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 <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 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
05/02/2018 13:12
04/02/2018 15:20
PIE (CHANGI) BEFORE THOMSON EXIT
SINGAPORE
ETAILS OF OWN VEHICLE
SJY7029Y
WAN KAIJING
S8605951G
KAIJING1@GMAIL.COM
(LOCAL) +65-84281049
OFFICE-97892663
BMW
325
NORMAL USAGE
NO
THIRD PARTY
PRIVATE CAR
MSIG INSURANCE (SINGAPORE) PTE. LTD.
COMPREHENSIVE
NO
B27568308SMP

Name of DriverWAN KAIJINGNRIC No\$8605951GDate Of Birth11/03/1986OccupationINDOORDate Of Driving Pass15/12/2006

Driving Experience 11 YEARS AND 1 MONTH

Gender FEMALE

Mobile Number (LOCAL) +65-84281049

Fax Number

Contact Number OFFICE-97892663
EMail Address KAIJING1@GMAIL.COM

Address 20 NAMLY RISE

Postcode 267127

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

-

NO

NO

NO

General Information of the Accident

Type Of Accident CHAIN 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 3

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.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACH.

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 SKV4701M

Vehicle Make/Model/Colour LEXUS BLACK

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver ROZARIO BRIAN AUBREY

NRIC/Passport Number S7000784C Contact Number 97461400

Address Postcode

Insurance Company Name AIG ASIA PACIFIC INSURANCE PTE. LTD.

Nature Of Damage FRONT

No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJH7434A

Vehicle Make/Model/Colour BMW 320I BLACK

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TAN YANMING NICHOLAS

NRIC/Passport Number S8627453A Contact Number 96227476

Address Postcode

Insurance Company Name

Nature Of Damage REAR

No. Of Passenger (Including Driver)

SKETCH PLAN

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- The 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 lodgment 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.
- 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.

11 00 WB.

Policyholder's Signature

05 Feb 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN	and the state of the same of t	Annual materials and a second of the second	, - , ··
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		the Thomson Exit which h	ad
	sure on the extreme		
I was driving believed the	a BMW (vehicle nu	uber SJH 7434A) dinveu by	
Mr Tall Variation A	iduolas (S 8627 453	A).	
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HART HE WAS LONG	ig to a half of i did	80 Mr well. 7 had	
momentarily stopp	ed behind the BMW	but hit him when my ca	X
was hit from the	back by the loxus	vehicle number SKV 4701	M)
diminus lau Mr R 077	Min Birgan Aubron	(87000784C) The Online	aun
in a second of the	while County According	10210 Muray we tallicing to	The
impact properted in	Velucie tormand, la	vehicle number SKV 4701 (870007846). The Subsensing Human collision with	-
the RIMM (S) H	7434A) in front.		
There were no	other sameusers in	all three vehicles.	
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	e able to walk.	A .	
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DECLARATION			
/We declare the foregoing particulars a	are true in every respect.		
05 Feb 2018		AND	
1100 lin			
dicyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature	
pattle time:	(If driver is not the policyholder) Date & Time:	Name: NRIC/FIN No.:	









