

## 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 Authorised 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 ability.
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 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 Report	22/11/2017 12:43
Date Of Accident	19/11/2017 15:55
Exact Location Of Accident	WATERWAY POINT CAR PARK EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR6786M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE BOON SAN RICHARD
NRIC No	S6939884G
Email Address	RICHARD_LBS@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96398484
Alternative Phone No	Others-96398484

### Vehicle Particulars

Manufacturer	HONDA
Model	CMC-1.8 L (A)
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100370840
Cover Note Number	

### Driver

Name of Driver	LEE BOON SAN RICHARD
NRIC No	S6939884G
Date Of Birth	02/11/1969
Occupation	INDOOR
Date Of Driving Pass	07/02/2002
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96398484
Fax Number	
Contact Number	OTHERS-96398484
EMail Address	RICHARD_LBS@HOTMAIL.COM

Address	BLK 667A PUNGGOL DRIVE
Postcode	#06-586 821667
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO ATTACHMENT. ATTACHED THIRD PARTY VEHICLE PHOTOS.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN9939R
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Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Details of Witness

Name

Phone Number

Email Address

## Sketch Plan


### SKETCH PLAN


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7. By the lodgment 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:

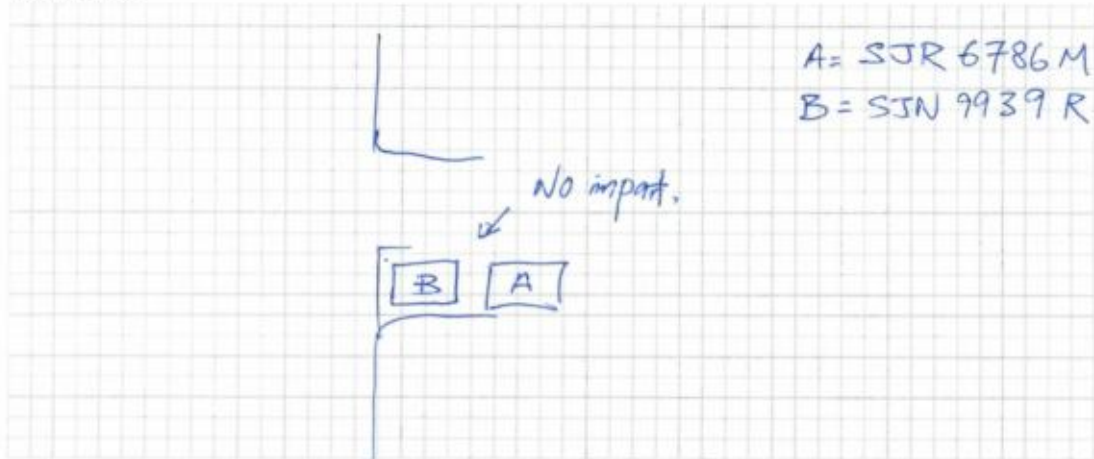
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

  
Policyholder's Signature  
Date & Time: 27/11/17 12:35pm

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 27/11/17 12:35pm

  
Reporting Centre Personnel's Signature  
Name: Chang Chee Sing  
NRIC/FIN No.: 9224870W ✓  


# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to attachment.

Attached Third Party vehicle photos.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
Date & Time: 22/11/17 12:35pm

GAIRAC Sketch/Plan form\_V3

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 22/11/17 12:35pm

Reporting Centre Personnel's Signature  
Name: Chang Chee Sing  
NRIC/FIN No.: G2248170W

An incident happened on 19 Nov, 3:55pm at Waterway Point carpark exit with a car plate# SJN9939R. While driving out, I stopped my car in front of a car awaiting to turn left to main road. The front car driver came out and said I knocked into his car. I checked & told him there's no collision. He insisted we drove out to check again. I did a physical check both cars & didn't find any damages no scratches or dents. He said I've hit into his rear bumper become loose. He demand \$50 for private settlement else report insurance claim. He opened up his rear door and showed me that the screws that secured the bumper already came out & gone missing due to the impact which he claimed. The bumper is not secured with screws in the 1st place how can it be secured tightly, the screws can't be missing as it covered by the rear door. This is obviously a fraud, his car has involved an accident before & want to claim damages against me instead. Pls assist and investigate should he claim car insurance against me. Thanks

*John*

Accident Photo





Accident Photo



## Driving License





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





**Accident Photo**





Accident Photo



**Accident Photo**



Accident Photo





Accident Photo





Accident Photo



Accident Photo



THIRD PARTY VEHICLE



THIRD PARTY VEHICLE





THIRD PARTY VEHICLE

