

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	30/10/2024 13:18 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	30/10/2024 08:22 (SGT)
Exact Location of Accident	Jalan Bukit Merah, Singapore
Additional Location Information	ALONG JALAN BUKIT MERAH NEAR JUNCTION OF COLLEGE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNN5869M
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	QUAH LI JUAN, JOY (KE LIJUAN)
NRIC No	SXXXX526B
Email Address	joykequah@gmail.com
Mobile Phone No	(Phone) +65-96442860
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Note
Variant	EPOWER HATCHBACK
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1200
Vehicle Fuel	Petrol-Electric
First Registration Date	18/12/2023
Chassis no	JN1FAAE13Z0940106
Effective Date/Time of Ownership	18/12/2023 00:01 (SGT)

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7230125506

DRIVER

Name of Driver	QUAH LI JUAN, JOY (KE LIJUAN)
NRIC No	SXXXX526B
Date Of Birth	13/02/1988
Occupation	Indoor
Driving Pass Date	19/07/2007
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	17 YEARS AND 3 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96442860
Alt. Phone Number	-
Email Address	joykequah@gmail.com
Address	NA
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	Chain Collision
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)	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 STATEMENT AND VIDEO FOOTAGE

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	GBB8964G
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Vehicle Manufacturer	Nissan
Vehicle Model	Cabstar
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	LIM AH CHYE WINSON
NRIC No	SXXXX560B
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	ACCIDENT
Details of property damaged in accident	REAR PORTION
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMA3003M
Vehicle Manufacturer	Toyota
Vehicle Model	Rav4
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	KOH KHENG SIANG
NRIC No	SXXXX963D
Contact Number	(Phone) +65-91252848
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	ACCIDENT
Details of property damaged in accident	FRONT PORTION
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLX5582X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

SKETCH PLAN

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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.
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.

TAN CHONG MOTOR SALES PTE LTD
19 LORONG 8 TOA PAYOH
SINGAPORE 319158

Driver 30/01/24, 1045h

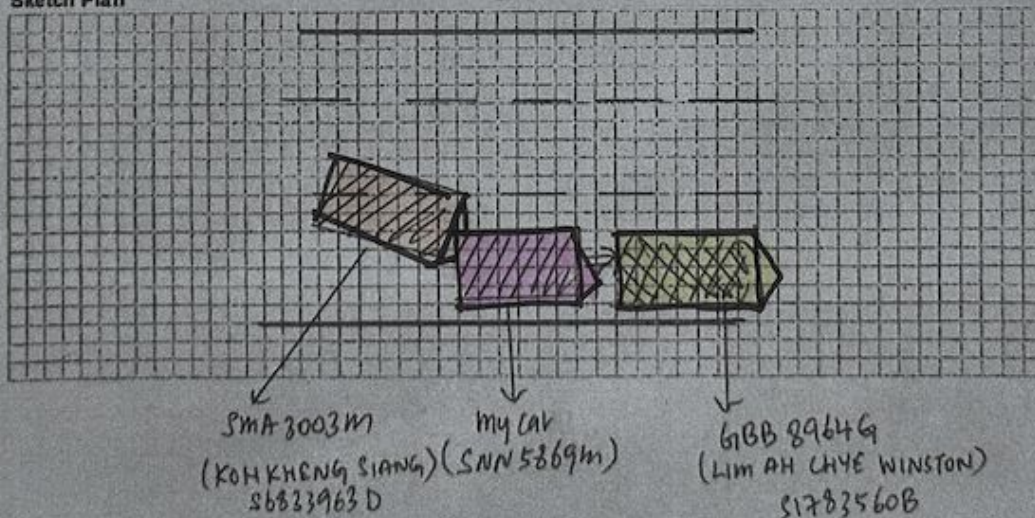
N/A

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident


I was in my car, SNN 5269M, Stationary. I was queuing up behind 6BB 8964G. We were waiting to turn right into college road from Jalan Bukit Timah, at the right-most lane. This was a three-lane carriageway. SMA 3003M changed lane from middle lane to right-most lane abruptly and rear-ended my vehicle. My vehicle was propelled forward by the impact and hit the vehicle in front of me (6BB 8964G).

Traffic police arrived. An official report was made.

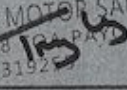
Nobody was conveyed to the hospitals by ambulances.

