



{ Atlas Front-To-Rear ***Collision Form***

In the case of **front-to-rear** collisions, there is no need to call the Local Wardens or Police

F'każ ta incident **front-to-rear**, m'hemmx bżonn iċċempel lill-Gwardjani Lokali jew Pulizija



Atlas
Insurance

atlas.com.mt

HOW TO USE THESE FORMS IN FRONT-TO-REAR COLLISIONS

Each driver who is involved in a front-to-rear collision should fill in and exchange a copy of this form with the other driver. In all other collisions the Local Wardens should be called to the site of the accident (tel: 2132 0202). The police must also be informed in case of injuries or damage to Government property.

If a driver does not follow these instructions, he will be breaking the law.

At the scene of the accident

Only one Statement of Facts on a front-to-rear collision is to be used. When the accident involves more than two vehicles, a second form should be used.

The Statement of Facts is self carbonised. Preferably using a ball-point pen, complete fully either the yellow or the green part of the Statement of Facts. The other driver is to complete the other coloured section pertaining to the second vehicle.

Obviously both drivers will need to refer to their insurance certificate and driving licences for the relevant details.

Obtain details of all witnesses before they leave in order to complete question 5.

When you are satisfied with the accuracy of the statement, sign it and have it signed by other driver (15). Keep one copy and hand the other to the other driver.

Do not forget to:

Mark clearly under (10) the point of initial impact.

Tick () in each appropriate square on your side (number 1 to 7) in section 13 and insert the total number of boxes marked.

Draw a plan of the accident location (14) showing all the information indicated.

It is advisable to take photographs of the collision, so as to have better proof of the circumstances.

When you return home

Fully complete the **Motor Accident Report** on the back of your version of the **Statement of Facts**. This is your own report to your insurers, and in case of need, your insurance company will help you fill in this report.

Immediately inform your insurers about the accident and deliver this form to them which includes (i) the Statement of Facts and (ii) Motor Accident Report.

Data and Privacy Protection

Atlas Insurance PCC Limited and/or any other subsidiaries of Atlas Holdings Limited or any of its daughter companies (hereinafter 'Atlas', 'Us', 'Our', 'We') are the data controllers, as defined by relevant data protection laws and regulations, of personal data held about you or relating to you and/or to any other person/s whom you insure with Atlas (hereinafter 'Others').

In completing all the forms related to your policies or claims, you confirm your understanding and acceptance of the terms in Atlas's Data Protection and Privacy Statement. You hereby warrant that you have informed Others why We asked for this information and what We will use it for and have obtained the necessary explicit verbal consent.

Atlas collects and processes information about you and Others for purposes which include carrying out its contractual obligations including handling and settling of claims, and preventing or detecting crime (including fraud). Atlas may monitor calls to and from customers for training, quality and regulatory purposes.

Atlas may collect and disclose your and Others' information from/to other entities in order to conduct Our business including:

managing claims, which may require obtaining data including medical information from healthcare providers (including any public or private hospital or clinic) and/or your employers (for company schemes) and which you hereby authorise; administering policies with insurance brokers or other intermediaries appointed by the policyholder; helping Us prevent or detect crime by sharing your information with regulatory and public bodies in Malta or, if applicable, overseas, including the Police, as well as with other insurance companies (directly or via shared databases such as the Malta Insurance Fraud Platform), or other agencies or appointed experts to undertake credit reference or fraud searches or investigations; and/or

Our third party suppliers or service providers to whom We outsource certain business operations.

We will retain data for the period necessary to fulfil the above-mentioned purposes unless a longer retention period is required or permitted by law.

You have the right to access your personal data and ask Atlas to update or correct the information held or delete such personal data from Our records if it is no longer needed for the purposes indicated above. You may exercise these and other rights held in Atlas's Data Protection and Privacy Statement, by contacting Our Data Protection Officer at The Data Protection Officer, Atlas Insurance PCC Limited, 48-50 Ta' Xbiex Seafront, Ta' Xbiex XBX 1021 Malta or email dpo@atlas.com.mt. Please note, however, that certain personal information may be exempt from such access, correction or erasure requests pursuant to applicable data protection laws or other laws and regulations.

