

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	27/11/2017 16:52
Date Of Accident	27/11/2017 12:30
Exact Location Of Accident	SIXTH AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDZ8188E
Insured/Policyholder	
Name Of Registered Owner	TONG HOI CHAK
NRIC No	S0367369C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96181130
Alternative Phone No	OFFICE-96181130

Vehicle Particulars

Manufacturer	AUDI
Model	A3 SB 1.4 TF
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
If No, Please state action to be taken	
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	2100479443-01
Cover Note Number	

Driver

Name of Driver	TONG HOI CHAK
NRIC No	S0367369C
Date Of Birth	08/02/1944
Occupation	INDOOR
Date Of Driving Pass	10/04/1962
Driving Experience	55 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96181130
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	7 THOMSON LANE, #14-05
Postcode	297725
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	SIDE SWIPE
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

REFER TO ATTACHMENT

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	GX7546L
Vehicle Make/Model/Colour	NISSAN/LIGHT GREY
Details Of Properties	
Name of Driver	MR SKY CHIN
NRIC/Passport Number	
Contact Number	83333872
Address	170 BT. TIMAH RD, #05-01
Postcode	588179
Insurance Company Name	ERGO INSURANCE PTE. LTD.
Nature Of Damage	LEFT FRONT AND REAR DOOR
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan

SKETCH PLAN

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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.
- (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:

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



Reporting Centre Personnel's Signature
Name: Tong Beng Su
NRIC/FIN No.: G5331909P

Sixth Avenue

GX 7546 L

SDZ8188E

No A3A

Refer to attachment

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Jon Engsu
NRIC/FIN No.:

On Monday 27 November 2017 at about 12.30pm I was driving with my wife as passenger, along Sixth Avenue in the direction of Holland Road. I stopped for a while along the side of the road (in front of the short driveway of house No 43A) and when I looked in my side mirror that there was no approaching cars, I turned out and was in collision with a van also travelling in the direction of Holland Road. Apparently I did not see the van from the side mirror. Nobody was hurt in the accident. After the accident we moved the vehicles to a side road along Sixth Avenue to exchange details. The van Registration No is GX7546L and was driven by a man who gave me his name card as Mr Sky Chin. The van belongs to Sky Pool Services Pte Ltd. The van driver did not have a copy of the Insurance Certificate but informed me that their Insurer is Ergo Insurance Pte Ltd. I gave him details of my car insurance with AIG. We agreed that both of us will report the accident to our respective insurers.

Damage to my car was on the right front side from the bonnet downwards and the right side lamp. The lower part right fender pressed against the right front wheel which makes it not safe to drive and so I called for Audi Service to have it towed to their workshop.

Damage to the van was to the left front door extending a little to the back door.

R/T/104
27/11/17

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