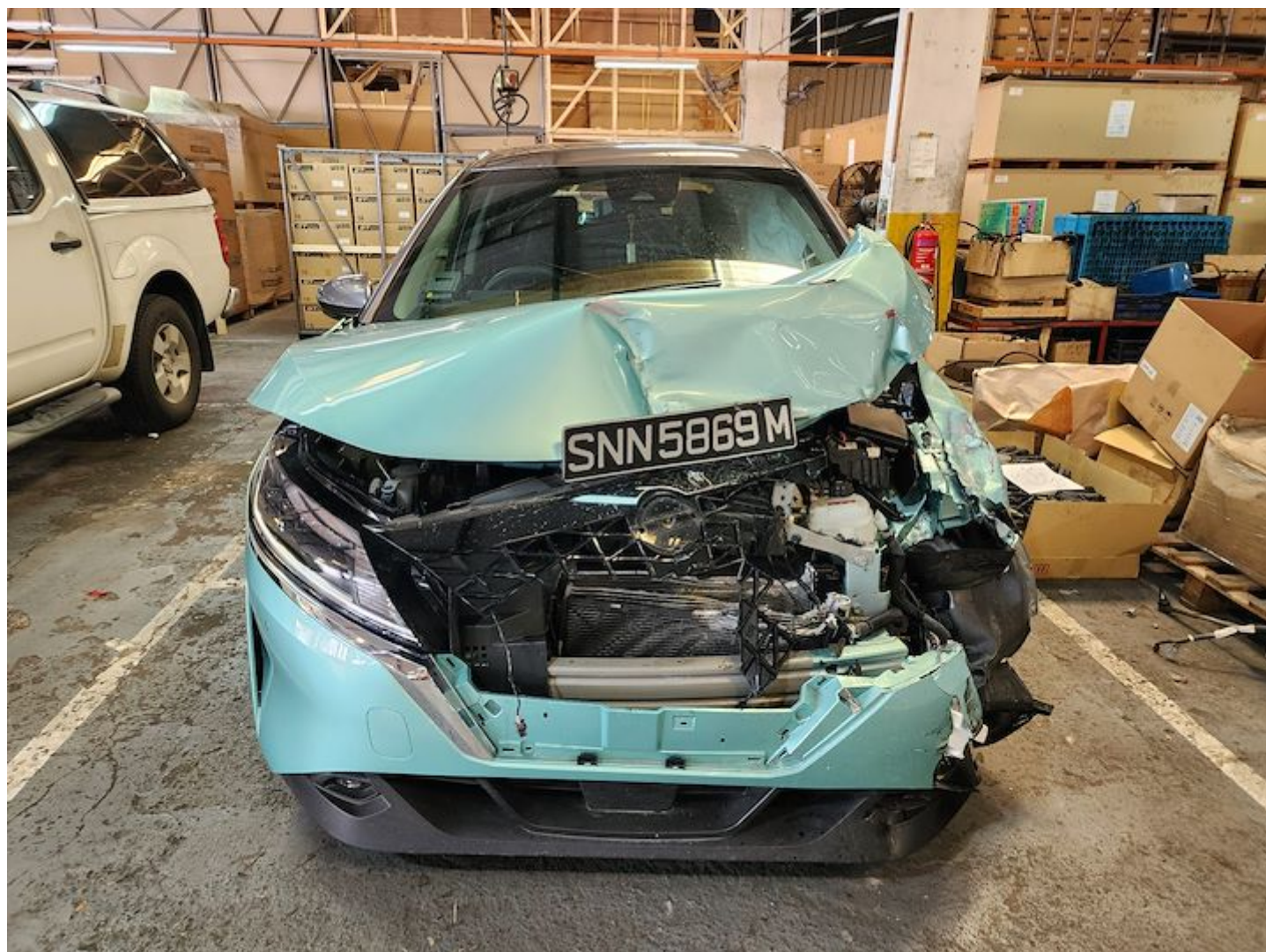
Declaration

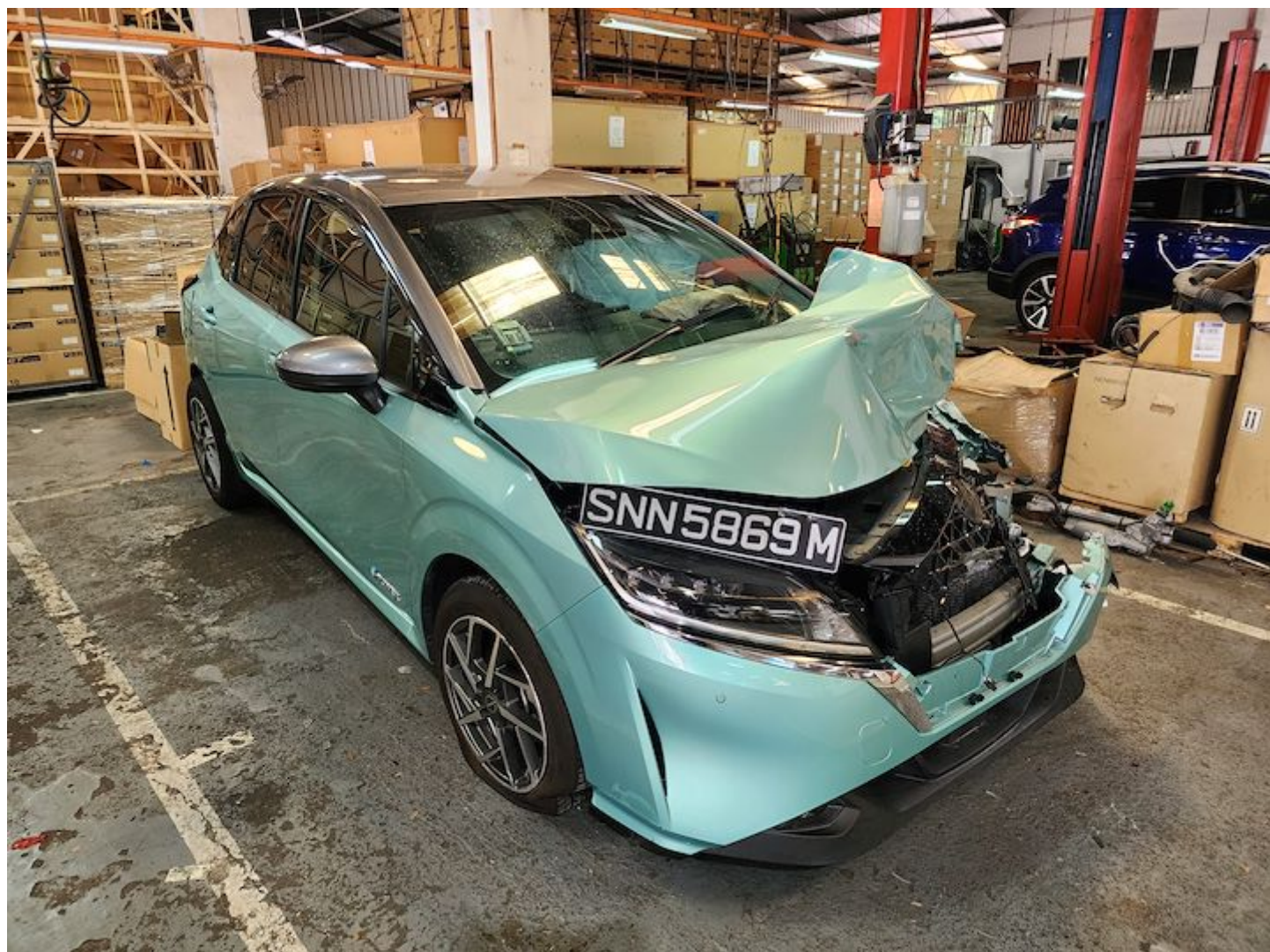
We declare the foregoing particulars are true in every respect.