If you and Others consider that the processing of personal data by Atlas is not in compliance with data protection laws and regulations, you and Others may lodge a complaint with Us and/or the Office of the Information and Data Protection Commissioner by following this link <https://idpc.org.mt/file-a-complaint/>.

If you wish to view the full Atlas's Data Protection and Privacy Statement, for a better understanding of how We use this data please visit <https://www.atlas.com.mt/legal/data-protection/>.

KIF TUŽA L-FORMOLA F'KAŽ TA' INĆIDENT FRONT-TO-REAR

Kull sewwieq li jkun involut f'inćident front-to-rear għandu jimla' din il-formola, u jagħti kopja lis-sewwieq l-ieħor.

Fil-każijiet l-oħra kollha, il-Gwardjani Lokali għandhom jiġu msejħa fuq il-post tal-inćident (tel: 2132 0202). F'kaž ta'korriement jew ħsara lill-propjeta tal-Gvern għandek tinforma lill-Pulizija.

Jekk xi sewwieq ma jsegħix dawn l-istruzzjoni jiet ikun qed jikser il-ligi.

Fuq il-post tal-inćident

Għandha timtela Dikjarazzjoni dwar Inċident tat-Traffiku waħda biss. Meta l-inċident jinvolvi aktar minn żewġ vetturi għandha tintu t-tieni formola.

Id-Dikjarazzjoni dwar Inċident tat-Traffiku hija self-carbonised. Għalhekk użza biro u agħħas sew, biex il-kopja tkun tingħara. L-ewwel sewwieq irid jmla l-parti s-safra jew il-parti il-hadra tad-Dikjarazzjoni. Is-sewwieq l-ieħor irid jmla l-parti kkulurita l-oħra li tirreferi għat-tieni vettura. Biex tagħmlu dan, ikollkom bżonn tirreferu għaċ-ċertifikati tal-assigurazzjoni u l-licenzijsi tas-sewqan.

Jekk kien hemm xi xhieda li raw l-inċident, ġudilhom isimhom u l-indirizz tagħhom qabel ma jitilqu ħalli tkun tista' timla taqsima 5.

Meta thossox sodisfatt bid-Dikjarazzjoni, iffirmsaha u ara li tiġi ffurmata mis-sewwieq l-ieħor (taqsima 15). Folja mid-Dikjarazzjoni għandha tingħata lis-sewwieq l-ieħor, filwaqt li inti għandek izomm il-folja l-oħra.

Tinsiekk:

Turi bi preċiżjoni fejn seħħi l-ewwel impatt, permezz ta' vlegġġa fit-taqṣima (10).

Tagħmel sinjal () f'kull kaxxa li tiddiskrivi kif seħħi l-inċident (numru 1 sa 7) fit-taqṣima (13) u niżżeq in-numru totali ta' kaxxi li mmarkajt.

Tpinġi pjanta tal-inċident fit-taqṣima (14), u timmarka l-informazzjoni kollha meħtieġa.

Ikun tajjeb li tiehu ritratti tal-inċident biex ikollok prova aħjar tal-fatti.

Meta tirritorna d-dar

Imla l-parti ta' wara tal-formola. Din hija l-verżjoni tiegħek tal-fatti li ġraw, li ser issegwi l-kumpanija tal-assigurazzjoni tiegħek.

F'kaž ta' bżonn, tista' tirrikorri għand l-assigurazzjoni tiegħek biex jgħinuk timla l-parti ta' wara tal-formola.

Minnu fu informa l-kumpanija tal-assigurazzjoni b'dan l-inċident u aġħtihom din il-formola li tinkludi (i) d-Dikjarazzjoni ta' l-inċident u (ii) ir-rapport personali tiegħek, fuq il-parti ta' wara.

Protezzjoni u l-Privatezza tad-Data

Atlas Insurance PCC Limited u/jew is-sussidjarji ta' Atlas Holdings Limited jew mill-kumpaniji sussidjarji tagħha (hawn taħt imsejħa 'Atlas', 'Aħna', 'Tagħna', 'Magħna') hija l-kontrollatur tal-informazzjoni personali tiegħek jew relatata miegħek jew ma kwalunkwe persuna li qed tassigura ma' Atlas (hawn taħt imsejħa 'l-Oħrajn'), u dan skond il-liġijiet u regolamenti relevanti fuq il-Protezzjoni u l-Privatezza tad-Data.

