

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

Trondheimsveien 210, Oslo, NO

VEHICLE A

6. Policyholder/Insured

(see insurance certificate)

Surname

Nordmann

First name

Ola

Address

Trondheimsveien 210, Oslo

Postcode

0964

Country

NO

Phone/ email

+47 412 34 567

7.1 Motor vehicle

Make, type

Volvo XC60

Registration number

AB 44718

Country of registration

NO

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

Gjensidige Forsikring ASA

Policy number

NO-2026-551083

Green Card number

NO/26/551083

Insurance certificate/Green Card valid

from

2026-01-01

to

2026-12-31

Agency (office or broker)

Name

Address

Schweigaards gate 21, 0185 Oslo

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

no

yes

9. Driver

(see driving licence)

Surname

Nordmann

First name

Ola

Date of birth

1981-09-05

Address

Trondheimsveien 210, Oslo

Postcode

0964

Country

NO

Phone/ email

+47 412 34 567, ola.nordmann@example.com

Driving licence no.

NO 5510842

Category (A,B,...)

B

Licence valid until

2031-09-05

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

11. Visible damage to vehicle A

14. Remarks

Jeg kjorte rett fram over krysset i Trondheimsveien i hoyre kjorefelt i omtrent 40 km/t. Kjoretøy B kom fra hoyre og (...)

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

02

03

04

05

06

07

08

09

10

11

12

13

14

15

16

17

was parked / was stationary

was leaving a parking place / was opening a car door

was pulling into a parking place

was leaving a car park, private property or a track

was entering a car park, private property or a track

was entering a roundabout

was driving on a roundabout

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

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

was changing lanes

was overtaking

was turning right

was turning left

was reversing

was crossing into the oncoming lane

was coming from the right (at a junction)

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

Kari Hansen, +47 401 00 111

VEHICLE B

6. Policyholder/Insured

(see insurance certificate)

Surname

Svensson

First name

Sven

Address

Sveavagen 112, Stockholm

Postcode

113 46

Country

SE

Phone/ email

+46 70 123 45 67

7.1 Motor vehicle

Make, type

Volvo V60

Registration number

ABC 447

Country of registration

SE

7.2 Trailer

Registration number

Country of registration

8. Insurance company

(see insurance certificate)

Company name

Folksam

Policy number

SE-2026-114770

Green Card number

SE/26/114770

Insurance certificate/Green Card valid

from

2026-02-01

to

2027-01-31

Agency (office or broker)

Name

Address

Bohusgatan 14, 106 60 Stockholm

Postcode

Country

Phone/ email

Is damage to the vehicle insured under the policy?

no

yes

9. Driver

(see driving licence)

Surname

Svensson

First name

Sven

Date of birth

1979-06-11

Address

Sveavagen 112, Stockholm

Postcode

113 46

Country

SE

Phone/ email

+46 70 123 45 67, sven.svensson@example.com

Driving licence no.

SE 8842130

Category (A,B,...)

B

Licence valid until

2028-06-11

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

11. Visible damage to vehicle B

14. Remarks

Jag narmade mig korsningen med Trondheimsveien fran hoger, fran den underordnade vagen. Jag sag fordon A for (...)

easf.eu

| European Accident Statement

English

Annex - additional details

14. Notes (optional) (A)

Jeg kjørte rett fram over krysset i Trondheimsveien i høyre kjørefelt i omtrent 40 km/t. Kjøretøy B kom fra høyre og overholdt ikke vikeplikten. Skader på høyre forskjerm, støtfanger og høyre frontlykt.

14. Notes (optional) (B)

Jag narmade mig korsningen med Trondheimsveien från höger, från den underordnade vägen. Jag såg fordon A för sent och lämnade inte företräde. Skador på vänster sida vid främre dörren. Jag erkänner vällandet.