

# KEY INFORMATION FOR THE INJURED PARTY

(in case of damage from automobile liability)

## INSURER: SAVA OSIGURANJE, D.D. - BRANCH OFFICE CROATIA

Sava osiguranje, d.d. - Branch Office Croatia, PIN (OIB): 45237012600, R. Frangeša Mihanovića 9, 10110 Zagreb, Croatia



When you find yourself in a situation where you are the injured party in a traffic accident in the Republic of Croatia caused by the use of a vehicle, it is important to be familiar with the claims processing procedure carried out by the insurance company (hereinafter: the Insurer). This guide will provide you with basic information on the key elements of the process of submitting a claim and processing damages with the Insurer, helping you better understand your rights during the claims handling process.

### PART A - WHAT TO DO IN CASE OF A CAR ACCIDENT?

#### What to do in case of material damage:

- There is no legal obligation to notify the police, but if you do, police officers may come to the scene of the accident or instruct you on necessary actions (e.g., signing the European Accident Report and exchanging information).
- Drivers involved in a traffic accident that resulted only in material damage to vehicles must, if possible, immediately remove their vehicles from the roadway to ensure the smooth flow of traffic (Article 176 of the Road Traffic Safety Act - ZOSPC).

#### What to do in case of bodily injury or loss of life:

In case of bodily injury to participants or loss of life, immediately call the police and emergency medical services (Article 175 of the Road Traffic Safety Act - ZOSPC).

#### Fill out the European Accident Report

A filled out European Accident Report serves to establish the facts and does not imply that the drivers have agreed on fault, nor does signing it constitute an admission of guilt. A properly filled out European Accident Report can be used as a compensation claim under automobile liability insurance or as a statement on the circumstances of the accident (Article 38 of the Compulsory Insurance Act - ZOOP).

- Drivers must not leave the scene of the accident until they have filled out and signed the European Accident Report or exchanged personal and vehicle information in another way (Article 176 of the ZOSPC).

- If you do not have a European Accident Report, exchange personal and vehicle information (who was driving the vehicle, license plate number, ownership details) and details of insurance companies (automobile liability insurance policies) by other means (Article 176 of the ZOSPC).

#### Document the damage, if possible:

- Take photos of the scene of the accident, including the position of all involved vehicles immediately after the accident.
- Take photos of damage to the vehicles, skid marks and other important marks at the scene of the accident, on vehicles and on the road.
- If possible, take photos of relevant documents (vehicle registration, driver's license).

#### Situations in which you are required to call the police:

- if a person present at the accident (a potential witness) refuses to provide personal information, and the accident involves bodily injuries or loss of life
- if the vehicle is not in a drivable condition and cannot move on the road independently - in case of a collision with an unregistered vehicle
- if the other party refuses to provide personal information
- if the other party leaves the scene of the accident,
- if a driver is operating a vehicle without a valid driver's license - if there is a reasonable suspicion that a driver is under the influence of alcohol, drugs, or similar substances

### PART B - FILING A COMPENSATION CLAIM

#### 1 To whom do I submit a compensation claim?

You should submit the compensation claim to the Insurer of the vehicle responsible for the traffic accident, if that information is known to you. You can check where the vehicle is insured by entering its registration number on the following website: <https://huo.hr/hr/provjera-osiguranja>. If the registration number is unknown, contact the Croatian Insurance Bureau. It is recommended to file a compensation claim as soon as possible.

#### 2 Who can, how, and where submit a compensation claim?

**The injured party** (vehicle owner or user, injured person, owner of damaged property) or an authorized representative may submit the claim in person at an office of the Insurer, by e-mail at [stete@sava-osiguranje.hr](mailto:stete@sava-osiguranje.hr) or by phone at number: 0800-913 023 or 01 63 97 689. If the vehicle is owned by a leasing company, in case of material damage to the vehicle, you as the lessee must report the damage both to the Insurer and the leasing company as soon as possible.

#### 3 Required documents and information for processing a compensation claim?

- vehicle registration certificate for the damaged vehicle;
- driver's license of the person who was driving at the time of the accident;
- a filled out European Accident Report or details of the other party involved (insurance policy number, vehicle registration number);
- it is recommended to provide an account number (IBAN) for payment;
- if the vehicle is immobile due to damage, provide the location where the vehicle or vehicles are located;
- in case of property damage: proof of ownership of the damaged property (e.g., land registry extract, possession certificate, etc.);
- exceptionally and only if the police were involved: police report and breathalyzer test record.