Billi timla l-formoli relatati mal-polza tal-assigurazzjoni jew mal-claim tiegħek, inti qed tikkonferma li fhimt u aċċettajt it-termini stipulati fid-Dikjarazzjoni dwar il-Protezzjoni u l-Privatezza tad-Data ta' Atlas. B'dan tikkonferma wkoll li inti infurmajt lill-Oħrajn bir-raġunijiet li għalihom Aħna tħlabna għal din l-informazzjoni u l-għanġiet li għalihom Aħna ser naħħmu użu minnha, kif ukoll li ksib il-kunsens verbali espliċitu neċċessaru.

Atlas tiġib u tipproċċesa informazzjoni fuqek u fuq Oħrajn għal raġunijiet li jinkludu, it-twettieq tal-obbligazzjonijiet kuntrattwali Tagħna li jinkludu l-amministrazzjoni u l-ħlas tal-claims, u l-prevenzjoni jew l-iżvelar ta' kriminalità (li tinkludi frodi). Atlas tista' wkoll tirrekordja telefonati magħmulu lil u mingħand konsumaturi għal raġunijiet ta' taħbi, kwalità u għal skopijiet regolatorji.

Atlas tista' wkoll tiġib u tiżvela informazzjoni tiegħek u ta' Oħrajn mingħand/lil entitajiet oħra sabiex Aħna nkunu nistgħu nikkonduċu n-negozju Tagħna li jinkludi:

I-amministrazzjoni ta' claims, li jirrikjedu li Aħna niksbu data li tinkludi informazzjoni medika mingħand forniture tal-kura tas-saħħha (li jinkludu kwalunkwe sptar jew klinika tal-gvern u privati) u/jew min iħaddem (għal poloz ta' grupp);

I-amministrazzjoni ta' poloz tal-assigurazzjoni ma' intermedjarji appuntati mid-detentur tal-polza;

Il-prevenzjoni jew l-iżvelar ta' kriminalità permezz ta' žvelar tal-informazzjoni tiegħek ma' korpi regolatorji jew pubbliċi

Maltin jew, jekk applikabbli, korpi regolatorji jew pubbliċi barranin, li jinkludu l-Kummissarju tal-Pulizija, kif ukoll kumpaniji tal-assigurazzjoni oħrajn (b'mod dirett jew permezz ta' database kondivisa bħal 'Malta Insurance Fraud Platform'), jew aġenzjji oħrajn jew esperti appuntati għall-iskop ta' riċerki dwar il-kwalità tal-kreditu tiegħek u riċerki u investiġazzjoni rigward frodi; u/jew

Fornituri ta' servizzi terzi ta' Atlas marbutin mal-funzjonijiet u attivitajiet li jkunu ġew outsourced.

Atlas iżżomm id-data tiegħek u ta' Oħrajn għall-perjodu neċċessarju sabiex jiġu sodisfatti l-iskopijiet surreferiti, sakemm ma jkun hemm raġuni li teħtieg perjodu ta' retenzjoni itwal jew fejn il-liġi tippermetti dan.

Għandek id-dritt li taċċessa d-data personali tiegħek u titlob lil Atlas sabiex jaġġornaw jew jikkoreġu tali informazzjoni jew sabiex iħassru l-istess informazzjoni mir-rekordi Tagħna, jekk ma tkunx għadha neċċessarja għall-iskopijiet surreferiti. Inti tista' też-zerċita dawn id-drittijiet u oħrajn speċifikati fid-Dikjarazzjoni u l-Privatezza tad-Data ta' Atlas billi tikkuntatt ja l-Ufficijal għall-Protezzjoni tad-Data Tagħna fuq 'The Data Protection Officer, Atlas Insurance PCC Limited, 48-50, Ta' Xbiex Seafront, Ta' Xbiex XBX 1021, Malta jew b'email dpo@atlas.com.mt. Madanakollu, ġentilment ninfurmawlk li certa informazzjoni personali tista' tkun ex-żebda mill-imsemmija talba għall-accress, korrezzjoni jew thassir, skond il-liġijiet u regolamenti dwar l-protezzjoni ta' data applikabbli.