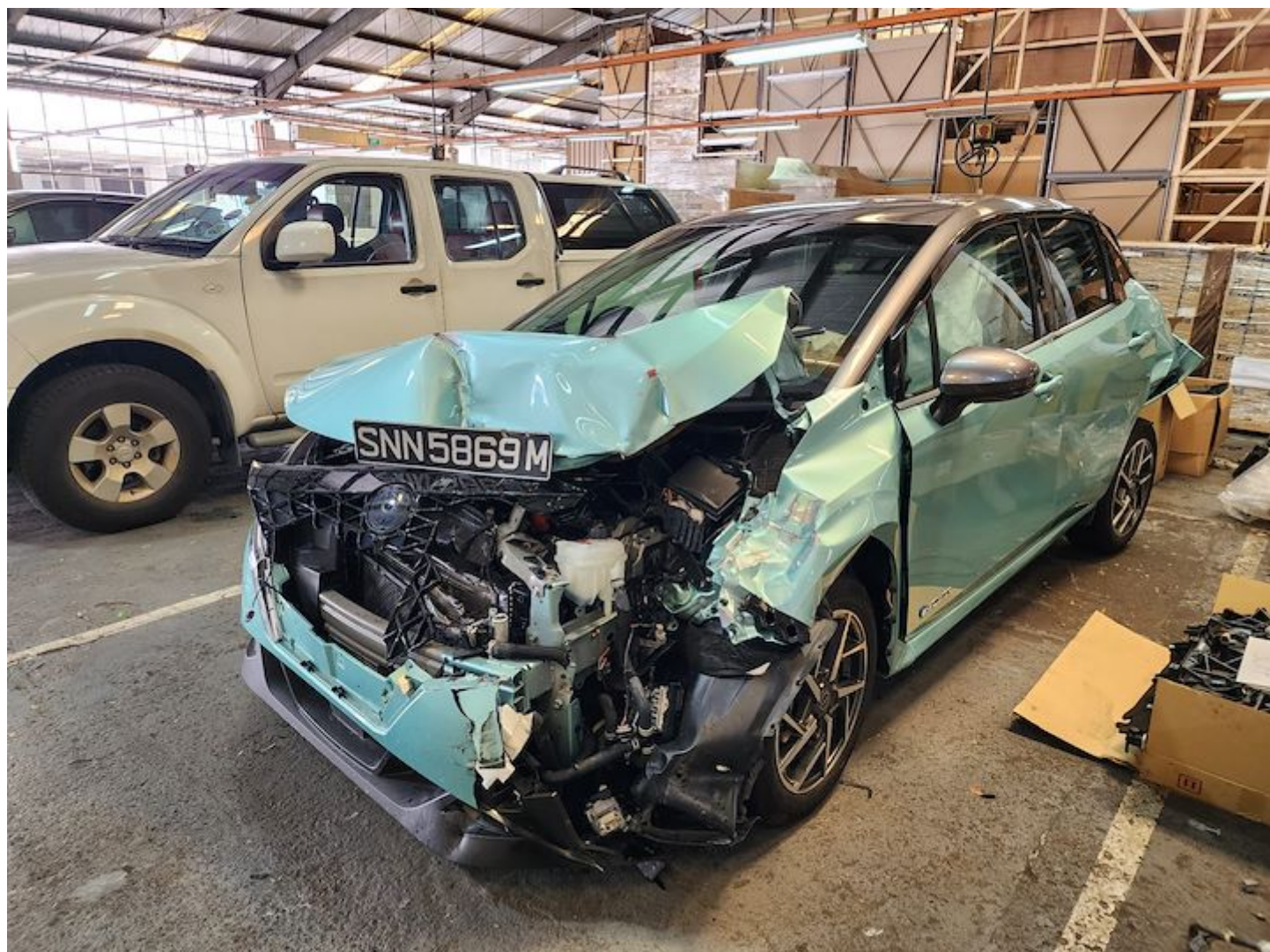
 30/10/24 1100h
Policyholder's Signature / Date & Time

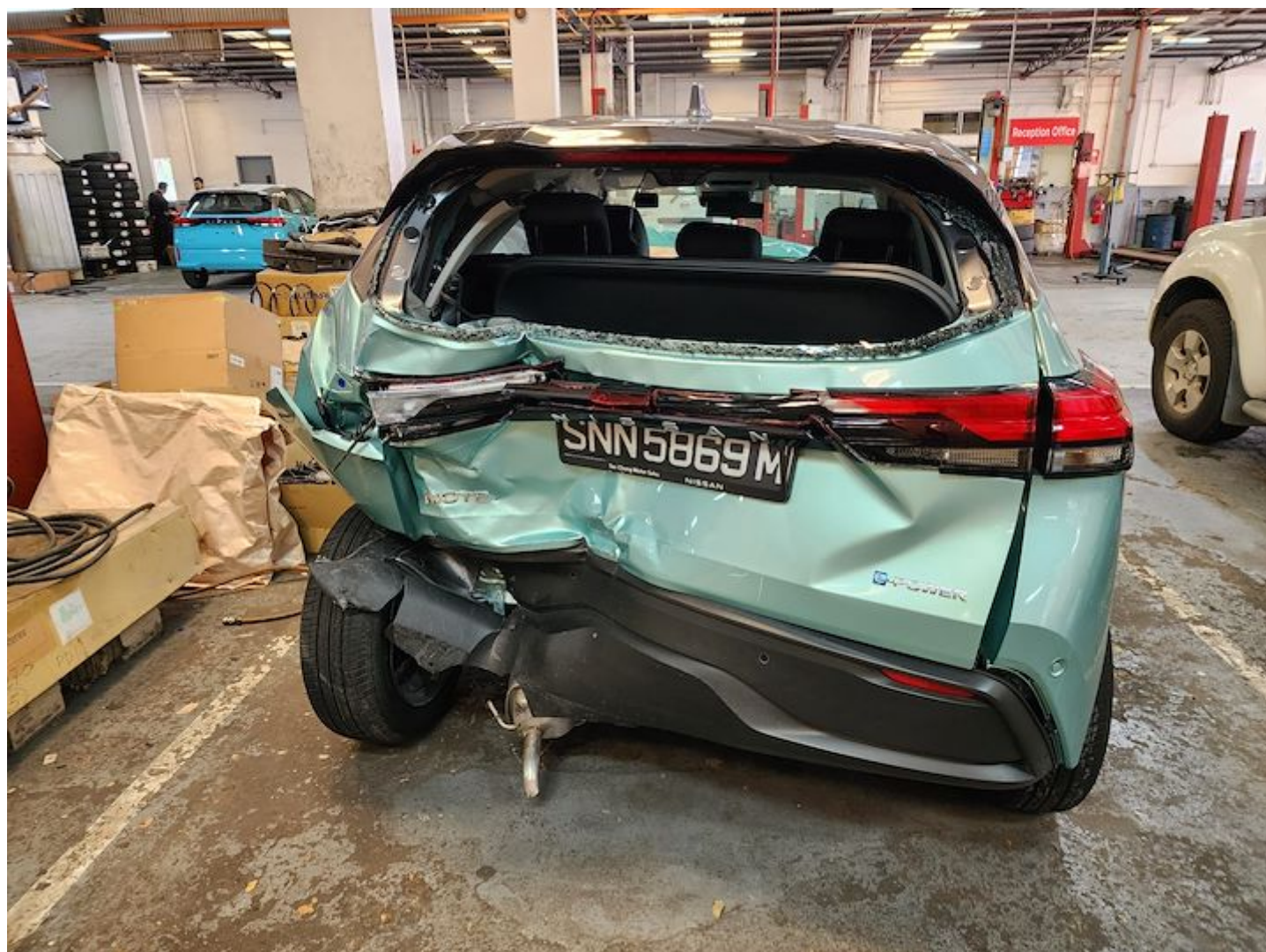
N/A
Driver's Signature (if driver is not the policyholder) / Date & Time