#### ADDITIONAL IMPORTANT NOTES:

- The Insurer will only request necessary information (e.g., in cases of material damage, data from the European Accident Report, identification details, contact information, and payment method).
- With justification, the Insurer may request additional documents essential for processing the claim that it cannot obtain on its own or that you possess,

to facilitate a faster and more efficient process. However, the Insurer cannot request documents it can obtain itself (e.g., police reports, breathalyzer results, accident scene sketches).

- The Insurer must communicate in a transparent and understandable manner and provide access to information about the claim process and resolution timelines.
- The Insurer cannot condition the settlement of a claim or the payment of compensation on actions such as signing a settlement agreement or repairing the vehicle at a specific repair shop. It must not suggest that these are the only or best options, nor that the offered compensation amount must be accepted as final.

#### 4 What information can I expect from the Insurer when submitting a compensation claim?

The Insurer will:

- Assign a unique reference number for your claim, which will allow you to track its status;
- record the date of claim submission;
- provide information about the next steps, especially regarding damage assessment.

The Insurer must promptly inform you of your rights and its obligations and actively take the necessary actions to fulfill its responsibilities.

At this stage, the Insurer may offer you two options for resolving the claim:

- a) payment to the repair shop;
- b) payment to the injured party.

**Note: The Insurer must clearly explain all settlement options. By signing a release statement or a settlement agreement, you waive the right to claim additional compensation. You are not obligated to accept a settlement offer and may still receive compensation. Settlement agreements are final and legally binding. In the event of a settlement, the Insurer is not responsible for any payments beyond what is agreed upon in the settlement.**

## PART C - DAMAGE ASSESSMENT AND CLAIM PROCESSING BY THE INSURANCE COMPANY

- 1 The Insurer will conduct a damage inspection and assess the extent of the damage at its premises.  
 You can find a list of locations at <https://www.sava-osiguranje.hr/hr-hr/mreza/>.
- 2 Based on the assessment, the Insurer's assessor will determine the damage and draw up a "Damage Inspection Report" with descriptions (type of damage to the vehicle, parts requiring repair and/or replacement, corresponding number and type of operating hours).
- 3 The "Damage Inspection Report" will be provided to the injured party, the vehicle owner, or an authorized representative. This report **does not represent a statement of liability by the Insurer.**
- 4 **You have the right to choose any authorized repair shop for repairs and are not obligated to use the one suggested by the Insurer.**
- 5 If additional damage is discovered during repairs that were not initially recorded in the "Damage Inspection Report," you must request the Insurer to conduct an additional inspection.
- 6 The Insurer shall communicate with you or your authorized representative using agreed-upon standard business communication methods, unless a specific communication method is legally required, to keep you informed about the claim resolution process.
- 7 You have the right to hire an independent expert, at your own expense, to provide a separate assessment and opinion, and the Insurer is required to respond to any disputed elements in the expert's findings.
- 8 In addition to damage assessment, the Insurer will verify the amount and validity of the compensation claim, i.e., its obligations on the basis of the submitted documentation.

