

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 09:16
Date Of Accident	14/12/2017 18:30
Exact Location Of Accident	KEPPEL FLYOVER (TWDS MCE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS404B
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Insured/Policyholder

Name Of Registered Owner	LOO JIN WEI
NRIC No	S8340801D
Email Address	ANSON1983@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97591023
Alternative Phone No	Office-NOPHONE

Vehicle Particulars

Manufacturer	MAZDA
Model	5-2.0 5 DR WAGON (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL 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	
Cover Note Number	

Driver

Name of Driver	LOO JIN WEI
NRIC No	S8340801D
Date Of Birth	16/12/1983
Occupation	INDOOR
Date Of Driving Pass	12/12/2002
Driving Experience	15 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97591023
Fax Number	
Contact Number	OFFICE-NOPHONE
EMail Address	ANSON1983@HOTMAIL.COM
Address	BLK 9 PUNGGOL FIELD WALK #03-22

Postcode	828743
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	COLLISION - HEAD TO REAR
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

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB5525S
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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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: 14/12/17

Driver's Signature

(If driver is not the policyholder)

Date & Time: 14/12/17

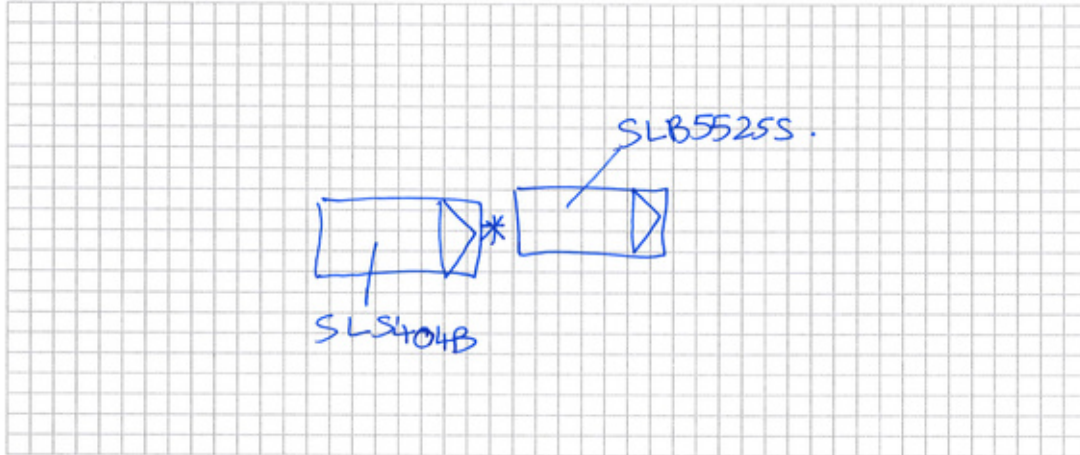
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Trans Eurokars Pte Ltd
5 Ubi Close
Singapore 408600
Tel: 6474 3333 / 6474 3333
Fax: 6746 1860

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE NO: SL5404B

ACCIDENT DATE: 14/12/2017

CONTACT NUMBER: 97591023

ACCIDENT TIME: 19:30

EMAIL: ANSON1983@hotmail.com

LOCATION: KEPPEL EXPRESS (TOWARDS MCE)

I was driving along keppel express and changing to the first lane where the car in front suddenly jam brake. I could not brake in time and bump into the car in front.

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

PLEASE CHECK YOUR POLICY FOR MORE INFORMATION

PLEASE STATE: ☒ CLAIM OWN POLICY ☐ CLAIM THIRD PARTY ☐ REPORTING ONLY

DECLARATION

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

Policyholder's Signature
Date & Time: 14/12/17 19:30

Driver's Signature
(If driver is not the policyholder)
Date & Time: 14/12/17 19:30

Trans Eurokars Pte Ltd
5 Ubi Close
Singapore 408605
Tel: 6734 2003 / 6749 4333
Reporting Officer's Signature
Name:
NRIC/FIN No.:

REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S8340801D**
 Name: **LOO JIN WEI (LU JINWEI)**
 Birth Date: **16 Dec 1983**
 Issue Date: **02 Nov 2003**

000971430A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8340801D


 Name: **LOO JIN WEI (LU JINWEI)**
卢锦炜
 Race: **CHINESE**
 Date of birth: **16-12-1983** Sex: **M**
 Country/Place of birth: **SINGAPORE**