TAN CHONG MOTOR SALES PTE LTD
18 LORONG 8 JOA PAH
SINGAPORE 3192

Witnessed by Reporting Centre Personnel

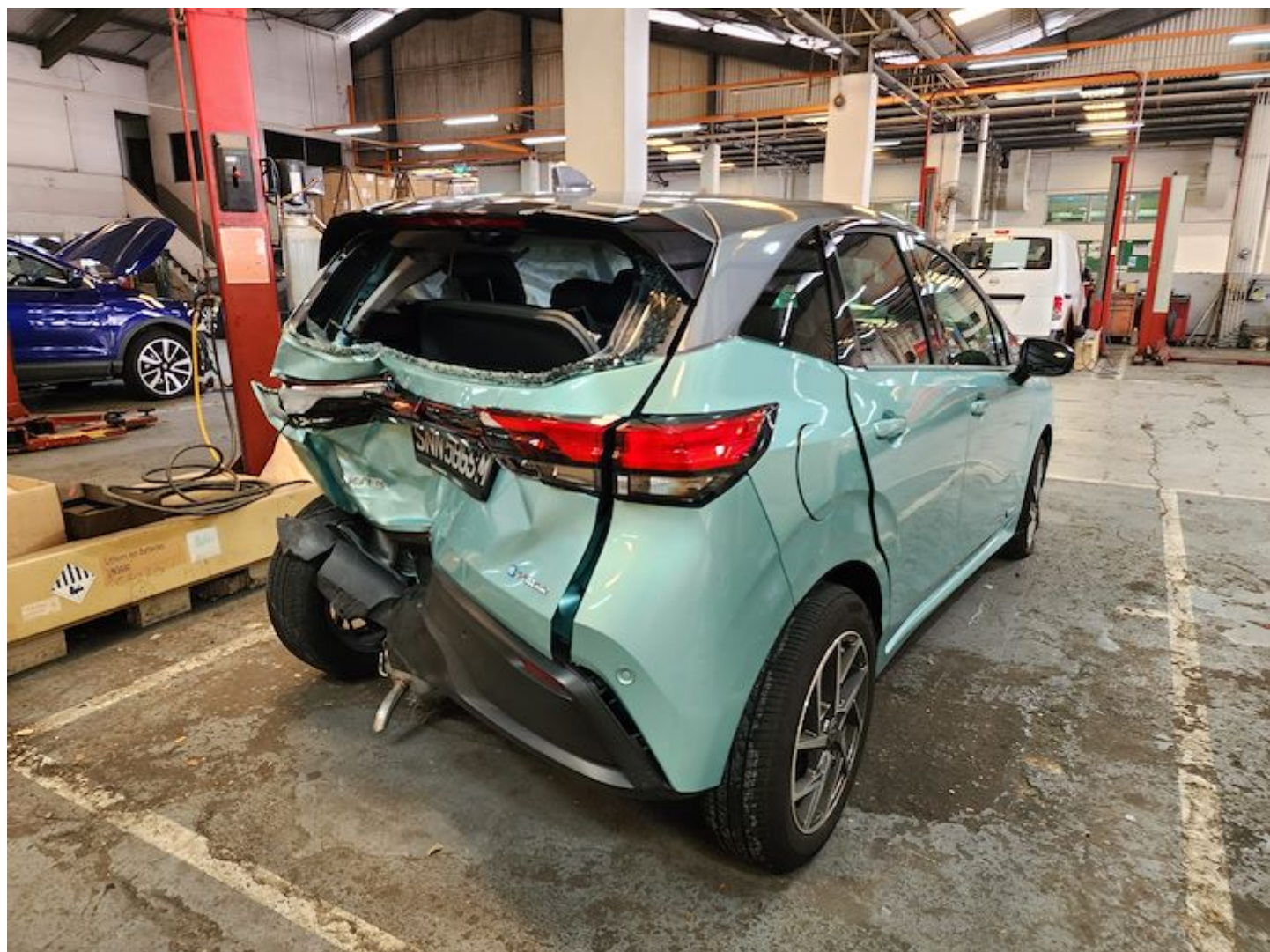






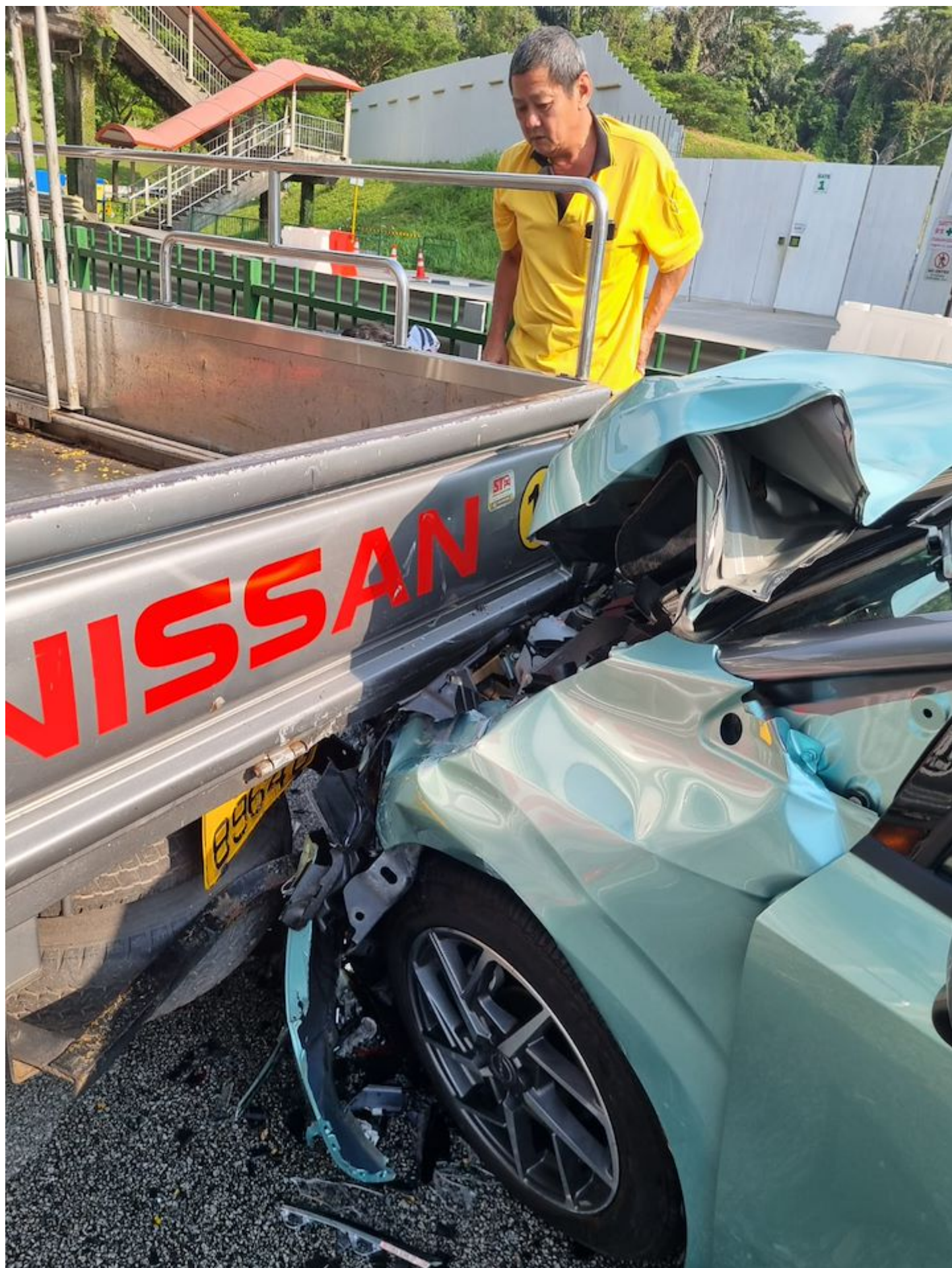








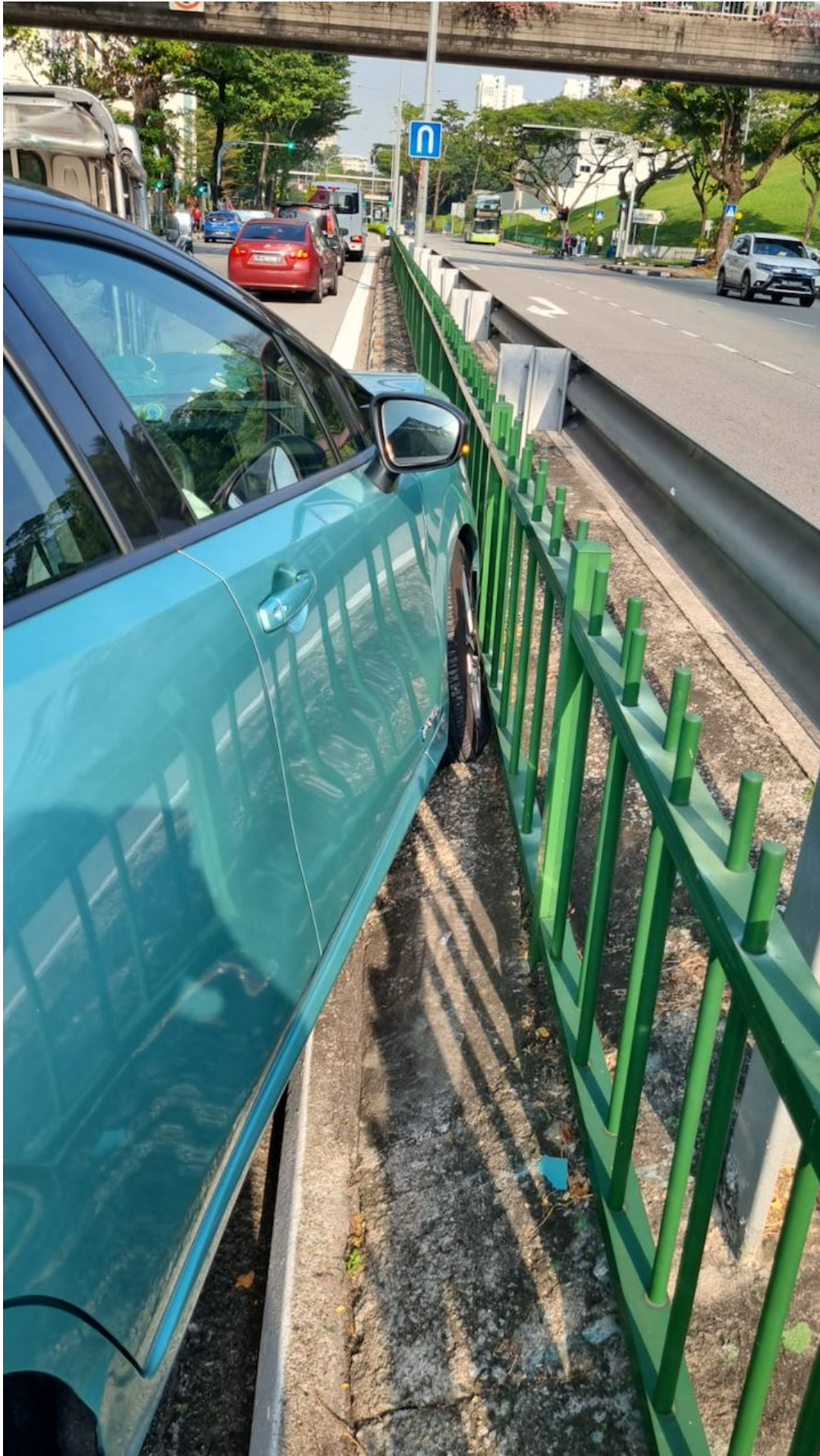


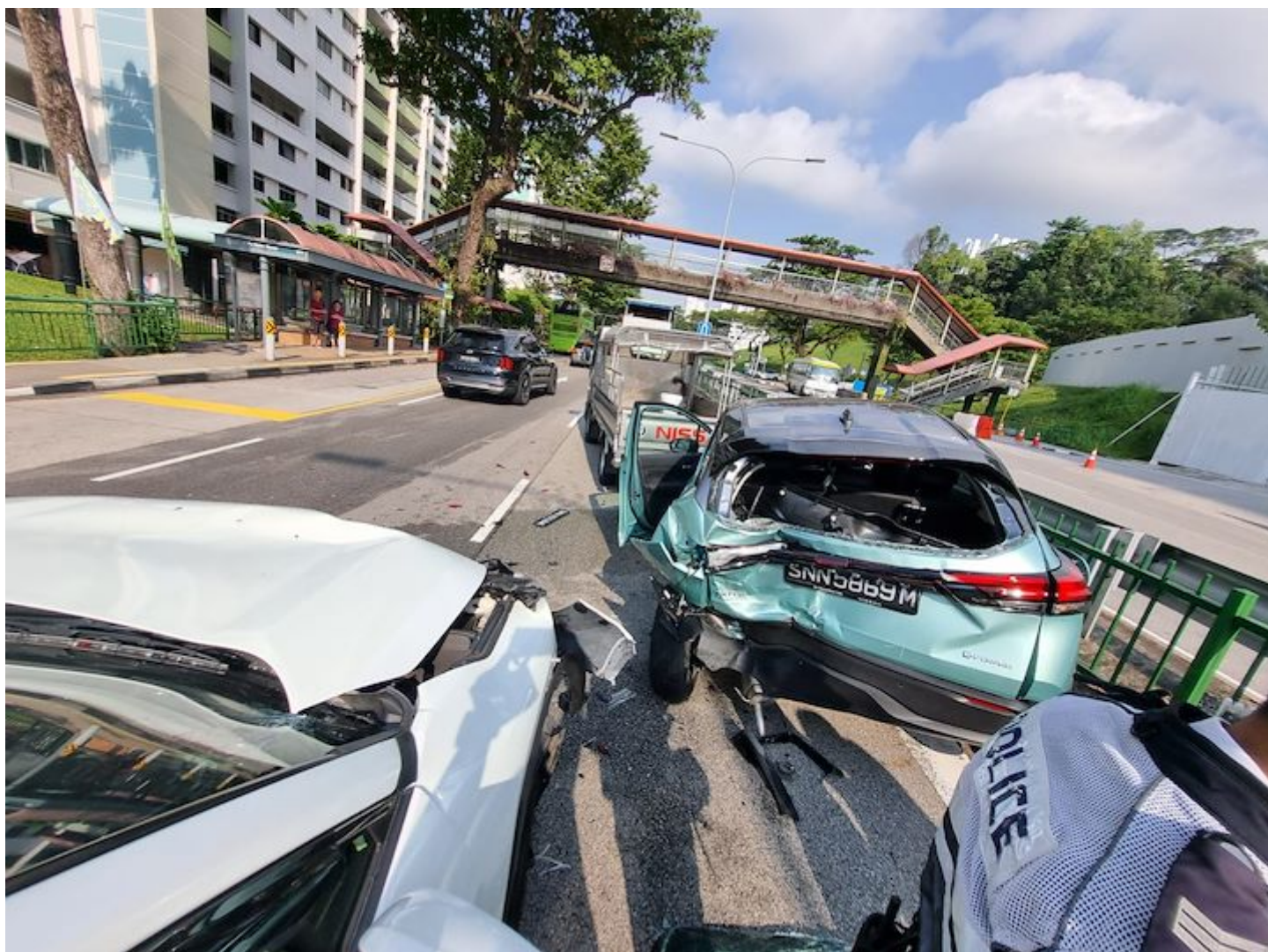