## PART D - REASONED OFFER, JUSTIFIED RESPONSE, AND YOUR RIGHT TO APPEAL

- 1 The Insurer has a deadline of 60 days from the date of receiving the compensation claim to provide a written reasoned offer for compensation if liability is not disputed and the damage amount is determined, or a written justified response if liability is disputed or the damage amount is not fully established.
    - A) **A reasoned offer** must contain:
      - the title of the decision, its date, and the function/title of the decision-maker,
      - the date of receipt of the claim and a list of received and obtained documentation,
      - a statement from the Insurer confirming liability for compensation and a detailed explanation with key facts and legal basis (relevant laws, insurance terms, etc.).
    - a breakdown of the determined amount of damage, whereby the responsible Insurer is obliged to explain in a clear, simple and understandable manner how it arrived at the determined amount of damage and the amount of damage that it will pay, and explain any specific factors applied (e.g. depreciation, co-responsibility, etc.), including the reasons why they were applied and how they were determined,
    - a statement that the compensation amount from the offer will be paid within 15 days from the date of sending the reasoned offer, whereby the specified payment deadline must be within 60 days from the date of receipt of the claim,
    - a detailed statement on the disputed points of the submitted findings and opinions of the independent expert regarding liability for compensation for damage.
    - instructions on the method of submitting an objection to the Insurer's decision and the 15-day period within which the Insurer will respond to that objection.
    - B) **A Justified Response Must Contain:**
      - If the **Insurer determines no liability for compensation:**
        - the decision title, date, and function/title of the decision-maker.
        - the date of receipt of the claim and a list of received and obtained documentation,
        - a statement by the Insurer that it has determined that it is not liable and a detailed, simple and understandable explanation with the stated decisive facts and legal basis (relevant provision of positive regulations, insurance conditions, etc.) on the reasons for the exclusion of liability, taking into account all available documentation,
        - a detailed statement on the disputed points of the submitted findings and opinions of the independent expert regarding liability for compensation for damage.
        - instructions on how to file an objection to the Insurer's decision and the 15-day period within which the Insurer will respond to that objection.
      - If the **Insurer determines partial liability for compensation:**
        - the decision title, date, and function/title of the decision-maker,
        - the date of receipt of the claim and a list of received and obtained documentation,
        - a statement from the Insurer confirming liability for compensation and a detailed explanation with key facts and legal basis (relevant laws, insurance terms and similar),
        - a breakdown of the determined amount of damage, where the responsible Insurer is obliged, in a clear, simple and understandable way explain how the compensation sum was calculated, including any applied factors (e.g., depreciation, shared liability) and reasons for their application,
  - a statement that the compensation amount from the offer will be paid within 15 days from sending the reasoned offer, ensuring the payment occurs within the 60-day deadline from the claim receipt,
  - a detailed statement on the disputed points of the submitted findings and opinions of the independent expert and the disputed items of the invoice or offer for repair of damage from the authorized service provider, if they have been submitted,
  - instructions on how to file an appeal and a 15-day deadline for the Insurer to respond to the appeal.
  - If the responsible **Insurer is unable to fully determine the amount of damage:**
    - the decision title, date, and function/title of the decision-maker,
    - the date of receipt of the claim and a list of received and obtained documentation,
    - a statement by the responsible Insurer about its liability and that it is unable to fully determine the amount of damage and the reasons for which it is unable to fully determine the amount of damage,
    - a detailed explanation with the stated decisive facts and legal basis (relevant provision of positive regulations, insurance conditions, etc.),
    - a breakdown of the determined amount of damage, whereby the responsible Insurer is obliged to explain in a clear, simple and understandable manner the reasons for which it was unable to fully determine the amount of damage, and how it arrived at the determined amount of damage and the amount of damage that it will pay, and explain any specific factors applied (e.g., depreciation, co-responsibility, etc.), including the reasons why they were applied and how they were determined,
    - a statement that the compensation amount from the offer will be paid within 15 days from sending the reasoned offer, whereby the stated payment deadline may be shorter because it must be within 60 days of the date of receipt of the claim,
    - a detailed statement on the disputed points of the submitted findings and opinion of the independent expert and the disputed items of the invoice or offer for repair of the damage from the authorized provider services, when delivered,
    - instructions on how to file a complaint against the Insurer's decision and the 15-day period within which the Insurer will respond to that complaint.
- 2 In the event of failure to fulfill the obligation to pay compensation for damage or the undisputed amount of compensation for damage within 15 days or within 60 days, the injured party shall be entitled to payment of interest in addition to the due amount of compensation for damage or the due undisputed amount of compensation for damage, from the date of filing the claim for compensation
- 3 If the Insurer does not provide a reasoned offer or justified response within 60 days, and if the dispute cannot be resolved amicably, including mediation at the Croatian Insurance Bureau, or by other peaceful means (<https://mpu.gov.hr/mirno-riesavanje-sporova-medijacija/26978>), you can seek legal protection by filing a lawsuit against the Insurer.
- 4 An injured person who is dissatisfied with the Insurer's handling of your claim may contact the Insurance Ombudsman at the Croatian Insurance Bureau or file a complaint with HANFA (Croatian Financial Services Supervisory Agency).

\* Road Traffic Safety Act

\*\* Compulsory Traffic Insurance Act

**IMPORTANT INFORMATION:** Please note that each Insurer may adapt the process of resolving claims described here to each specific case, but in accordance with applicable legislation. Also, the information in Part A of this document is prescribed in detail by the Road Traffic Safety Act and its implementation and supervision are the responsibility of police officers or the ministry responsible for internal affairs.