

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	21/10/2024 21:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	20/10/2024 16:00 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	CTE Along Moulmein area
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX7383S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WENDRA KUSUMA BONG
Passport No/FIN	C7661612
Email Address	MERYBONG@YAHOO.COM
Mobile Phone No	(Phone) +65-88850189
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
Variant	suv
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1200
Vehicle Fuel	Petrol
First Registration Date	28/12/2015
Chassis no	SJNFEAJ11U1528091
Effective Date/Time of Ownership	28/12/2015 11:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100445015-06

DRIVER

Name of Driver	WENDRA KUSUMA BONG
Passport No/FIN	C7661612
Date Of Birth	27/08/1971
Occupation	Indoor
Driving Pass Date	23/06/2022
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	2 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88850189
Alt. Phone Number	-
Email Address	MERYBONG@YAHOO.COM
Address	230 COMMONWEALTH AVENUE #13-06
Address complement	-
Postcode	149739
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	3
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)	3
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	-

PASSENGER 1

Name	HENI
Gender	Female

PASSENGER 2

Name	MERY LO
Gender	Female

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

While driving at CTE along moulmein area, suddenly vehicle SNK6392E brake due to right hand vehicle cut into his lane, I applied brake to prevent hitting his vehicle but vehicle behind SMC7832A cannot brake in time and hit directly onto my vehicle rear. The impact caused damage to my vehicle rear.

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 SMC7832A
Vehicle Manufacturer Toyota
Vehicle Model -
Vehicle Variant -
Vehicle Colour Brown
Vehicle Category Private car
Name of Driver HANNAH
Contact Number -
Address -
Address complement -
Postcode -
Insurance Company Name Income Insurance Limited
Nature Of Damage FRONT
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

SKETCH PLAN**IMPORTANT NOTICE**

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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 purpose(s) 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.



[Signature]
21/10/2024
12.38 PM

Policyholder's Signature / Date & Time

[Signature]
21/10/2024
12.38 PM

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A - SKX 7383 S
B - SMC 7832 A
C - SML 6631 Y

Describe Circumstances of the Accident

While driving at CTE along moulmein area, suddenly vehicle SNK 6392E brake due to right hand vehicle cut into his lane. I applied brake to prevent hitting his vehicle but vehicle behind smc 7832A cannot brake in time and hit directly onto my vehicle rear. The impact caused damage to my vehicle rear.

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]
21/10/2024
12:38 PM

Policyholder's Signature / Date & Time

[Signature]
21/10/2024
12:38 PM

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



Witnessed by Reporting Centre Personnel











