

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 | 27/01/2018 20:29 |
| Date Of Accident | 27/01/2018 15:15 |
| Exact Location Of Accident | BEDOK NORTH DRIVE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SKV5478B |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|------------------------------|
| Name Of Registered Owner | LYNN LEE LAI YING (LI LYING) |
| NRIC No | S7836788A |
| Email Address | QUEKPOHBENG@GMAIL.COM |
| Mobile Phone No | (LOCAL) +65-98341487 |
| Alternative Phone No | Others-98341487 |

Vehicle Particulars

| | |
|--|-----------------|
| Manufacturer | SUBARU |
| Model | FORESTER 2.0I-L |
| 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 | 2100430374-02 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | KENNETH QUEK |
| NRIC No | S7913567D |
| Date Of Birth | 08/05/1979 |
| Occupation | INDOOR |
| Date Of Driving Pass | 21/02/2013 |
| Driving Experience | 4 YEARS AND 11 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90406364 |
| Fax Number | |
| Contact Number | |
| EMail Address | QUEKPOHBENG@GMAIL.COM |

| | |
|---|--|
| Address | 773 BEDOK RESERVOIR VIEW#08-125S(470773) |
| Postcode | 470773 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | SPOUSE |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|--------------|
| Type Of Accident | NO COLLISION |
| 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) | 2 |
| Passenger 1 | Name: : FAITH QUEK Gender: : Female |

Details of Police Action

| | |
|---|--------------------------|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| POLICE STATION NAME [OTHER] | BEDOK POLICE DIVISION HQ |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

Circumstances Of Accident #others, Upload the drawing sketch plan "On the 27th of January 2018, at around 1520 hrs, I was driving along Bedok North Drive in my dark grey Subaru (SKV5478B). I was on the right side of the 2 lane road and looking to turn right into the car park. There was a bus looking to turn into the bus interchange on the opposite side and it was blocking my view of oncoming vehicles. I slowly inched forward and decided to go ahead with the right turn as I did not see any oncoming vehicles. However, a motorcycle (FW8239J) suddenly appeared and I quickly braked to avoid a collision. The motorcycle lost control and fell on to the road, though there was no collision. I signaled to the motorcyclist to wait while I parked my car, and then got out to see to him. He had moved his bike to a corner and was standing and moving without assistance. He mentioned that he was okay, and that he was not angry, but that we should exchange particulars and contact details. He gestured to his leg on which I noticed a palm-sized scratch on his leg. He took out his phone and photographed my NRIC card while I did the same for his. I also took a photo of his bike, which seemed fine to me. We subsequently exchanged phone numbers and I left first. At about 1600 hrs, I received a text from him that he was heading to hospital, that his bike was damaged, that his phone screen was cracked. He also mentioned his leg, and that he wouldn't be able to work for a few days, and that this was his only main income. At about 1700 hrs, he texted again to indicate that he had just reached the hospital. At about 1830 hrs, I made a police report of the incident."

Attachment(s)

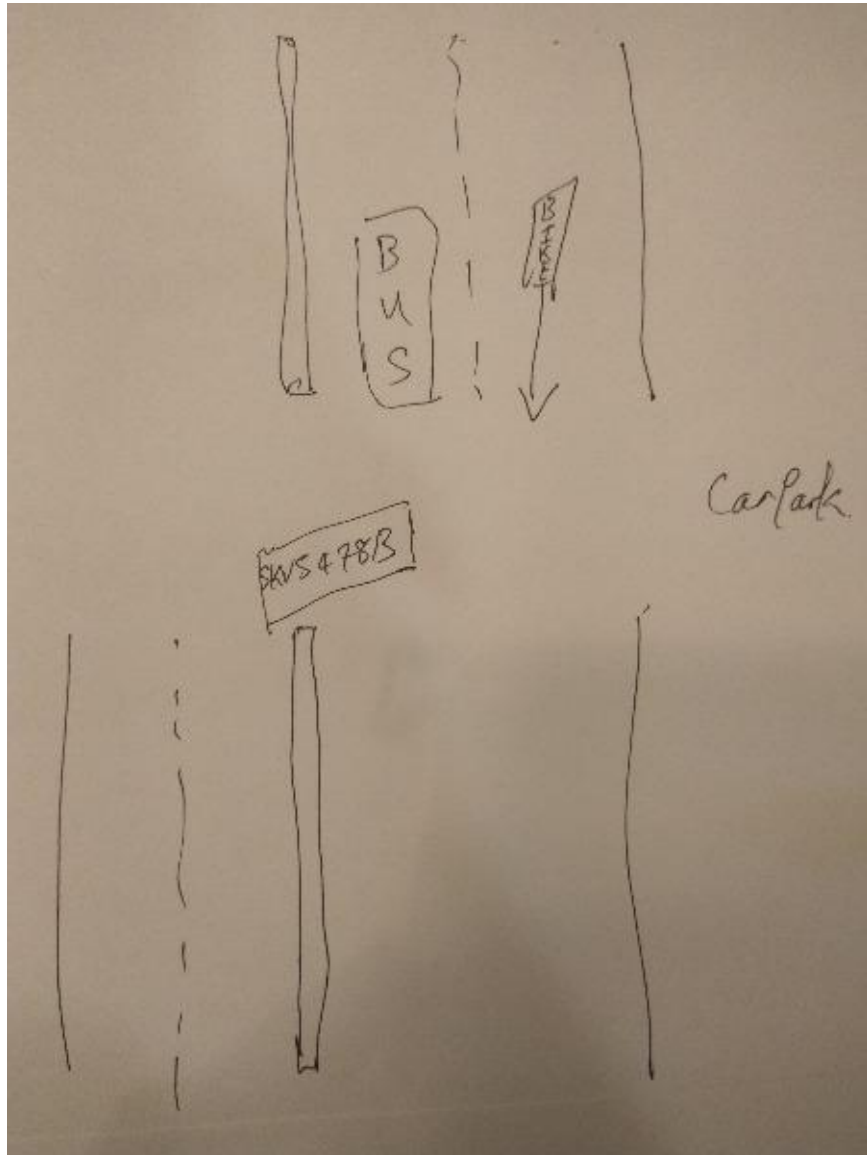
| | |
|---|----------------------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | INDS DID NOT PROVIDE VIDEO |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