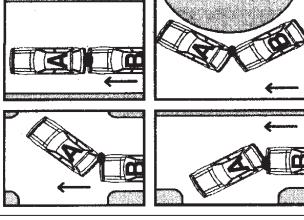
Jekk inti jew Oħrajn temmnu li l-iproċċessar tad-data personali tiegħek jew ta' Oħrajn minn Atlas mhux qed isir skond il-liġijiet u regolamenti dwar il-protezzjoni ta' data, tistgħu tressqu l-ilmenti tagħkom Magħna jew/u quddiem il-Kummissarju għall-Informazzjoni u l-Protezzjoni tad-Data billi ssegwi dan u l-link: <https://idpc.org.mt/file-a-complaint/>.

Jekk tixtieq tara l-verżjoni dettaljata tad-Dikjarazzjoni dwar il-Protezzjoni u l-Privatezza tad-Data ta' Atlas, sabiex tifhem b'mod aħjar kif Aħna naħħmu użu mid-data tiegħek u ta' Oħrajn, tista' tagħmel dan skond il-liġijiet u regolamenti dwar l-protezzjoni ta' data <https://www.atlas.com.mt/legal/data-protection/>.

Dikjarazzjoni dwar Incident tat-Traffiku: Front-to-Rear

Din id-dikjarazzjoni ma titqesx ammissjoni ta' responsabilità, iżda tikkonstitwixi tagħrif dwar il-persuni involuti u l-fatti sabie ix-claim ikun jista' jiġi mgħarbel malajr

TRID TIĞI FFIRMATA MIZ-ŻEWG SEWWIEQA

1. Data u hin tal-incident	2. Post tal-incident	3. Korra xi ħadd (anke halif) IVA <input type="checkbox"/> LE <input type="checkbox"/>		
4. Hsarat materjalji appari i-hsara fil-vettura A jew B, hemm xi hsara oħra? LE <input type="checkbox"/>	5. Xhieda ismijiet, indirizzi, numri tat-telefon/mobile u ID (Uri jekk ix-xhud kienx passiġġier, fil-każ f'liema vettura)			
6. Vettura A Reg _____ Ghamlu /tip _____ 7. Sid il-vettura (ara c-ċertifikat tal-insurance jew logbook) Isem u Kunjom _____ ID Nru. _____ Indirizz _____ Telefon/Mobile _____ E-mail _____ 8. Sewwieq (ara l-iċċenzja tas-sewquan) Isem u Kunjom _____ ID Nru. _____ Indirizz _____ Telefon/Mobile _____ E-mail _____ Nru tal-ċiċċenza tas-sewquan _____ Grupp _____ Valida sa _____ 9. Kumpanija tal-Assigurazzjoni (ara c-ċertifikat) Isem _____ Numru tal-Polza _____ Valida sa _____		13. Čirkostanzi Agħmel sinjal (✓) f'kull kaxxa relevanti biex tispjega l-pjanta ta' l-incident (14) <input type="checkbox"/> 1. hbatt mal-parti ta' wara tal-vettura l-ohra <input type="checkbox"/> 2. waqt li kont miexi fl-istess direzzjoni <input type="checkbox"/> 3. waqt li kont miexi fl-istess lane <input type="checkbox"/> 4. waqt li kont miexi f'lane oħra <input type="checkbox"/> 5. waqt li kont qed naqleb minn lane għal oħra <input type="checkbox"/> 6. waqt li kont qed naqla' vettura oħra <input type="checkbox"/> 7. hbatt mal-quddiem tal-vettura l-ohra waqt li kont qed nirversja <input type="checkbox"/> numru totali ta' kaxxa li mmarkajt Jekk xi pjanta minn dawn ta' hawn taħta tiddiskrivi l-incident immarkaha (✓) u żid l-ismijiet tat-toroq u s-sinjalji tat-traffiku 		
6. Vettura Reg _____ Ghamlu /tip _____ 7. Sid il-vettura (ara c-ċertifikat tal-insurance jew logbook) Isem u Kunjom _____ ID Nru. _____ Indirizz _____ Telefon/Mobile _____ E-mail _____ 8. Sewwieq (ara l-iċċenzja tas-sewquan) Isem u Kunjom _____ ID Nru. _____ Indirizz _____ Telefon/Mobile _____ E-mail _____ Nru tal-ċiċċenza tas-sewquan _____ Grupp _____ Valida sa _____ 9. Kumpanija tal-Assigurazzjoni (ara c-ċertifikat) Isem _____ Numru tal-Polza _____ Valida sa _____		10. Uri bi vleġġa fejn seħħi l-ewwel impatt 		10. Uri bi vleġġa fejn seħħi l-ewwel impatt 
11. Hsarat li jidheru 12. Trid iżżejjid xi haġa oħra? 		14. Pjanta tal-incident Uri 1. it-tqassim tat-toroq 2. bi vleġġa d-direzzjoni tal-vetturi A, B 3. il-pożizzjoni tagħhom meta saret il-habta 4. is-sinjalji tat-traffiku 5. l-ismijiet tat-toroq		10. Uri bi vleġġa fejn seħħi l-ewwel impatt 
11. Hsarat li jidheru 12. Trid iżżejjid xi haġa oħra? 		15. Firma tas-sewwieqa Tal-Vettura A _____ Tal-Vettura B _____		

