

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	22/07/2024 11:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	20/07/2024 12:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Intersection of Lorong 4 Toapayoh and Toapayoh central on the right turning lane.
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX239Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Kodieswaran Lavanya
NRIC No	S8057353G
Email Address	lavansaran5050@gmail.com
Mobile Phone No	(Phone) +65-90682005
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Sylphy
Variant	SYLPHY 1.6 PREMIUM
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1598
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070176362-02

DRIVER

Name of Driver	Velusami Saravanan
NRIC No	S7958458D
Date Of Birth	26/03/1979
Occupation	Outdoor
Driving Pass Date	11/03/2021
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	3 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90682005
Alt. Phone Number	-
Email Address	lavansaran5050@gmail.com
Address	313C ANCHORVALE ROAD
Address complement	#01-140
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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?	No
Number of Passengers (Including Driver)	2
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	Kodieswaran lavanya
Gender	Female

DETAILS OF POLICE ACTION

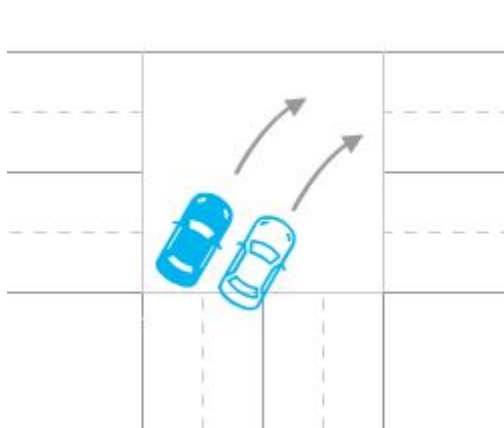
Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

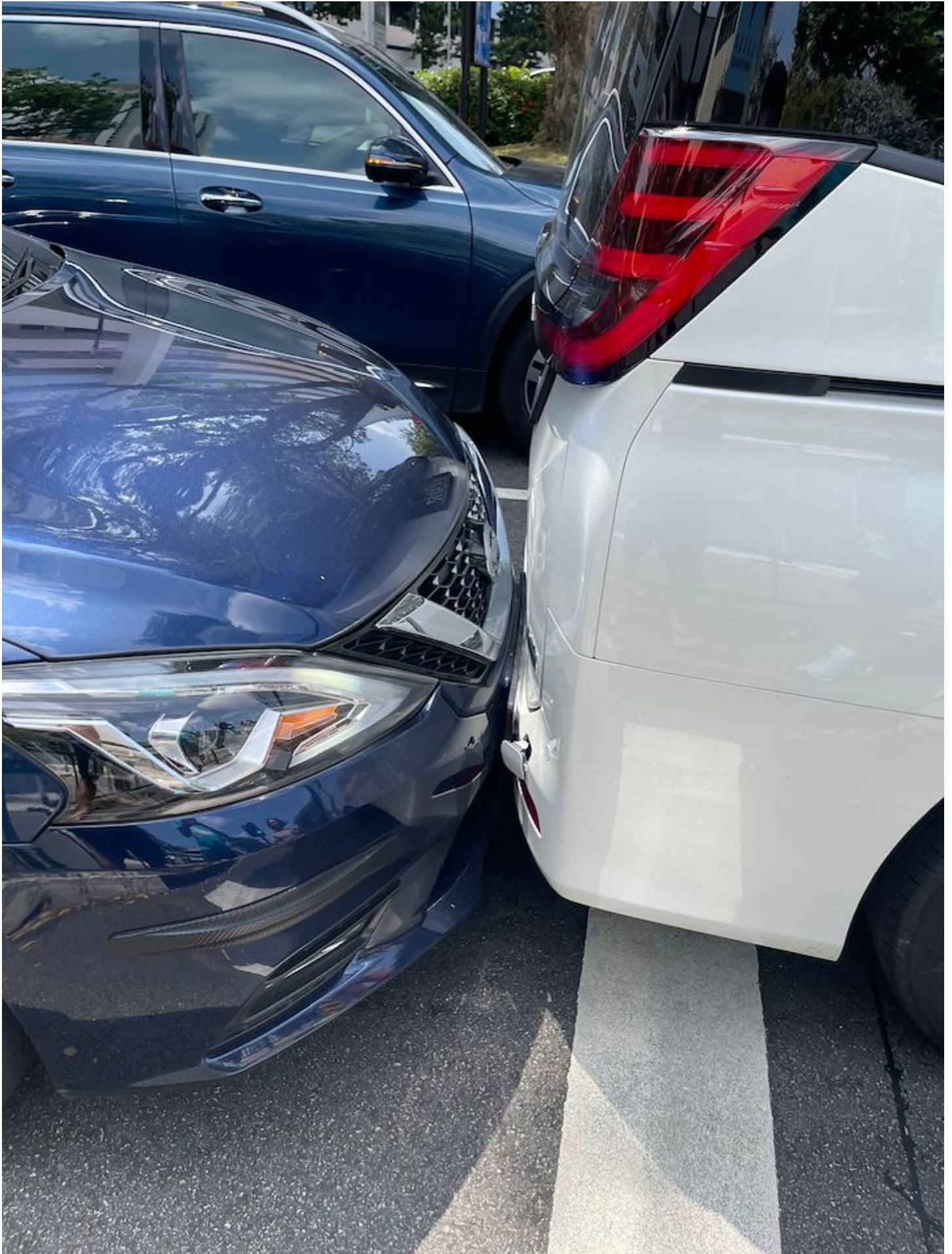
I was following the in-front car to turn right from the right most lane. The in-front car suddenly stopped when the traffic light turned amber, although I immediately applied emergency brake , still rear ended the infront car. Causing a mild dent to the bumper of infront car. No injuries to anyone in both vehicles and no public property damage.
 Accident location - from lorong 4 toa payoh turning right to toa payoh central.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO NOT PROVIDED









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: SA01247M0005 Vehicle Registration No: SMX239Z

Name (as shown in NRIC): Kodieswaran Lavanya NRIC/FIN/Passport No: S8057353G

(*~~Vehicle Driver~~/Vehicle Owner) (*) Please delete as appropriate

Address: 313C ANCHORVALE ROAD #01-140 Singapore (543313)

Contact (Tel): _____ Mobile No.: 90682005

Email Address: lavansaran5050@gmail.com

Date of Accident: 20/07/2024 Time of Accident: 12:20

Place of Accident: Intersection of Lorong 4 Toapayoh and Toapayoh central on the right turning lane.

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:

Amendment driver particulars as following :-

1) NRIC no. should be S7958458D.

2) Driving Pass date should be on 11/03/2021.

Policyholder / ~~Driver's~~ Signature
Date: 04/09/2024



Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: _____
Date: _____