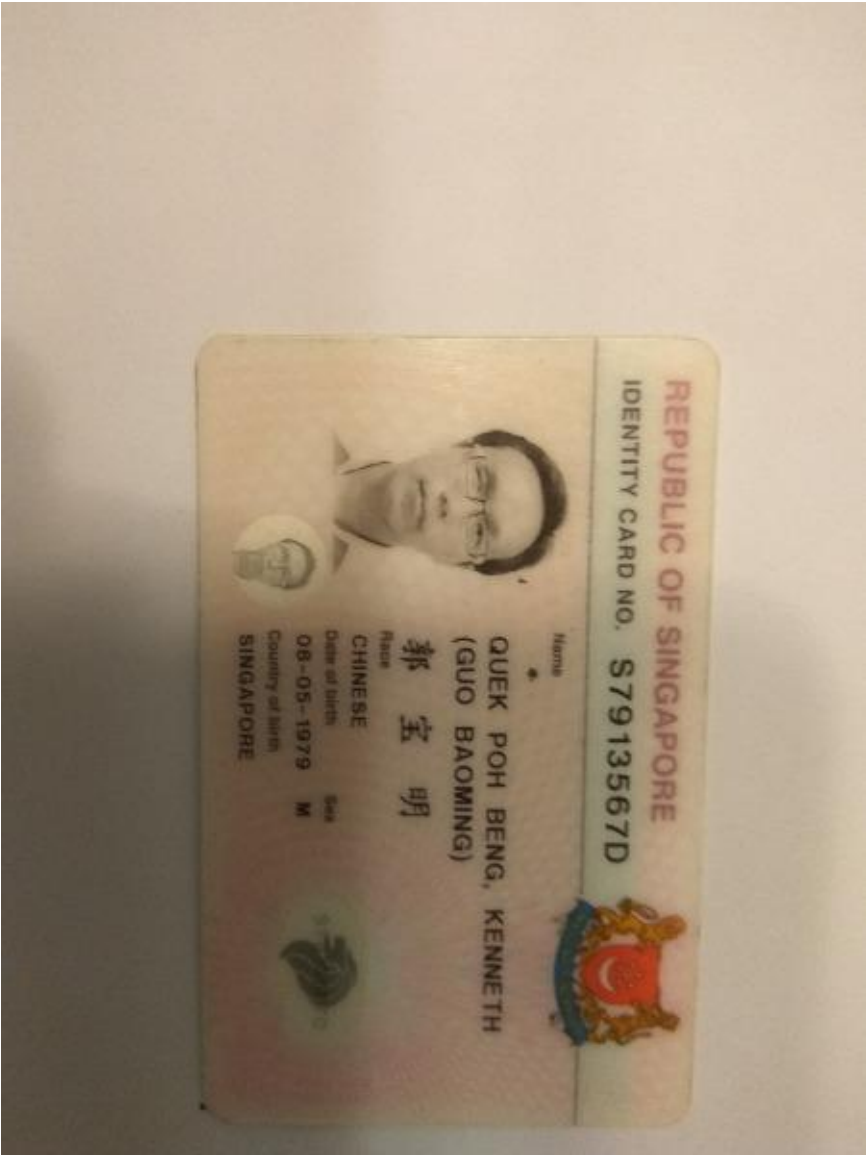
| | |
|-----------------------------|------------|
| Vehicle Registration Number | FW8239J |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | MOTORCYCLE |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | 90285516 |

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan



Driver's Nric (Front)



Driver's Nric (Back)



Driver's Driving License (Front)

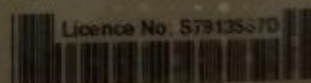


Driver's Driving License (Back)

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) $\leq 3000\text{kg}$ 21 Feb 2013
with ≤ 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals $\leq 2500\text{kg}$



NP 428A

Accident Photo

