

Because of the special nature of the Dutch Motor Traffic Guarantee Fund, it is important that you answer the following questions next to filling in the European Accident Report form. When you do not answer all of the questions, the handling of your request might suffer delay. The questions should be answered by the owner of the damaged object(s).

You are familiar with the fact that your data will be registered in the data base of the Dutch Motor Traffic Guarantee Fund. Your personal information will be processed in accordance with the General Data Protection Regulation (GDPR). More information (in Dutch) is available in our privacy statement at [www.https://waarborgfonds.vereeende.nl/privacy-statement](https://waarborgfonds.vereeende.nl/privacy-statement)

## 1 / Owner information

Surname and initials \_\_\_\_\_

Date of birth \_\_\_\_\_

Home address \_\_\_\_\_

Postal Code \_\_\_\_\_ City \_\_\_\_\_

E-mail address \_\_\_\_\_ Phone number \_\_\_\_\_

Bank account number / IBAN code \_\_\_\_\_

## 2 / How do you think the damage was caused?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 3 / When and where did you file a report with the police?

Date \_\_\_\_\_ Time \_\_\_\_\_ Station \_\_\_\_\_

## 4 / Do you know the identity of the opponent(s)?

No  Yes  No, but I do know the license plate number: \_\_\_\_\_

If not: what actions have you taken to retrieve the opponent's identity?

\_\_\_\_\_  
\_\_\_\_\_

If you do: have you sent them a letter in which you declare them to be liable for your damage(s)?

No  Yes (please include a copy of the letter or other communication)

Is the opponent a personal acquaintance of yours?  No  Yes

Why do you think that the opponent will not compensate you for your damage(s)?

\_\_\_\_\_

## 5 / Did you suffer any physical injuries?

No  Yes

If yes: please describe your injuries:

\_\_\_\_\_  
\_\_\_\_\_

*We may contact you for further information. In most cases we will contact you by phone and/or e-mail, but in certain cases we prefer personal conversation. We may ask you to identify yourself by sending us a copy / scan / photograph of your identification. After inspection the received file will be immediately destroyed.*

Location \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_