Euro Insurances INSURANCE'S CODE NUMBER Euro Insurances DAC trading as LeasePlan Insurance CODE NUMBER Registered office: Ground Floor, LeasePlan House Central Park Leopardstown, Dublin 18 DECLARATION OF ACCIDENT										
Claims Handling Representative in Greece: LeasePlan Hellas A.E. 17 A. Papandreou St., 15124, Marousi, Athens - TAX OFF: FAE Athinon, VAT: 999599948							DAMAGE NUMBER			
INSURANCE POLICY NUMBER		YEAR OF ISSUE STA		Г END	LICENSE PLATE NUMBER	USE	E H.P. VEHICLE MAKE – TYPE - COL		KE – TYPE - COLOUR	
INSURED CO	FATHER'S I NAME			ADDRESS				TELE	TELEPHONE NUMBER	
LEASEPLAN HELLAS A.E. driver's surname			DRIVER'S	17 A.Papandreou S		5124, Marousi expiry date			210 61 00 050 DRIVER'S LICENSE TYPE (NORMAL/PROF.)	
	NAME	NAME								
DRIVER'S HOME ADDRESS				BIRTH YEAR PROFESSION - O			OCCUPATION		TELEPHONE NUMBER	
DATE	ANNOUNCE DATE		SITE, ROAD, CROSSROAD, DISTRIC			DID YOU INFO		YOU INFORM	I THE POLICE? WHO?	
DATE	ANNOUNCE DATE									
	FATHER'S			MAGE ADDRESS – TEL. NUMBER			CARS – INSURANCE DETAILS		NCE DETAILS	
OWNER DRIVER OWNER DRIVER	SURNAME	NAME					Lio.			
OWNER DRIVER										
3RD PARTY DETAILS FOR BODILY INJURIES SURNAME FATHER'S NAME ADDRESS - TEL. NUMBER 10 1 2 10									$\begin{bmatrix} 1 \\ \Box \end{bmatrix}$ 2	
	NAME		ADDITEOU				Ū			
	DRA		9					A P		
								9 8 7		
	$\left(\right)$	I RESPONSIBLY DECLARE THAT ALL THOSE WRITTEN IN THE PRESENT FO TRUE, THAT I WILL ALSO BE PRESENT TO CERTIFY THEM IN COURT AND WILL ACCEPT ANYTHING THE INSURANCE COMPANY DECIDES, SO MUCH DETERMINATION OF RESPONSIBILITY, AS WELL AS IN THE WAY OF SETT OF THE ACCIDENT THAT I DECLARE.					M IN COURT AND THAT I CIDES, SO MUCH IN THE			
ACCIDENT DESCRIPTION										
WITNESSES DETAILS				ARE YOU ACQU/ P/		WHOSE RESPONSIBILITY IS IT? (IN YOUR OPINION)				
WHO RECEIVED THE CLAIM FORM (FULL NAME)							DECLAIRER'S FULL NAME AND SIGNATURE			