Tibdel xejn minn din id-dikjarazzjoni wara li tiġi ffirmata u wara li tingħata l-kopja lis-sewwieq l-ieħor

ENGLISH VERSION ON NEXT PAGE

Rapport tal-Incident mill-Assigurat

Timela mill-Assigurat biex tinghata minnufiha lill-Assigurazzjoni wara l-Incident

(Uža folja ohra fejn ikun meħtieġ)

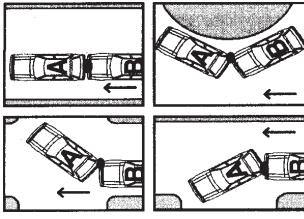
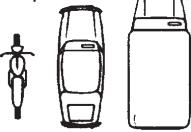
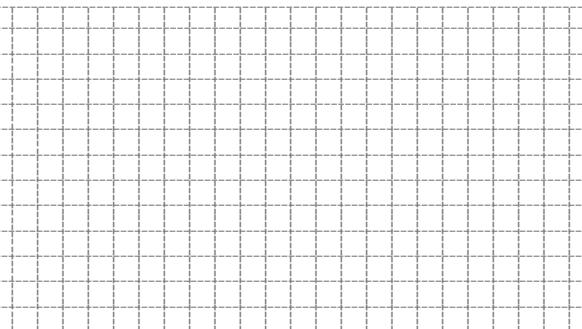
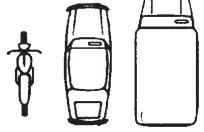
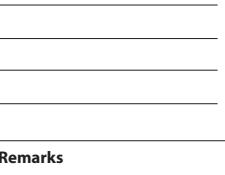
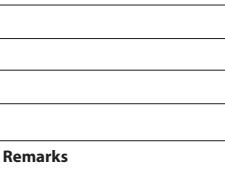
L-Assigurat	1. Isem _____ Karta ta' l-identità/Passaport _____ Xogħlu _____												
	2. Għamla / Mudell / Tip	CC	F'kaz ta' vettura kummercjaluri carrying capacity	Data ta' l-ewwel registrazzjoni bhala vettura ġidha	Numru tar-registrazzjoni								
II-Vettura Assigurata	3. Inti sid il-karozza?		<input type="checkbox"/> Iva <input type="checkbox"/> Le	Jekk le, aqhti isem sidha, u l-indirizz tiegħu									
	4. L-għan eżatt li għaliex kienet qed tintuża l-vettura meta ġara l-Incident												
	5. Il-vettura għadha tintuża?		<input type="checkbox"/> Iva <input type="checkbox"/> Le	Jekk le, għid fejn hi issa. Numru tat-telefon									
	6. Ghandek xi dejn fuq il-karozza? (Jekk iva, ma' min?)												
Is-Sewwieq jew il-Persuna l-ohra li għandha f'iddejha l-Vettura (Jekk huwa i-Assigurat innifsu, imla din il-parti fejn meħtieġ)	7. Data tat-Twelid	Karta tal-Identità Passaport	Xogħlu	Data li fiha għadda mid-Driving test	Kien qed isuq bil-permess tiegħek? <table border="1"><tr><td>Iva</td><td></td><td>Le</td><td></td><td>Iva</td><td></td><td>Le</td></tr></table>	Iva		Le		Iva		Le	Huwa l-Impjegat tiegħek?
	Iva		Le		Iva		Le						
	8. Aqhti tagħrif dwar nuqqas ta' vista, smiegh jew diżabbilità oħra.												
	9. Dettalji sħah rigward kundanni dwar sewqan jew prosekuzzjoni pendienti												
Data		Reat		Penali									
Persuni Feruti	10. Isem, indirizz u età		Korrimenti li sofrej		Jekk passiġieri f'xi vettura għid liema?	Kienu qed jintużaw seat belts jew crash helmets?							
Msara l-Propjeta u l-İll-Vetturi (minbarra l-Vettura 'A' u 'B' murja fuq il-parti l-ohra ta' din il-formola)	11. Isem u l-indirizz tas-sidien		Dettalji tal-vettura jew propjetà	Tip ta' Msara	Isem u l-indirizz tal-Assigurazzjoni								
Azzjoni mill-Pulizija	12. L-inċident ġie rrapporat l-İll-Pulizija?					Jekk iva, aqhti r-rank u isem il-pulizija u n-numru tiegħu							
	<input type="checkbox"/> Iva <input type="checkbox"/> Le												
	13. Ĝejt avżat jekk il-pulizija humiex ser jieħdu passi? Jekk iva, kontra min?												
	<input type="checkbox"/> Iva <input type="checkbox"/> Le												
Dettalji dwar l-Inċident	14. X'temp kien?												
	<input type="checkbox"/> A <input type="checkbox"/> B												
	16. Inghata xi sinjal (horn, indicators, ecc.) mis-sewwieq jew mill-parti l-ohra?												
	<input type="checkbox"/> Iva <input type="checkbox"/> Le												
	18. Xi dwal kellek fil-vettura tiegħek / fil-vettura l-ohra?												
	19. Jekk il-vettura tiegħek hija kummerċjali, kemm kienet tiżen it-taghbiha li kellek meta ġara l-Inċident?												
	20. Kemm kienu qed jingħarru passiġieri (Minbarra d-driver) fil-vettura meta ġara l-Inċident?												
	21. Ghid kif ġara l-Inċident, u aqhti dettalji dwar il-wisgħa tat-toroq, u l-ispeed limits ecc.												
22. Fl-opinjoni tiegħek ta' min hija ir-responsabbiltà?													
Tieghi <input type="checkbox"/>		Tat-Tnejn <input type="checkbox"/>	No Comment <input type="checkbox"/>										
Dikjarazzjoni	Niddikjara/w li t-tagħrif mogħti hawnhekk huwa veru f'kull aspett												
	Firma tal-Assigurat _____ Data _____												



