

Notification of Claim

Claim no. _____

Excess Guarantee For Hired Vehicles

Dear Client

In order to be able to perform services in a swift and uncomplicated manner, we require several important details from your part. Please fill in thoroughly the damage report and attach, if applicable, the following documents:

- Booking confirmation from organiser/operator
- Contract with the vehicle
- Original receipts/evidence of debit to a credit card
- Repair bill (if existing)
- Photos of the damage
- Insurance policy/card (copy)

If you are not able to answer any question, please note the reason why.

Questions concerning the policyholder (eligible person)

Name: _____

First name: _____

Date of birth: _____

Street/no.: _____

Zip code/city: _____

Phone (day time): _____

E-mail address: _____

Account Number (IBAN): _____

Bank Code (BIC/SWIFT): _____

Name and address of the bank: _____

Questions concerning the hired vehicle

1. Brand: _____

Type: _____

Questions about the insurance

2. Date of purchase of policy or payment of premium: _____

3. Validity of the insurance _____

from: _____

to: _____

4. Who arranged/concluded the insurance? _____

5. Insurance policy/membership card no.: _____

6. Do other insurances exist for this incident? _____

yes no

7. If yes, which ones? _____

8. Has already any reimbursement been made or applied from another party? _____

yes no

9. If yes, through whom? _____

Questions about the incident

10. Does it refer to a

Breakdown Theft Accident

others:

11. When did the incident happen:

Date:

Place:

12. Was there a need to tow the vehicle?

yes no

13. Detailed summary of the case:

14. Did the damage occur due to a third party's fault?

yes no

15. Name and address of the causer:

16. Was the police involved?

yes no

17. If no, please mention the reason:

I assume responsibility for the correctness/accuracy of the details I have given. I know/am aware that I will lose insurance cover if I intentionally or negligently give incorrect or incomplete details, even if they do not have any consequences for the assessment of the case. I commit myself to notifying EUROPEAN Travel Insurance AG immediately, if I have further details about the perpetrator or if a subsequent credit has occurred and I hereby authorize EUROPEAN Travel Insurance AG to the inspection of records and to demand documents/files for further enquiries.

Place and Date

Signature of the insured person or his/her legal representative