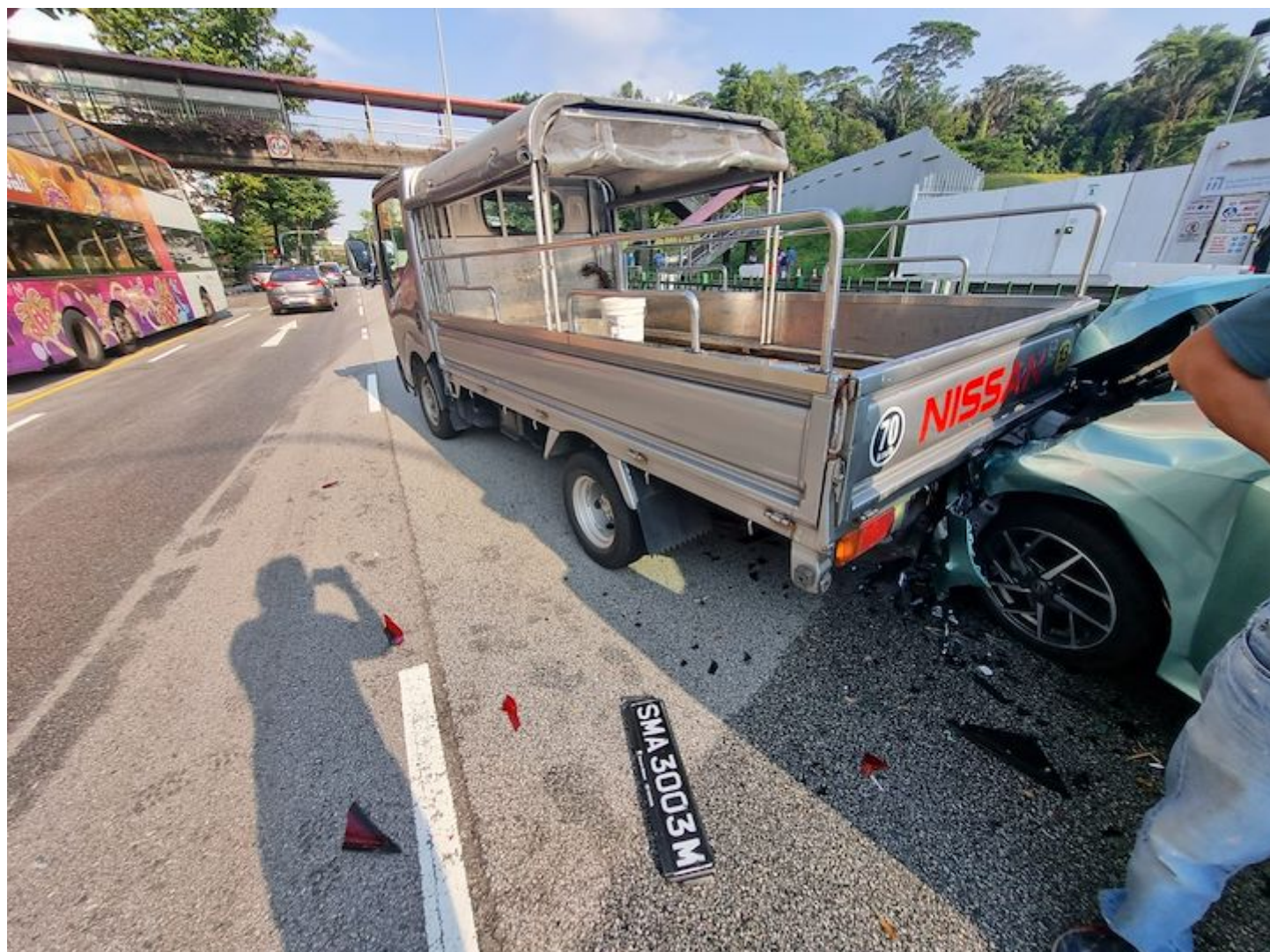


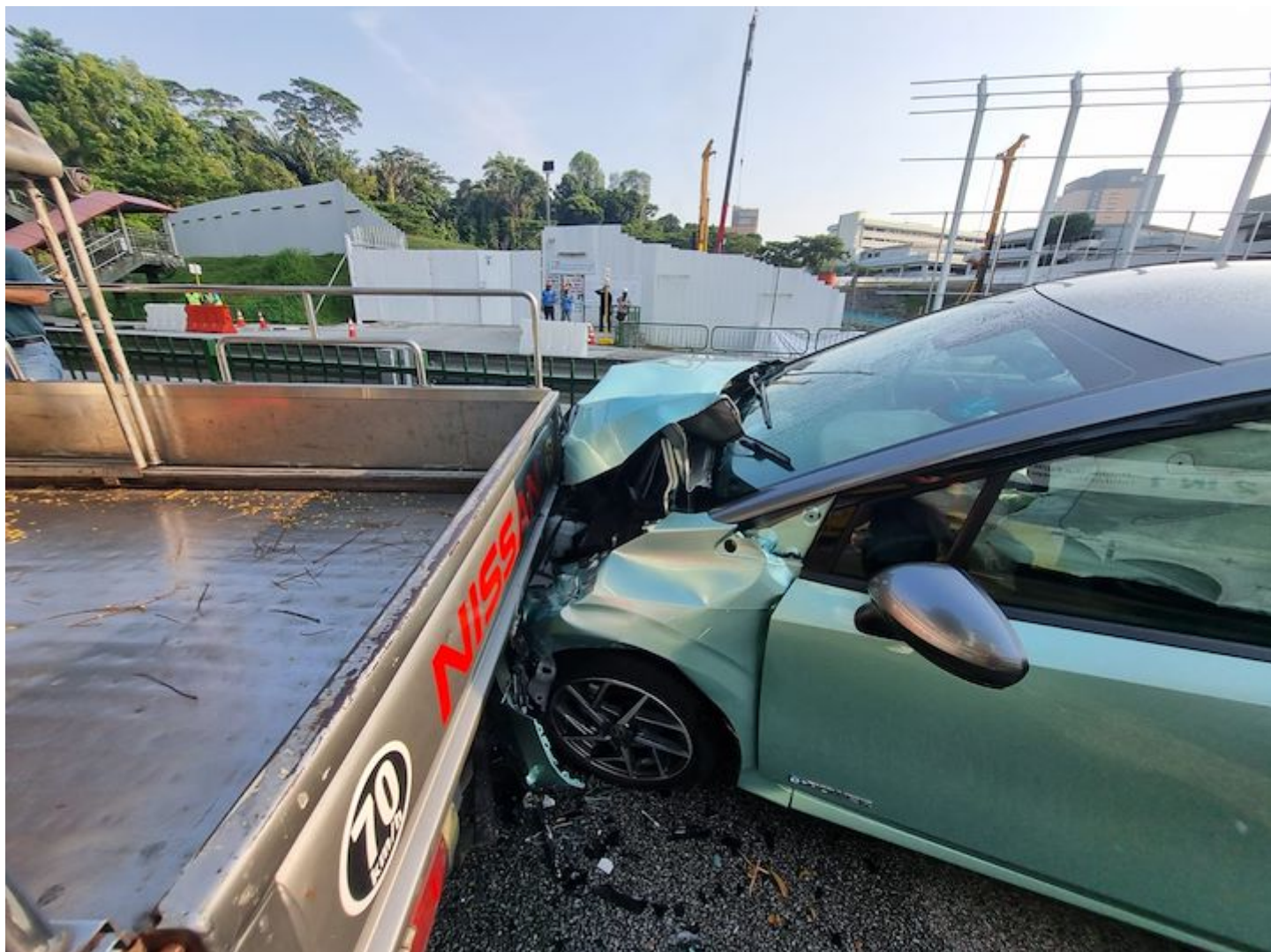




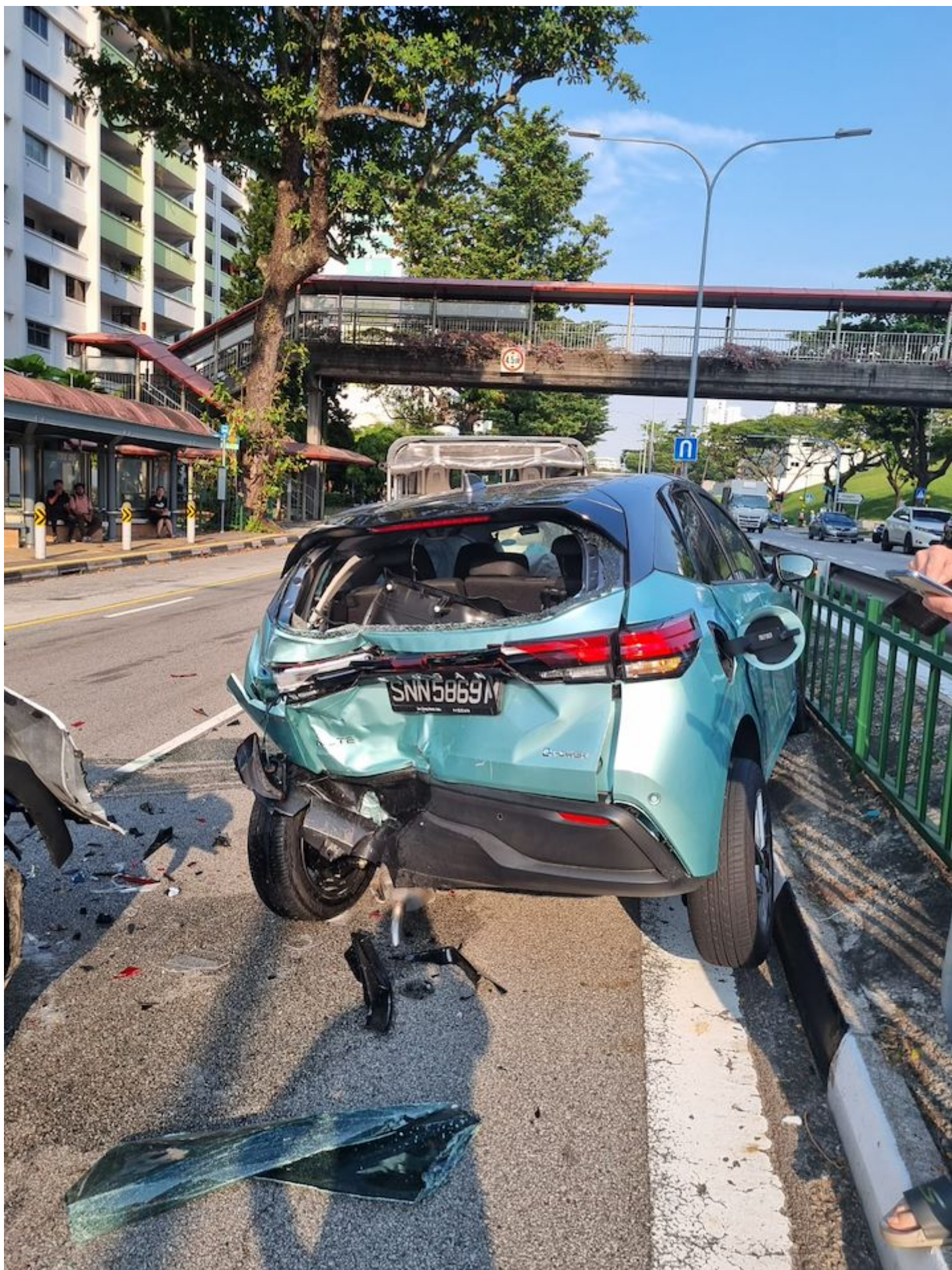


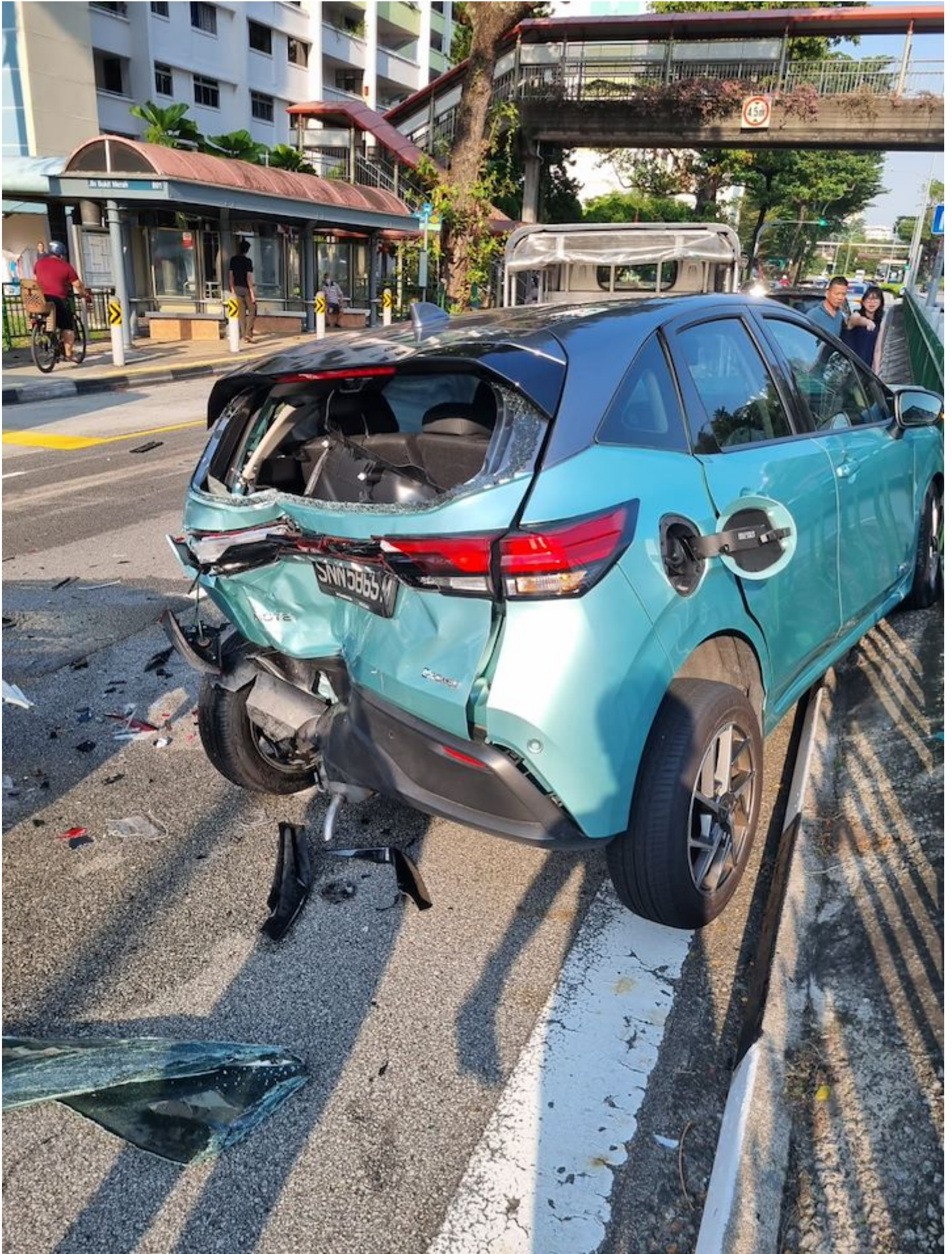
















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: ST0R24AU0001 Vehicle Registration No: SNN5869M

Name (as shown in NRIC): QUAH LI JUAN, JOY (KE LIJUAN) NRIC/FIN/Passport No: _____

(*Vehicle Driver/Policyholder) (*) Please delete as appropriate

Address: _____ Singapore ()

Contact (Tel): 9644 2860 Mobile No.: _____

Email Address: joykequah@gmail.com

Date of Accident: 30/10/2024 Time of Accident: 08:22HRS

Place of Accident: ALONG JALAN BUKIT MERAH NEAR JUNCTION OF COLLEGE ROAD


Insurance Company: AIG Asia Pacific Insurance Pte. Ltd.

(B) ADDITIONAL INFORMATION /AMENDMENTS:


I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

This is total 4 vehicles chain collision. Sequence as follows: -

SMA3003M -> SNN5869M -> GBB8964G -> SLX5582X



Policyholder / Actual Driver's Signature
Date: 13/12/2024



Reporting Centre Personnel's Signature
Name (as in NRIC/ID card): _____
Date: _____