Statement of Facts on a Front-to-Rear Collision

This statement is not an admission of liability but a summary of identities and of the facts which will speed up processing of claims.

MUST BE SIGNED BY BOTH DRIVERS

1. Date and Time of Accident		2. Exact Location of Accident		3. Injuries (even if slight) YES <input type="checkbox"/> NO <input type="checkbox"/>
4. Property Damage YES <input type="checkbox"/> other than to vehicles A and B NO <input type="checkbox"/>		5. Witnesses names, addresses, telephone/mobile numbers and ID (indicate if passenger, and, if so, in which vehicle)		
6. Vehicle VEHICLE A Reg Plate _____ Make/Type _____		13. Circumstances Tick (✓) each of the relevant boxes to explain the plan of the accident (14)		VEHICLE B Reg Plate _____ Make /Type _____
7. Owner (see insurance certificate or logbook) Name & Surname _____ ID No. _____ Address _____ Telephone/Mobile _____ E-mail _____		<input type="checkbox"/> 1. striking the rear of the other vehicle <input type="checkbox"/> 2. whilst going in the same direction <input type="checkbox"/> 3. whilst travelling in the same lane <input type="checkbox"/> 4. whilst travelling in a different lane altogether <input type="checkbox"/> 5. whilst changing lanes <input type="checkbox"/> 6. whilst overtaking <input type="checkbox"/> 7. striking the front of the other vehicle whilst reversing <input type="checkbox"/> state total number of ticked boxes		7. Owner (see insurance certificate or logbook) Name & Surname _____ ID No. _____ Address _____ Telephone/Mobile _____ E-mail _____
8. Driver (see driving licence) Name & Surname _____ ID No. _____ Address _____ Telephone/Mobile _____ E-mail _____ Driving Licence Number _____ Group _____ Valid up to _____				8. Driver (see driving licence) Name & Surname _____ ID No. _____ Address _____ Telephone/Mobile _____ E-mail _____ Driving licence number _____ Group _____ Valid up to _____
9. Insurance Company (see insurance certificate) Name _____ Policy Number _____ Valid up to _____		If any of the plans shown below describe this collision, you can adopt by ticking it (✓) and adding any relevant road signs and the names of the streets. 		9. Insurance Company (see insurance certificate) Name _____ Policy Number _____ Valid up to _____
10. Show with an arrow the point of initial impact 		14. Plan of accident Indicate 1. the layout of the road 2. by arrows the direction of vehicles A, B 3. their position at time of impact 4. the road signs 5. the names of streets. 		10. Show with an arrow the point of initial impact 
11. Visible Damage 				11. Visible Damage 
12. Remarks 		On behalf of myself and any witnesses specified in this form, I consent to the processing of our personal data by the Insurance Companies and the Malta Insurance Association for the purposes stated on this form and I confirm that I have brought the Data Protection Notice to the attention of these witnesses.		12. Remarks 
15. Signatures of drivers		Of Vehicle A	Of Vehicle B	

