

GREEN CARD BUREAU

Indemnification request

Date of accident:		Place of accident:	
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DAMAGED PERSON:

No.	Name, address, phone number	ID number	Damage type (round off)	
1.			Object	Person
2.			Object	Person
3.			Object	Person
4.			Object	Person

DAMAGED VEHICLE:

Registration plate number:	
Brand and type of vehicle:	
Owner: (name, address, phone number, ID)	
Driver: (name, address, phone number, ID)	

VEHICLE CAUSING DAMAGE:

Registration plate and country of origin:	
Brand and type of vehicle:	
Owner: (name, address)	
Driver: (name, address)	
Green card / policy insurance number:	
Insurance company:	

ACCIDENT DESCRIPTION:

DRAFT OF ACCIDENT LOCATION:

(vehicle position at the moment of accident, traffic signaling, accident marks)

Note: To be filled by the applicant and submitted along with the following documents:

Police report (original or certified copy) or EU Accident Protocol, Vehicle damage report with photographs (original), Misdemeanor/Criminal Court Verdict (original or certified copy), Offender's Green Card, Medical documents (original or certified copy), invoices/expert's survey calculation, copy of the Vehicle Registration Permit, Copy of Driver's License, Copy of ID (passport).

For veracity of information provided in this indemnification claim regarding damage cause, I am accountable morally and materially, bearing all the consequences resulting from it.

I hereby authorize the Association of Serbian Insurers – Green Card Bureau, that personal data and particularly sensitive data from submitted documentation and the documents submitted thereto can be used for the purpose of processing requests.

Date: _____

Claimant: _____