Notice of Claim

Northeimer Str. 90-94, 37412 Herzberg
Tel.: 05521/860 1183
E-Mail: schaden@tipeurope.com

Important:
The recording of the accident-related information and the processing of the evidence must be carried out by the police.

Date of Accident: _____ Time of Accident: _____ Own Fault: ☐ Third party Fault: ☐

Location of Accident: _____ Street: _____

Nr. 1 Rental Vehicles / Vehicle of the Renter

	Tractor-trailer/Truck	Semi-trailer/Trailer
PEMA-Nr. / TIP Unit-No.:		
License Plate Number:		

Vehicle Type: _____

Renter / Lessee: _____

Driver of the rental vehicle at the time of the accident including complete postal address:

_____

_____

Driver's License Information

Driver's License-Nr.: _____

Issuing Authority: _____

Date of Issue: _____

Driving License Category(-ies): _____

Damage to Rental Vehicle: _____

_____

Nr. 2 Other Party

License Plate Number: _____ _____

Vehicle Type: _____

Name and postal address of Vehicle Owner:

_____

_____

Name and postal address of Driver (Vehicle No. 2):

_____

_____

Insurer and Insurance Policy Number Other Party:

_____

Damage at Other Party:

_____

_____

_____

Description of the accident including sketch [No. 1 = Rental Vehicle No. 2 = Other Party]

! Please always state the license plate numbers of both vehicles (tractor-trailer/truck and semi-trailer/trailer) for No. 1!

Police: yes ☐ no ☐

Location of Police Station: _____

Phone Number: _____

Police Journal Number: _____

Name of Officer: _____

Witnesses: yes ☐ no ☐

Postal address Witness(es): _____

_____

Persons injured: yes ☐ no ☐

Blood sample taken:

Nr. 1: yes ☐ no ☐

Nr. 2: yes ☐ no ☐

Warning issued:

Nr. 1: yes ☐ no ☐

Nr. 2: yes ☐ no ☐

Date: _____

Signature and Stamp:

_____

Report accident to TIP as soon as possible (E-mail: schaden@tipeurope.com)
Third-party liability Insurance Company for TIP-vehicles (with registration to TIP): R+V Versicherung AG - Kfz-Schadenabteilung, Raiffeisenplatz 1, 65189 Wiesbaden Phone: 0800/533 1111 **Email: ruv@ruv.de**