



BUSINESS LEASE
PASSION FOR MOBILITY

Manual for on-line report of insurance event (incident)

Please, prepare required documents specified below:

- **Drivers License**
- **Accident record** – transcription two-color form (if written) you can also find it in the driver's network of vehicles

After preparing these documents, you can proceed to report the incident:

What and where to fill in:

Who caused the incident?

WHO CAUSED THE INCIDENT?

- The driver of my vehicle caused the incident
- The incident was caused by somebody else while my vehicle was in use
- The incident was caused by somebody else while my vehicle was not in use

Select the given option and after entering one of the options you will see subgroups of insurance events.

For example, if there is damage to the windshield, you choose option number 2 - it is an insurance event not caused by the driver of the vehicle, but as a participant in the Accident drove his vehicle.

After entering this option, you will see subgroups of insurance events:

WHO CAUSED THE INCIDENT?

- The driver of my vehicle caused the incident
- The incident was caused by somebody else while my vehicle was in use
 - only the windscreen is damaged
 - accident with animal
 - other damage
- The incident was caused by somebody else while my vehicle was not in use

The correctly selected insurance event will affect other filled in data of the insurance event.

Incident:

INCIDENT

Date of incident: *

-day- -month- -year- time: :

Location (street, city, region, country): *

Was the incident already reported to the insurance company? *

yes

no

This is mandatory data. Without this data, it is not possible to register an insurance event with the insurance company. If you do not remember the exact data or do not know it, it is necessary to at least estimate it. Mandatory data (marked as *) cannot be omitted, without them it is not possible to complete the reporting of an insurance event (incident)

Your vehicle:

YOUR VEHICLE

Vehicle registration: Brand: Model:

FORD MONDEO

Vehicle mileage: *

The vehicle data is filled in automatically. It is only necessary to add the condition of the tachometer at the time of the insured event. If you do not know this exact, enter at least the approximate mileage of the vehicle at the time of the insured event.

Driver contact details:

DRIVER DATA

Name and surname of the driver: * Address (street, city, ZIP): * Phone: *

Driver's licence No.: * Driver's licence: * Date of issue: *

-day- -month- -year-

Copy of driving license - front (max. 3,5 MB): * Copy of driving license - back (max. 3,5 MB):

Choose File No file chosen Choose File No file chosen

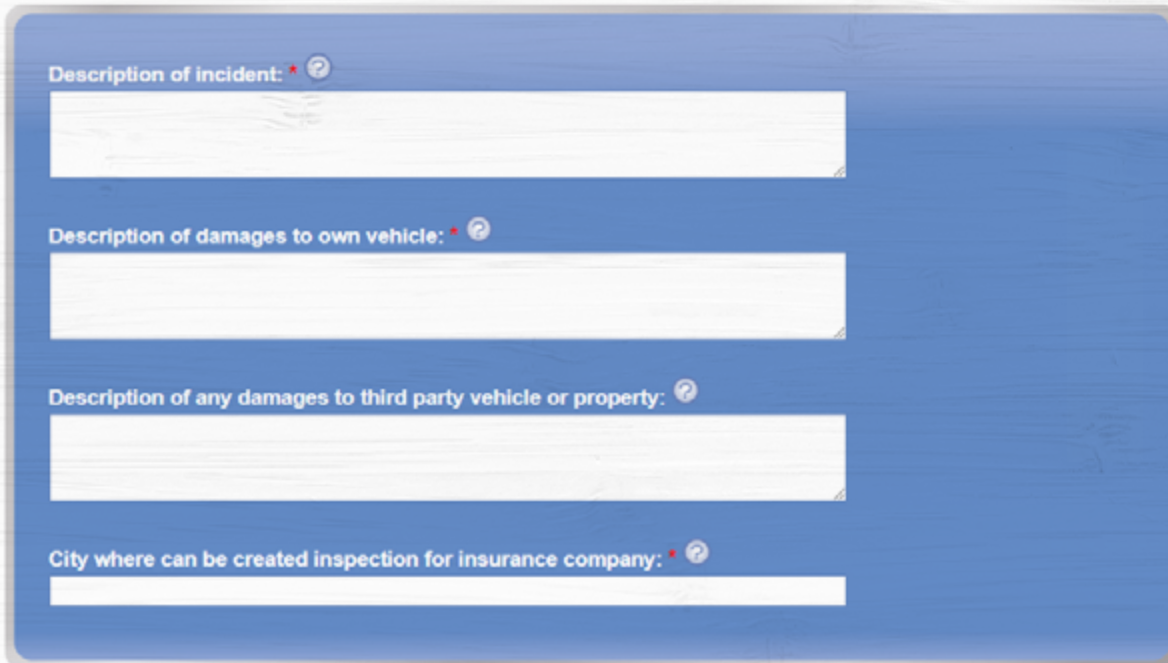
Driver's email: * ? Phone:

These are mandatory data and without them the report cannot be completed.

If the vehicle was driven by the driver at the time of the incident, it is necessary to provide a copy of the driver's license of the person who drove the vehicle. The driver's license must be scanned and then attached by clicking on the **Choose File** icon. Evidence of a copy of the driver's license is a request of the insurance company and without uploading a copy of the driver's license it is not possible to conclude the insurance claim.

Accident and vehicle damage data:

INFORMATION ON INCIDENT AND VEHICLE DAMAGES



The screenshot shows a blue-bordered form with the following fields:

- Description of incident:** * ?
- Description of damages to own vehicle:** * ?
- Description of any damages to third party vehicle or property:** ?
- City where can be created inspection for insurance company:** * ?

? These data are also mandatory. Just fill in the data briefly. You can always find out how to fill in the text under the question mark icon, just move the cursor to the question mark and you will see help on how to fill in the window in question.

Was the accident investigated by the police?

WAS THE INCIDENT INVESTIGATED BY THE POLICE?



The screenshot shows a blue-bordered form with two radio button options:

- Yes
- No

Please choose one of the options, if so - it will be necessary to state which police dealt with the traffic accident, or if you were given a record of the accident, attach it as well.

If not, it is sufficient to state the reason why the police were not called.

Details of the other party to the accident (injured or guilty)

DRIVER INFORMATIONS OF THE OTHER VEHICLE 

Name and surname of other side:	Address (street, city, ZIP):	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Owner name:	Address (street, city, ZIP):	Phone:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Vehicle registration:	Brand:	Model:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Insurance company name:	Insurance number (green card):	
<input type="text"/>	<input type="text"/>	

Mandatory data in some cases, If the other party to the accident is unknown, just write „NO“ or „I DON'T KNOW“ in the fields. The report cannot be completed successfully without filling in the fields.

After filling in and saving this data, the number to which the event is registered in the Business Lease system, will be sent to the email address entered (in the „Driver's contact details“ section).

WARNING! Please wait for the service partner to whom the insurance event has been assigned to contact you.

Do not order vehicle repair individually! If you have any questions or discrepancies, or no car service contacts you, please inform us immediately by contacting the insurance department:

phone 02/58 10 38 35

or by e-mail insurance@businesslease.sk.