Do not alter anything in this statement after it is signed and a copy is handed to the other driver

MOTOR ACCIDENT REPORT

To be completed by the Insured and sent immediately to his Insurers

(Use a separate sheet of paper where necessary)

Insured	1. Name _____ Identity card/Passport number _____ Occupation _____									
	2. Make / Model / Type	C.C.	If commercial vehicle state carrying capacity	Date of first registration as new	Registration mark					
Insured Vehicle	3. Are you the Owner?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, state Owner's name and address					
	4. Exact purpose for which vehicle was being used at the time of accident									
	5. Is the vehicle still in use?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, state where it is at present Tel: No:-					
	6. Name and address of Finance Company (if any)									
	Driver or Person in charge of Vehicle (If the Insured complete this section as appropriate)	7. Date of Birth	Identity Card/Passport No.	Occupation	Date Driving test passed	Was he driving with your permission <table border="1" style="margin-left: auto; margin-right: auto;"><tr><td>Yes</td><td>No</td><td>Yes</td><td>No</td></tr></table>	Yes	No	Yes	No
Yes		No	Yes	No						
8. Give details of any impairment of sight or hearing and of any other disability										
9. Full details of all driving convictions including pending prosecutions										
Date	Offence			Penalty						
Injured Persons	10. Name(s), Address(es), and approximate Age(s)		Injuries Sustained		If Vehicle Occupants state in which vehicle	Were seat belts/ crash helmets being worn?				
Damage to Property & Vehicles (other than vehicles 'A' & 'B' overleaf)	11. Owner(s) Name(s) and Address(es)		Details of Vehicle or Property	Nature of Damage	Insurer's Name and Address (if known)					
Police Action	12. Was the accident reported to the Police? If yes give station and P.C.'s name and number									
	<input type="checkbox"/> Yes	<input type="checkbox"/> No								
	13. Was warning or prosecution given? If yes, against whom?									
	<input type="checkbox"/> Yes	<input type="checkbox"/> No								
Accident Details	14. Weather conditions									
	15. Speed of vehicles A _____ B _____									
	16. What warnings were given by driver or other party?									
	17. Were street lights illuminated? <input type="checkbox"/> Yes <input type="checkbox"/> No									
	18. What lights were displayed on your vehicle / other vehicle(s)?									
	19. If your vehicle is commercial state weight of load carried at time of accident									
	20. How many passengers (besides the driver) were being carried at the time of the accident?									
	21. State how accident happened, including width of road, speed limits, etc.									
22. Who in your opinion is to blame for the accident?										
Self <input type="checkbox"/> Both <input type="checkbox"/> No Comment <input type="checkbox"/>										
Declaration	I/We declare the foregoing particulars are true in every respect									
	Insured's Signature _____ Date _____									



RoadAssist

2122 2111*

* if shown as applicable in your schedule.

Atlas Insurance PCC Limited is a cell company authorised under the Insurance Business Act 1998 to carry on general insurance business and is regulated by the Malta Financial Services Authority. The non-cellular assets of the company may be used to meet losses incurred by the cell in excess of their assets.

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