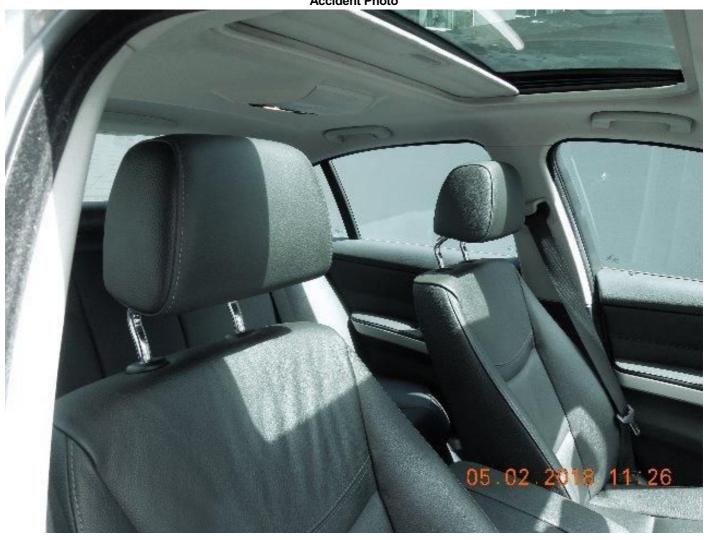




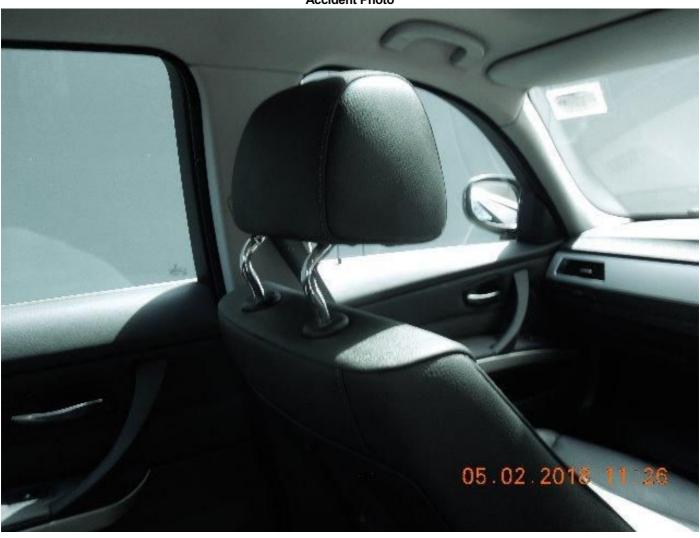




Accident Photo Accident Photo







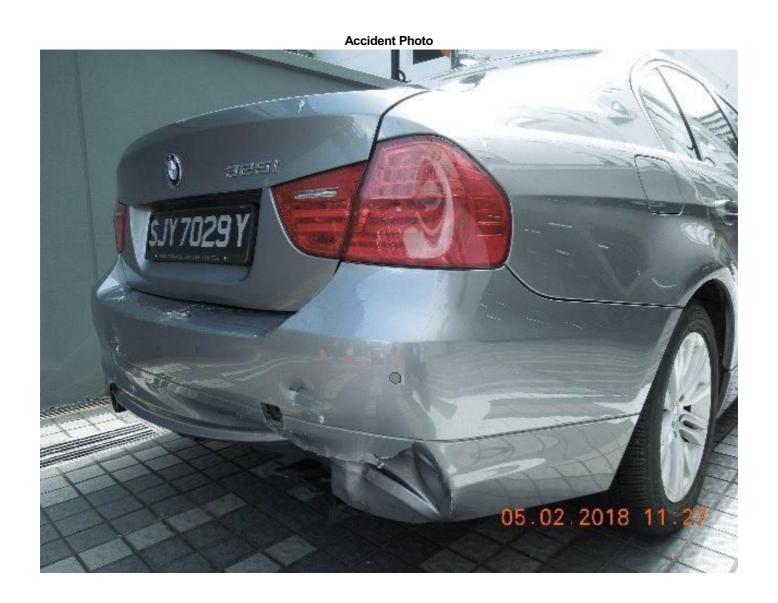










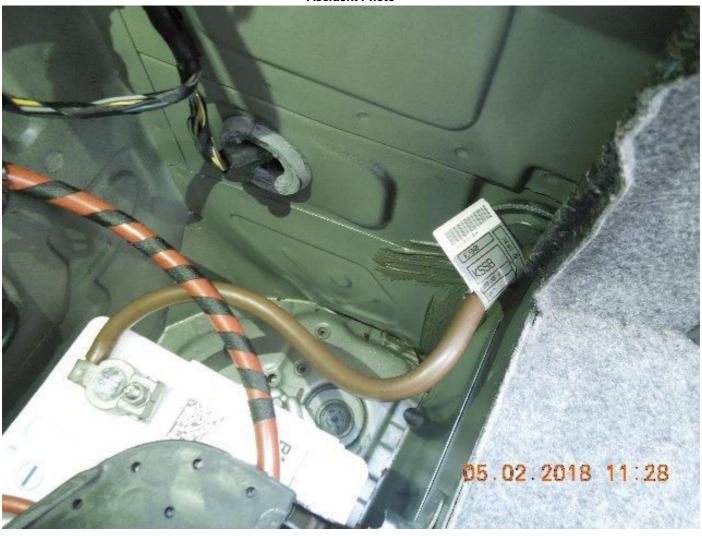














Accident Photo 3.5 9.2 2018 11:29



















