SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Gender

Mobile Number

Contact Number EMail Address

Fax Number

- 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 con aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	21/02/2018 15:06
Date Of Accident	21/02/2018 09:55
Exact Location Of Accident	LAKE LIFE MULTI STOREY CARPARK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLT4110S
Insured/Policyholder	
Name Of Registered Owner	WONG MING WEI (WANG MINGWEI)
NRIC No	S7115251J
Email Address	WONG_MW_DICK@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-81383812
Alternative Phone No	OTHERS-81383812
Vehicle Particulars	
Manufacturer	NISSAN
Model	NOTE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	t .
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700071575
Cover Note Number	27/10/2017 - 26/10/2018
Driver	
Name of Driver	WONG MING WEI (WANG MINGWEI)
NRIC No	S7115251J
Date Of Birth	04/05/1971
Occupation	INDOOR
Date Of Driving Pass	10/02/1989
Driving Experience	29 YEARS AND 0 MONTHS

MALE

(LOCAL) +65-81383812

WONG MW DICK@HOTMAIL.COM

OTHERS-81383812

Address 12 TAO CHING RD #10-25

Postcode S618726

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 ON 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 2

Was any body injured in the Accident?
Was any injured conveyed to hospital by

ambulance?

NO

NO

Was any other material or property damaged? YES I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

NO

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

Refer to attached 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 SJU7351L

Vehicle Make/Model/Colour SUBARU LEGACY

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver VIVIAN KOH PEI YING

NRIC/Passport Number S8418503E Contact Number 92982840

Address Postcode

Insurance Company Name FWD SINGAPORE PTE. LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.

Policyholder's Signature

Date & Time:

Driver's Signature
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan Pg. 2

SKETCH PLAN

Opper

Ramp

A-SET US

CAR PARIS

ORIVE WM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLOSINDE CINCOLIO INTERCEDENT		
While I was moving slowly out of the parking lot, a car jumped in front of me from a slip car ramp. I did not have time to react. Hence the front of the car crashed into the other car.		
front of me from a slip car ramp. I did not have time to react. Hence		
the front of the car crashed into the other car.		

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

.:

GIARMC SketchPlanForm_V3



CERTIFICATE OF INSURANCE

NISSAN AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : Wong Ming Wol. Clok

Period of Insurance

1 27 Oct 2 17 / Tu 28 Oct 2018 : HR12289379E

Engine No. Chassis No.

1 UNITED 12/20890608

Welniche No.

2-51,741,103 1700071879

Polley No.

Endersement No. Issued Date:

3, 14 Skey 2017

ABOUT THE COVER

Make/Model

INJUSTALINOTE 1.2 (SUPERCHARGED/NON-SUPERCHARGED)

Engine Capacity* consign = 1,136,001.00.

Sum Invaried : Market Value

First Year of Fing smaller

Direct Restriction

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Off Peak Carrist No.

Insuring with COE/PARE - Yes

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Section 8

Property Disease: 53.

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Named Driver and Expess (when applicable)

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APPROVED REPORTING CENTRESIAUTHORISED REPAIRERS (LCR CLAIMS RELATED REPAIRS)

FOR A CHOOSE AND REAL MADE OF YORK PARTS OF BOARD \$250.00 C.

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IMPORTANT NOTES

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Underwritten by ARA Asia Pacific Insurance Pos. Ltd.

AIG Axia Pacific Insurance Ptc. Ltc. A JUNEAU REPRESENTATIVE

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All this the selections will be attained























