



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	12/06/2024 10:54 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/06/2024 23:22 (SGT)
Exact Location of Accident	Sengkang E Ave, Singapore
Additional Location Information	TWDS SENGKANG EAST RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNE4242A
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	NG JUN SIANG
NRIC No	T0007887A
Email Address	NIGELJUNSIANG@GMAIL.COM
Mobile Phone No	(Phone) +65-96148383
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Accord
Variant	-
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	Manual
CC	2000

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2009550708-01

DRIVER

Name of Driver	NG JUN SIANG
NRIC No	T0007887A
Date Of Birth	05/03/2000
Occupation	Outdoor



Accident report SS2X246C0001

Driving Pass Date	09/11/2018
Driving experience	5 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96148383
Alt. Phone Number	-
Email Address	NIGELJUNSIANG@GMAIL.COM
Address	BLK 439 HOUGANG AVE 8 #03-1553
Address complement	-
Postcode	530439
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

VEHICLE B IN FRONT OF MY VEHICLE REVERSE AND HIT MY VEHICLE FRONT PORTION. I NOT INSIDE MY VEHICLE.

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	SHD6273Z
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	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

3. The driver must be informed of his/her rights and responsibilities.
4. If the driver does not consent to a stop or if the driver's consent is equivocal, the officer may not proceed with the stop.
5. Any false reporting may be referred to the Traffic Police Department for investigation.

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

1. *Apprenticeship* – a form of training in which a person learns a trade or profession by working under the supervision of a skilled worker.

[illegible]

As a result, the following answer is chosen:

and cannot cut it into different patterns, or transform or respond to any changes by the

g. *discussing any other matters (including the matters of correspondence, statements, invoices, reports or notices to an informed person) of human personnel data used in the study as well as on the external issues of neuroscience*

1) struggling with my little boy's attention, problems, handling and/or dealing with my clients.

Identifying the Purposes

As with any document, you should consult your attorney or the company's legal counsel before making any changes to the document.

and the other, in the past, on the "Personal Information" tab for one or more of the charge numbers, and

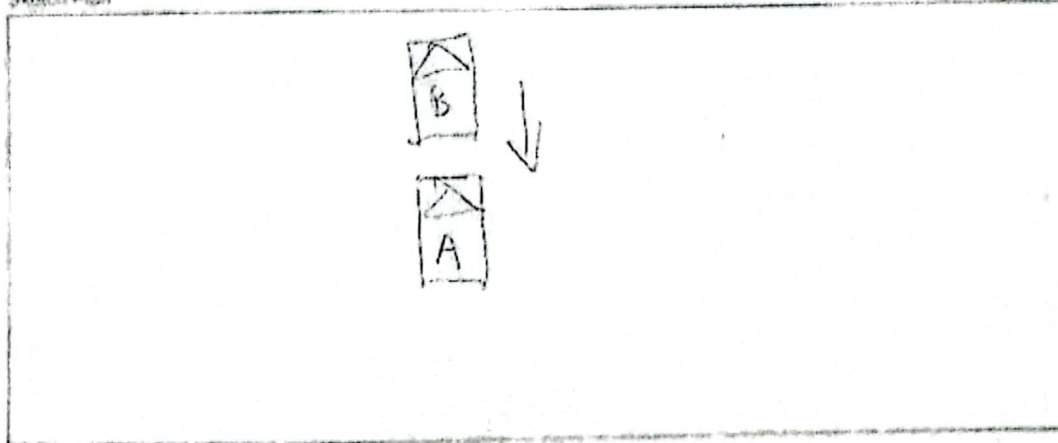
You will be able to make personal or confidential enquiries about our services by contacting our dedicated Helpline on 0800 679 000. We will ensure that your enquiry is handled appropriately.

Policyholder / Supervisor / Client & Insure

Actual Group's Reporters (if driver is not the applicant(s)) (Date & Time)

Witnessed by Reporting Centre Personnel
Name as in NRCCU Card:

Sketch Plan



Detailed Description of the Accident

Veh B in front of my veh & rearer hit my veh
front portion & not inside my veh.

Declaration

I/We declare the foregoing accident report is true & correct



Driver A Signature Date & Time

Signature of Driver B (if involved in accident)

Signature of Witness (if involved in accident)

Signature of Police Officer (if involved in accident)