1 Motor vehicle

Make, type

Toyota Corolla

Registration number

221-D-44718

Country of registration

IE

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

FBD Insurance plc

Policy number

IE-2026-778120

Green Card number

IE/26/778120

Insurance certificate/Green Card valid

from

2026-02-01

to

2027-01-31

Agency (office or broker)

Name

Address

FBD House, Bluebell, Dublin 12

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

☒ no

☐ yes

9. Driver

(see driving licence)

Surname

Murphy

First name

John

Date of birth

1980-05-30

Address

14 Rathgar Road, Dublin

Postcode

D06 F8K2

Country

IE

Phone/ email

+353 86 1234567, john.murphy@example.com

Driving licence no.

IE 55108422

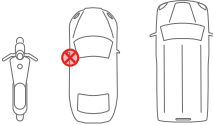
Category (A,B,...)

B

Licence valid until

2029-05-30

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



11. Visible damage to vehicle B

14. Remarks

I was approaching the junction with Fulham Palace Road from the right, on the minor road. I saw vehicle A too late (...)

easf.eu

| European Accident Statement

English

## Annex - additional details

### 14. Notes (optional) (A)

I was driving straight across the junction along Fulham Palace Road in the right-hand lane at about 40 km/h. Vehicle B came from the right and failed to give way. Damage to the front right wing, bumper and right headlight.

### 14. Notes (optional) (B)

I was approaching the junction with Fulham Palace Road from the right, on the minor road. I saw vehicle A too late and did not give way. Damage to the left flank, level with the front door. I accept fault.