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 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 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

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Date Of Report 27/01/2018 15:15 Date Of Accident 26/01/2018 11:10

Exact Location Of Accident CARPARK AREA OF BLOCK 672 JALAN DAMAI

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJL8421J

Insured/Policyholder

Name Of Registered Owner JUSTIN CHUA YONG TIAN

NRIC No S7516628A

Email Address JUSTINCHUA5904@YAHOO.COM.SG

Mobile Phone No (LOCAL) +65-97114038 Alternative Phone No OTHERS-97114038

Vehicle Particulars

Manufacturer HONDA Model JAZZ

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 LIBERTY INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

SI17V17701/VPE/R08 Policy Number

Cover Note Number

Driver

Name of Driver JUSTIN CHUA YONG TIAN

NRIC No S7516628A Date Of Birth 08/06/1975 Occupation **INDOOR** Date Of Driving Pass 18/12/1998

Driving Experience 19 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-97114038

Fax Number

Contact Number OTHERS-97114038

EMail Address JUSTINCHUA5904@YAHOO.COM.SG Address

BLK 182 JELEBU ROAD

#12-60

Postcode

670182

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

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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?
Was any injured conveyed to hospital by

NO NO

ambulance?

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)

0

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

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

SHB4901T

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE HIRE

Vehicle Category

KOK SHANG CHIEW

Name of Driver NRIC/Passport Number

S2566007B

Contact Number

96510823

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)