SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

Mobile Number

Fax Number
Contact Number

EMail Address

Gender

- 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 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.

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	03/01/2018 11:41
Date Of Accident	26/12/2017 21:15
Exact Location Of Accident	OUTSIDE 37 LLOYD ROAD (CARPARK LOT 11)
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKP567S
Insured/Policyholder	
Name Of Registered Owner	AIK ZHIYING(YI ZHIYING)
NRIC No	S8122474I
Email Address	ALEXISAIK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81614725
Alternative Phone No	OTHERS-81614725
Vehicle Particulars	
Manufacturer	BMW
Model	X3
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	B 27761195 SMP
Cover Note Number	
Driver	
Name of Driver	AIK ZHIYING(YI ZHIYING)
NRIC No	S8122474I
Date Of Birth	06/08/1981
Occupation	INDOOR
D + O(D):	40/00/0000

10/06/2002

FEMALE

15 YEARS AND 6 MONTHS

(LOCAL) +65-81614725

ALEXISAIK@GMAIL.COM

OTHERS-81614725

BLK 63 PATERSON ROAD Address

#06-02

Postcode 238539

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

3

YES 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)

Passenger 1

NAME: : KIYAN GERARD FESHARAKI-AIK

GENDER: : MALE

Passenger 2 NAME: : GRACE AU KIT WAN

> GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

PLEASE 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 GW6245S

Vehicle Make/Model/Colour SILVER LORRY

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

Name of Driver HO KAI MING NRIC/Passport Number S0106526B 90699499 Contact Number

Address Postcode Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 5. The report will be forwarded by the insurers of the GA 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.
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- 8. Consent under the Personal Data Protection Act (PDPA)

l 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 (oblectively the "Personal Information") and disclose and transfer such Personal information to all insurer(s) who have insured vehicle(s) involved in this ecodem (all insurer(s) who have insured vehicle(s) involved in this ecodem shall be collectively referred to as the "Insurers"), the insurers' law yers law firms, the Nonetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
- (ii) 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;
- (II) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (Iv) administering my claims (including the maling of correspondence, statements, invoices, reports or notices to me, which could involve displayers 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' law yers/law firms, may/are perhitted 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 law yers/law firms), which may be sted outside of Singapore, for one or more of the above Purposes.

03/01/2018

Wasses by Reporting Deptre
Persunnel Rosal Washin Driver's Signature (Fidriver a not the policyholder) / Date Policyholder Sketch Plan 13 reveal sminy out of lot mt 528 5675 WHILE VEVELSINY trule Prvement outside. 37 Lloyd Pord

Sketch Plan #2

Describe Circumstances of the Accident
Outside 37 (layd Road sep 5675 was garked on the govalle bublic corpork
1st no. 11. While Long GW 62455 was forked at 10+ 10. Priver of SEP5675
was standing behind parked for and securing child in stroller while passenger of
same car was chanding to the side and back of the car.
The larry driven my ito kai ming storted reversing (note no reverse sensor cound)
and but the car sep 5625. Car shock and larry workness to leverse and then
stanted to move off which resulted in the carshaking jumping again.
about to drive iff. it moved private a bit more then reversed back.
a pit more then reversed beaut.
Impart has his ble damage to populat work at the front and front (right)
Humber plate was also gotched in 3 places.
Arcident time : Around 9-18 pm
Declaration
/ 1/1
No sections the foregoing particulars are true propertiespect. 27 Pec 2017 27 Pec 2017
Policytodes Striature / Date & Oriver's Signature / driver is not the policyholder / Date Witnessed by Reporting Centre
We deplace the foregoing particulars are true preparespect. Policylogider's Structure / Date & Driver's Signature (F driver is not the policyholder) / Date 8 Time Only 1 Pec 2017 Driver's Signature (F driver is not the policyholder) / Date Personnel Personnel Posts Wedding Personnel Posts Personnel Posts Wedding Personnel Posts Personnel Posts













































