



## AUXILIARY-GUARANTEE FUND

Makri 1, 117-42 Athens

e - Mail : [claims@epikef.gr](mailto:claims@epikef.gr)

### ACCIDENT DECLARATION

**LIABLE:**  UNINSURED  UNKNOWN  REVOKED INSURANCE COMPANY

**CATEGORY OF DAMAGE:**  MATERIAL DAMAGE  BODILY INJURIES \_\_\_\_\_

### ACCIDENT DETAILS:

Accident Location (street/city): _____
Date of accident : _____ Time : _____
Intervened Police Authority : <input type="checkbox"/> NO <input type="checkbox"/> YES _____

### DAMAGED VEHICLE:

<b>OWNER'S SURNAME:</b> _____
<b>OWNER'S NAME:</b> _____
Address - area: _____ Postal Code: _____
Phone number: _____ Email _____
VAT : _____ TAX OFFICE : _____
License plate: _____ Brand-Color: _____
Trailer Registration Number: _____
Insurance Company: _____
<b>DRIVER'S LAST NAME:</b> _____
<b>DRIVER'S NAME:</b> _____
Address - area: _____ Postal Code: _____
Phone number: _____ Email : _____
VAT: _____ TAX OFFICE : _____



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**DETAILS OF OWNER / DRIVER LIABILITY:**

<b>OWNER'S SURNAME:</b> _____
<b>OWNER'S NAME:</b> _____
Address - area: _____ p.c: _____
Phone number: _____ Email _____
VAT: _____ TAX OFFICE : _____
License plate: _____ Brand-Color: _____
Trailer Registration Number: _____
<b>DRIVER'S LAST NAME:</b> _____
<b>DRIVER'S NAME:</b> _____
Adress - area: _____ Postal Code: _____
Phone number: _____ Email : _____
VAT: _____ TAX OFFICE : _____
Car license number: _____ Driver's Licence(A,B,...): _____

**ACCIDENT DESCRIPTION :**

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**ACCIDENT EXPLANATORY DRAWING:**



The point of impact on the damaged vehicle    The point of impact on the at-fault vehicle





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### **UPDATE ON THE PROCESSING OF PERSONAL DATA**

In accordance with the provisions of the **General Data Protection Regulation** (henceforth GDPR), European Regulation (EU 2016/679), Law 4624/2019, as well as any other national or European legislative provision concerning the protection of personal data, the Auxiliary Guarantee Fund has taken all the necessary measures and has developed all the appropriate policies and procedures, in order to be in absolute compliance with the requirements of the Regulation and to provide the highest possible level of protection for all those who transact with it.

In this context, the Auxiliary Guarantee Fund is going to collect through this application and then process your personal data, in order to fulfill its obligations according to the Law (assessment, control and settlement of the case, payment of legal compensation).

Please declare that you have been notified and informed about the content of the 13-11-2024 Update on the Processing of Personal Data by the Auxiliary Guarantee Fund, which has been posted on the website of the Auxiliary Guarantee Fund.

Please sign that you are aware of this information regarding the processing of your personal data, which is an integral part of the accident compensation application you submit to the Auxiliary Guarantee Fund.

**I have been notified**

**Full name:**

**Signature:**