

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	15/12/2017 13:28
Date Of Accident	14/12/2017 16:40
Exact Location Of Accident	NGEE ANN CITY SHOPPING CARPARK EXIT YELLOW BOX
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG3993K
Insured/Policyholder	
Name Of Registered Owner	NG TSENG CHING
NRIC No	S7321479C
Email Address	ALVIN@NG3.SG
Mobile Phone No	(LOCAL) +65-93809339
Alternative Phone No	Office-67665573

Vehicle Particulars

Manufacturer	BMW
Model	730LI AT ABS D/AB 2WD 4DR NAV HID SR
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
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	1700069257
Cover Note Number	

Driver

Name of Driver	NG TSENG CHING
NRIC No	S7321479C
Date Of Birth	24/06/1973
Occupation	INDOOR
Date Of Driving Pass	23/07/1997
Driving Experience	20 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93809339
Fax Number	
Contact Number	OFFICE-67665573
EMail Address	ALVIN@NG3.SG
Address	BLK 605 CHOA CHU KANG STREET 62 #05-149

Postcode	680605
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)	1

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 SKETCH PLAN.

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	SHD4910G
Vehicle Make/Model/Colour	"COMFORT TAXI" / HYUNDAI / I140 / BLUE
Details Of Properties	
Name of Driver	ANG HUANN PO
NRIC/Passport Number	S7141254G
Contact Number	98206598
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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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;

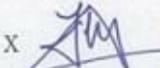
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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

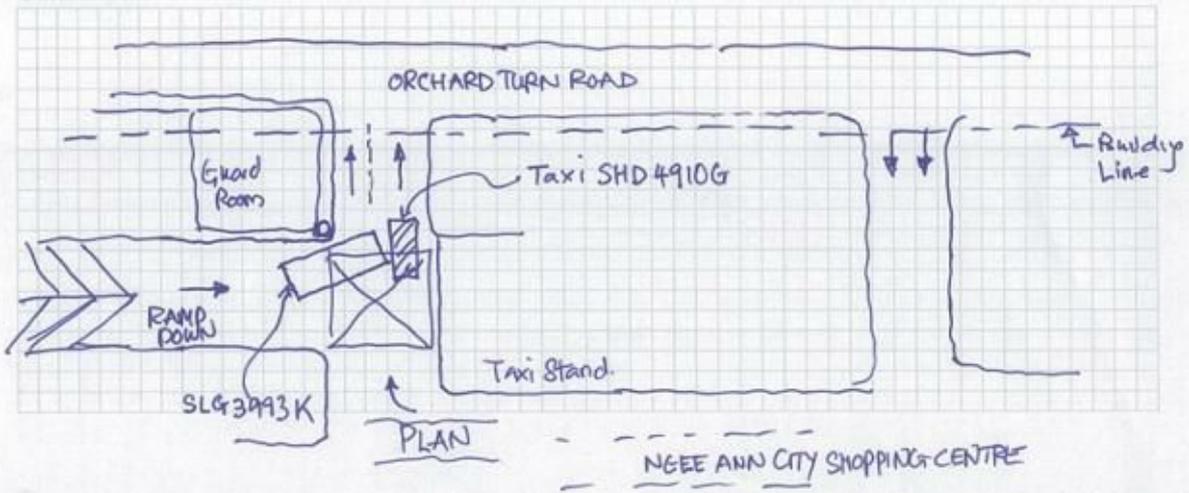
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

X  15.12.2017
Policyholder's Signature / Date & Time
12:39


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


Witnessed by Reporting Centre Personnel

Sketch Plan



Sketch Plan #2

Describe Circumstances of the Accident

I was driving down from carpark of ngee Ann City Shopping, traffic was very heavy. I stop behind the yellow box line and was instructed by standing guard at yellow block to proceed and exit fast. I proceed and accidentally hit the side door of taxi (Taxi No.: SHD4910G)

My car hit the left back door of the taxi at about 4-50mm from ground level. The vehicle door dented inwards about 5mm and when I reverse back, there is no obvious damage. Driver Mr Ang want to claim insurance.

The incident happen in the Ngee Ann Shopping center Carpark exit point and within the yellow box.

I was turning out of the driveway ramp and accidently touch the side door of the Taxi.

NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.

Please State:

Claim Own Policy Claim Third Party Claim OD/TP at other workshop Reporting only

Declaration

We declare the foregoing particulars are true in every respect.

X  15-12-2017
Policyholder's Signature / Date & Time
12:39.

Driver's Signature (if driver is not the policyholder) / Date & Time

 
Witnessed by Reporting Centre Personnel

DL & IC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7321479C**



Name
**NG TSENG CHING
(HUANG ZENGQING)**
黄增庆

Race
CHINESE
Date of birth
24-06-1973 Sex
M
Country/Place of birth
SINGAPORE

S7321479C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **S7321479C**

Name

**NG TSENG CHING
(HUANG ZENGQING)**

Birth Date: **24 Jun 1973**

Issue Date: **27 Jun 2003**



000604905D

5619487



NRIC No. **S7321479C**



Date of issue
07-07-2016

Address
**APT BLK 605 CHOA CHU KANG STREET 62
#05-149
SINGAPORE 680605**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE

23 Jul 1997



Licence No. **S7321479C**

NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



ONSITE ACCIDENT PHOTO



ONSITE ACCIDENT PHOTO



ONSITE ACCIDENT PHOTO

