

## 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 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	10/02/2018 11:26
Date Of Accident	27/01/2018 09:55
Exact Location Of Accident	SHELFORD ROAD/DUNEARN ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS9220D
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#### Insured/Policyholder

Name Of Registered Owner	CHEN YONG FENG
NRIC No	S2730236Z
Email Address	JS.CYF@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97329081
Alternative Phone No	Others-97329081

#### Vehicle Particulars

Manufacturer	VOLVO
Model	S80 2.5T
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	2100268646-06
Cover Note Number	

#### Driver

Name of Driver	CHEN YONG FENG
NRIC No	S2730236Z
Date Of Birth	19/08/1964
Occupation	INDOOR
Date Of Driving Pass	15/11/2008
Driving Experience	9 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97329081
Fax Number	
Contact Number	
EMail Address	JS.CYF@HOTMAIL.COM

Address	19 SHELFORD ROAD
Postcode	#05-06 SINGAPORE 288408
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
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by 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)	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

Collision - Head to Rear (I hit a third party vehicle), #tjunction, Turning into Main Road & Moving straight, Blue Car SJS9220D, White Car SKS9689Z Both cars turning into Dunearn road from Shelford road, and there was traffic jam along Dunearn road, SKS9689Z stopped suddenly and SJS9220D hit the rear bumper, very soft hit, no clear scratch and damage can be seen.

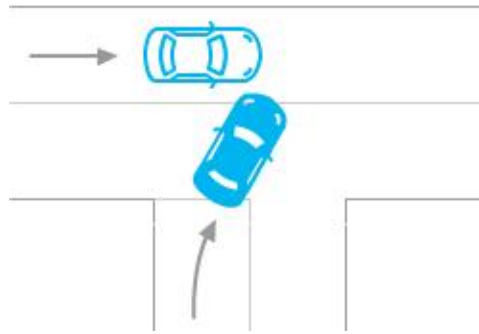
#### Attachment(s)

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	SKS9689Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	96864362
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

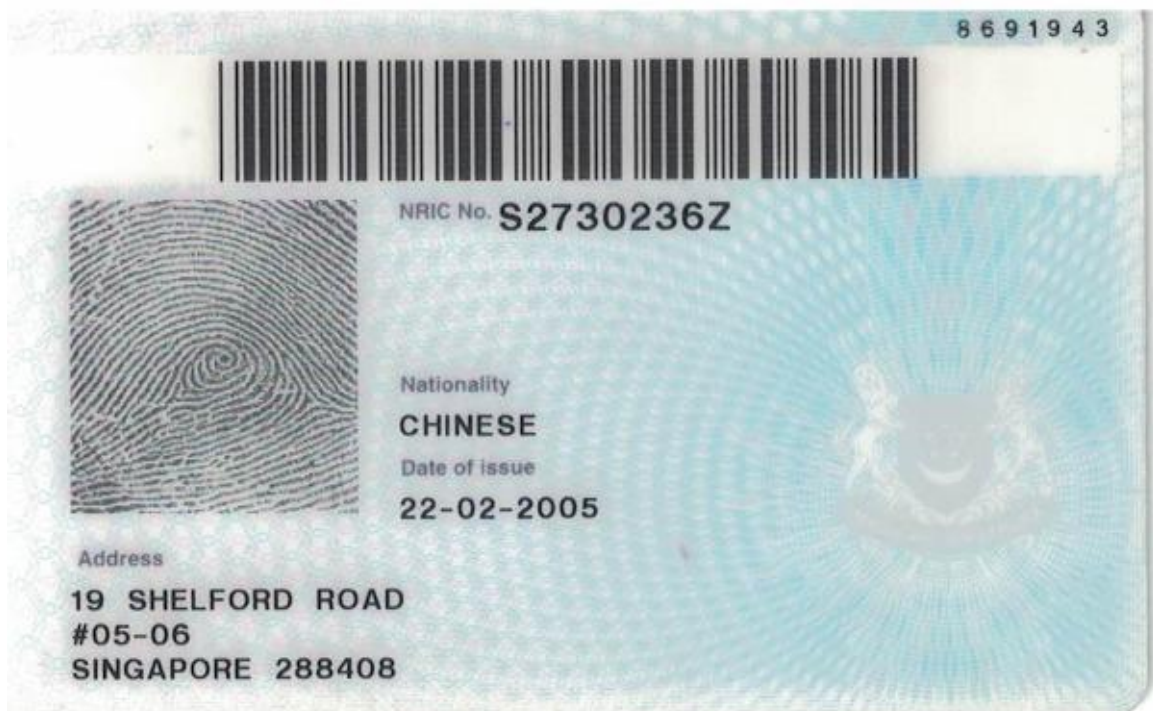
# Sketch Plan



Insd's Nric (Front)



Insd's Nric (Back)



Driving License (Front)



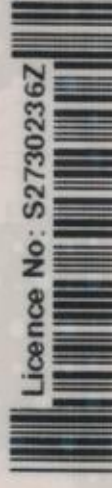
Driving License (Back)

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

PASS DATE

Class 3 Motor Cars  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of the driver; and other motor vehicles  $\leq$  2500kg 05 Dec 2000

NP 428A



Accident Photo

