# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 11/11/2017 12:26

# 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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 policyliability 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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	11/11/2017 11:59
Date Of Accident	08/11/2017 19:40
Exact Location Of Accident	ALONG AYE TOWARDS CLEMENTI
Country/State of Loss	SINGAPORE
DETALS OF OWN VEHICLE	
Vehicle Registration Number	SJN516L
Insured/Policyholder	
Name Of Registered Owner	GLORIA HYACINTH BARKER
NRIC No	S0000026D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96693964
Alternative Phone No	Home-64679343
Vehicle Particulars	
Manufacturer	AUDI
Model	A4-1.8 (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	2100127693-08000
Cover Note Number	
Driver	
Name of Driver	BAKER, MEGAN ELIZABETH

NRIC No S8809090Z
Date Of Birth 05/03/1988
Occupation INDOOR
Date Of Driving Pass 12/10/2016

Driving Experience 1 YEAR AND 0 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96693964

Fax Number

Contact Number

EMail Address THEMEGANIZER@YAHOO.COM.SG

Address 6 SUNSET VALE Postcode 597232

Was driver an employee of the Insured's Company N

If No, Relationship of the Driver with the Insured OTHER - GRAND CHILDREN

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?

Was any body injured in the Accident?

NO

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

I WAS DRIVING HOME FROM WORK ON THE AYE, I HAD JUST COME FROM THE MERCHANT ROAD EXIT AND WAS IN THE LEFT MOST LANE. MY CAR IS OLD AND WAS TAKING A WHILE TO PICK UP SPEED, THE SILVER VAN BEHIND ME FLASHED HIS HEADLIGHTS AT ME. I CONTINUED TO DRIVE STRAIGHT. SUDDENLY, I WAS HIT ON THE RIGHT HAND SIDE OF MY CAR, PUSHING MY CAR TO THE LEFT OF THE ROAD. I MANAGED TO REGAIN CONTROL OF THE CAR AND NOTICED THE SILVER VAN WAS IN FRONT OF ME, HE PULLED OVER TO THE LEFT HAND SIDE OF THE ROAD, SO I PULLED OVER BEHIND HIM. AN OLD MAN GOT OUT OF THE VAN, WE INSPECTED OUR VEHICLES, THE DAMAGE TO MY CAR WAS MUCH MORE SEVERE THAN THE DAMAGE TO HIS VAN. WE EXCHANGED PARTICULARS AND MADE SURE NO ONE WAS HURT. HIS NAME IS ROBERT CHUA, THE VEHICLE IS OWNED BY 800 SUPER WASTE MANAGEMENT. THE VAN CAR PLATE NUMBER IS PC3871C. ROBERT CHUA IC NUMBER: S0969727F. ROBERT CHUA'S PHONE NUMBER IS 96787228. THE OWNER OF MY CAR IS NOT IN SINGAPORE AT THE TIME OF THE REPORT.

### Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number PC3871C

Vehicle Make/Model/Colour

**Details Of Properties** 

Name of Driver ROBERT CHUA NRIC/Passport Number S0969727F

Contact Number 96787228

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **Details of Witness**

Name

Phone Number Fmail Address

#### Sketch Plan

#### SKETCH PLAN

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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  interested parties.
- 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:
  - 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:

TAN CHONG MOTOR SALES PTE LTD 913 BUKIT TIMAH ROAD

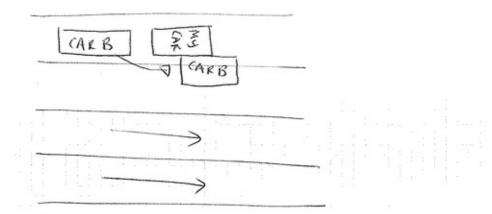
SINGAPORE SREEZS

671 : 62721 7711 FAX: 6469 7472

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:



# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving home from work as the AYE, I had
just come from the merchant road exit and was
in the left most lave. My car is old and was taking
a while to pick up speed, The silver behind me
a while to pick up speed. The silver a behind me flashed his headlights at me sadde I continue &
to drive straight, suddenly I was hit on
the right hand side of my car for pushing my
car to the less or the wad. I managed to
regain control of the car and noticed the silver
van was in front or me, he pulled over to the
leff hand side of the wad, so I pulled over
behind him p. An old clined man got out of
the van, we inspected our vehicles, we damage to
my cor was much more severe from the damage
to his van. The man driving name is lobert than,
We exchanged particularly and med sun in ar was
huvt.
have is Robert Chia, the vehicle is one & by
800 super waste management The Van car plate
number is PC 3871C.
Robert Chur I ( number : S0969 727F
DECLARATION The purply of the City is that he specified the since of the weapout

DECLARATION The cover of my CT u IVI

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

Driver's Signature (If driver is not the policyholder)

Date & Time:

11/11/2017 -12pm

TAN CHONG MOTOR SALES PTE LTD 913 BURIT TIMAH ROAD 50-08FCHE 508A23

Reporting Centre Personnel's Signature

Name:

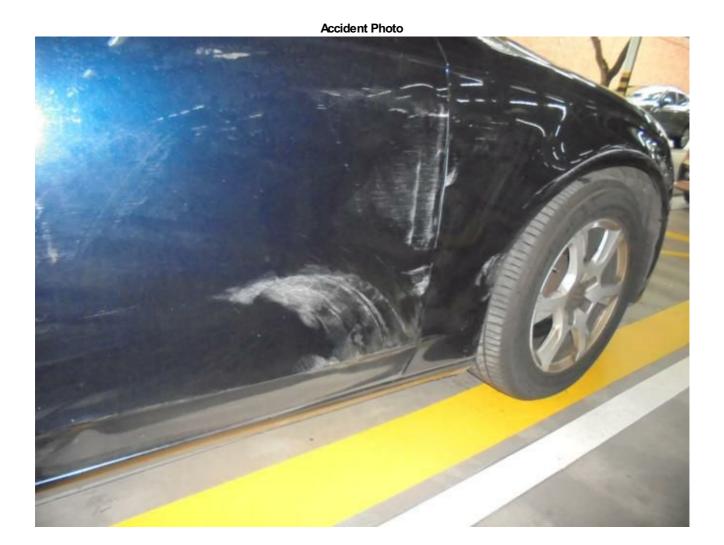
NRIC/FIN No .:

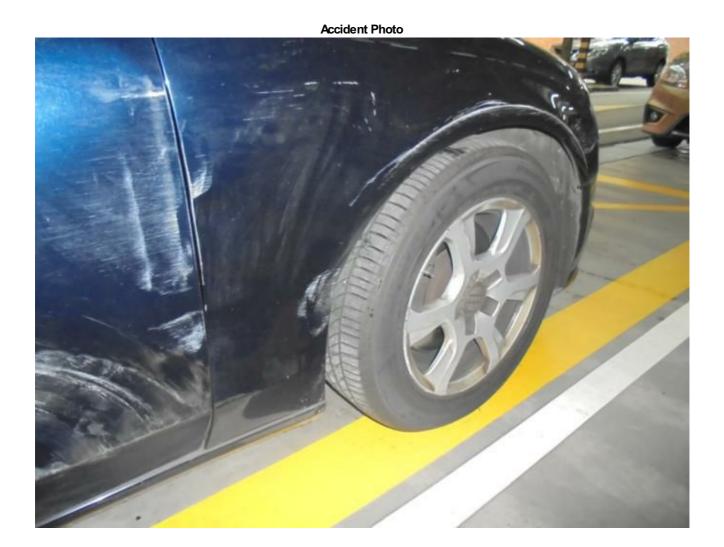
Policyholder's Signature Date & Time:











**Accident Photo** 



**Accident Photo** 