S8340801D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(IES)

Class	Description	PASS DATE
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	12 Dec 2002

NP 428A

Licence No: S8340801D

5258310


 NRIC No: **S8340801D**
 Date of issue: **17-01-2014**
9 PUNGGOL FIELD WALK #03-22
SINGAPORE 828743
 NRIC No: **S8340801D** Date: **01/09/2017**

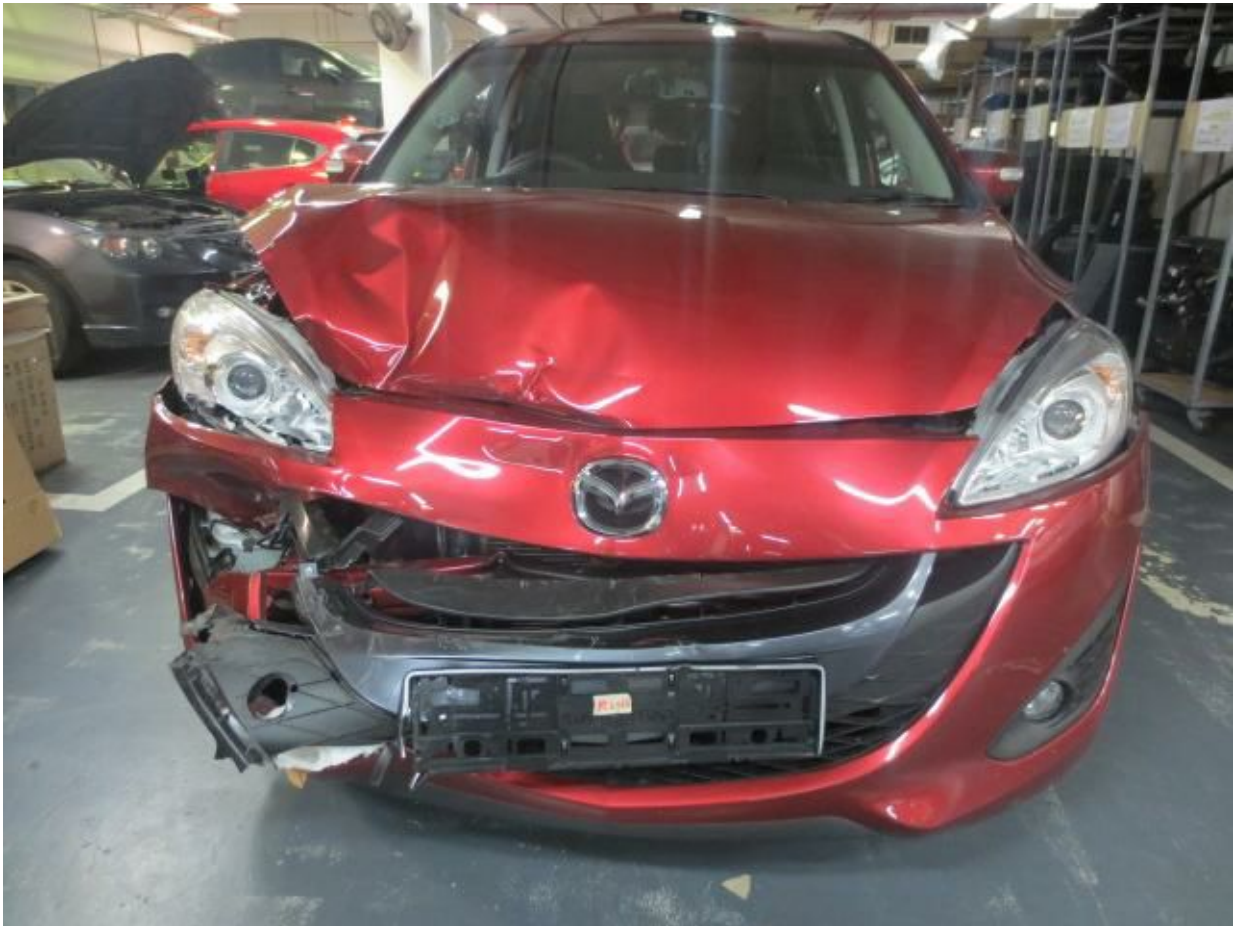
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

