

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Actual Driver
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of First Submission	31/08/2024 10:07 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	30/08/2024 21:24 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	DUNEARN ROAD/BALMORAL ROAD JUNCTION
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA9197J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	EDWARD KUNAFI
NRIC No	SXXXX816H
Email Address	EDWARD99K@GMAIL.COM
Mobile Phone No	(Phone) +65-96945551
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1598
Vehicle Fuel	Petrol
First Registration Date	22/03/2016
Chassis no	MNTBBAB17Z0026841
Effective Date/Time of Ownership	22/03/2016 10:03 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number	P10519586R03

DRIVER

Name of Driver	EDWARD KUNAFI
NRIC No	SXXXX816H
Date Of Birth	10/12/1963
Occupation	Indoor
Driving Pass Date	09/06/1992
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	32 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96945551
Alt. Phone Number	-
Email Address	EDWARD99K@GMAIL.COM
Address	BLK 13 GHIM MOH ROAD 05-41 SINGAPORE 270013
Address complement	-
Postcode	-
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA7722D
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SLA9197J

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purposes of:
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
 - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
 - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 21/10/24

Policyholder's Signature / Date & Time

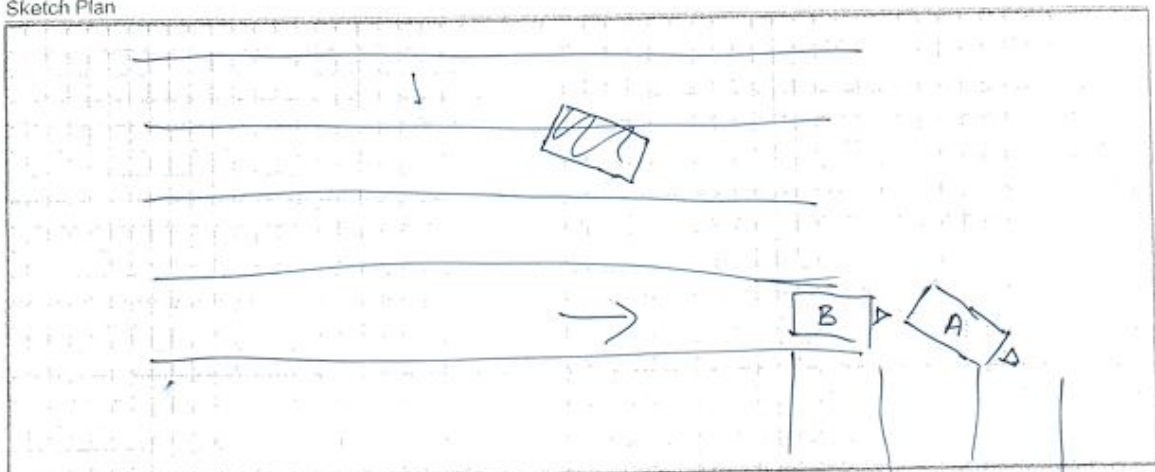
09:45 AM

Actual Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



Sketch Plan



vJun2022

Describe Circumstances of the Accident

Accident Location: DUNEARD ROAD - BALMORA ROAD JUNCTION
 Accident Date: 30/8/2024 Time: 21:24 pm
 Owner Email: edward99k@gmail.com Driver Email:

Traffic light turn green, cars started moving, I was driving on my normal route to turn to Balmoral Road, I had ~~right~~ right turn signal on while waiting for green. ~~As~~ I was behind a few cars, traffic light turned green, cars started moving. I saw green man was blinking, a ^{few} girls started to cross Balmoral Road. ~~As~~ I ~~stop~~ brake ~~on~~ to stop, B failed to brake, in time ~~on~~ and hit my bumper at left corner.

OTHER VEHICLE NO INVOLVE DETAILS :-

B	Veh No: SHA7722	Hp: 8818-0422	Total Pax: 1	Driver Name: CHIANG CHIAN WEE
C	Veh No:	Hp:	Total Pax:	Driver Name:

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time
 31/8/24
 09.15 am

Driver's Signature (If driver is not the policyholder) / Date & Time


 Witnessed by Reporting Centre Personnel







