

AIG Europe Limited
30 North Wall Quay
International Financial Services Centre
Dublin 1
Ireland
www.aig.ie



Date:

Our Claim No.

Third Party /
Claimant:

Dear Sir(s)/Madam,

On behalf of we are interested
in an accident which occurred on at
whereby was involved in collision with

We understand that you were a witness of the occurrence, and we should be much obliged if you would kindly supply the information requested and, if possible, a sketch. Please return this form in the accompanying stamped addressed envelope.

An early reply would be much appreciated.

Yours faithfully,

For AIG Europe Limited

Claim No..... Date and time of accident:.....

1. Did you clearly see the accident?.....
 2. If so, where were you at the time?.....
 3. What is your account of the accident?
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-
-
-
-

Contd/

Contd/

4. At what do you estimate the speed of each vehicle?.....

5. Were both vehicles on their correct side of the road?.....

6. Did you hear warning from either or both vehicles?.....

7. Did you see any signal given by either party or both?.....

8. In your opinion, who was primarily responsible for the accident?.....

9. Do you know any other witness? If so, kindly give their names and addresses:
.....
.....
.....

10. Do you know any of the parties involved? If so, whom?

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Signature:..... **Date:**..... **Tel. No.:**.....

Occupation:..... **Age (if under 18)**.....

It would be helpful if a sketch showing the position of vehicles and persons concerned and the directions each were travelling was made:

BEFORE THE ACCIDENT

AFTER THE ACCIDENT