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

Date Of Report 28/02/2018 13:05

Date Of Accident 28/02/2018 09:00

Exact Location Of Accident BEFORE KPE TUNNEL

Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLW2448R

Insured/Policyholder

Name Of Registered Owner TAN WEI NIAN
NRIC No S8849279Z
Email Address NOEMAIL

Mobile Phone No (LOCAL) +65-98246532

Alternative Phone No Others-98246532

Vehicle Particulars

Manufacturer AUDI

Model A3 SEDAN 1.0 TFSI 8V

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE USE

Are you claiming under your own insurance policy

for repair to your vehicle?

YES

If No, Please state action to be taken

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 1800008874

Cover Note Number

Driver

Name of Driver TAN WEI NIAN
NRIC No S8849279Z
Date Of Birth 09/12/1988
Occupation INDOOR
Date Of Driving Pass 10/12/2008

Driving Experience 9 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98246532

Fax Number

Contact Number OTHERS-98246532

EMail Address NOEMAIL

Address 7 SENGKANG EAST AVENUE

#02-24

Postcode 544741

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 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

Was any body injured in the Accident?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

WAS DRIVING ALONG BUANGKOK DRIVE BEFORE PASSING THE ERP GANTRY AND BEFORE ENTERING THE KPE TUNNEL. HAD A VERY SAFE DISTANCE FROM A BLUE TOYOTA IN FRONT. THE BLUE TOYOTA THEN SUDDENLY BRAKE AND SO I BRAKED AS WELL, COMING TO A STOP. HOWEVER, THE RED CAR BEHIND CRASHED INTO MY CAR FROM BEHIND AND MY CAR WENT FORWARD DUE TO THE IMPACT FROM BEHIND AND MY CAR HIT THE CAR IN FRONT AS A RESULT. UPON EXITING THE CAR, SAW THAT IT WAS A CHAIN COLLISION COMPRISING OF 7 - 8 CARS. I HAVE FRONT AND BRAKE IN CAR CAMERA FOOTAGE AS WELL AS PHOTOS OF THE ACCIDENT. CAR BEHIND ME - SKZ3393D (MITSUBISHI RED) CAR IN FRONT OF ME - SJZ3731Z (TOYOTA ALTIS)

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKZ3393D

Vehicle Make/Model/Colour MITSUBISHI / RED

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJZ3731Z TOYOTA ALTIS

Details Of Properties

Vehicle Category

Vehicle Make/Model/Colour

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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.
- 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 liability.
- 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.
- 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.
- 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:
 - 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

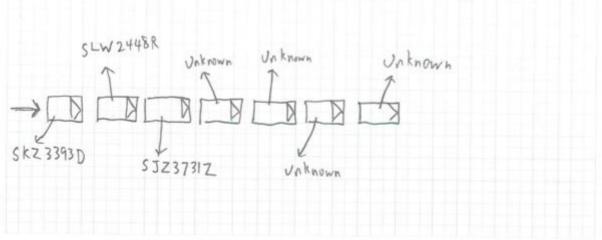
(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time: 1811 18

12-30 PM

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Name: Tony Formy NRIC/FIN No : G2040 197X



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

was driving along Buangkok drive before passing the ERP gautry and before
entering the KPE thinnel. Had a very safe differe from a bine toyota
in front. The blue toyota then suddenly braked and so I braked as
Well , conving to a Hop. However, the red car herned me crashed
into my car from period and my car went forward due to the
impact from behind and my car but the car in front as a
rosult.
Uxon exiting the lar, caw that it was a chain collision compting
of \$ 7-8 cars. I have front and back in car lamera
too tage as well as photos of the accident.
car revived me - SKZ 3393 D (MITTUBISHI PED)
(av in front of me - SJZ 3731 Z (TOVOTA ALTIS)

DECLARATION

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

Policyholder's Signature

Date & Time: 28 (2/17 12 3024) (If driver is not the policyholder)

Driver's Signature

Date & Time:

Reporting Centre Personnel's Signature Name: Tony Foory NRIC/FIN No.: G2040 197X

















Accident Photo



















Accident Photo





ACCIDENT SCENE PHOTOS







ACCIDENT SCENE PHOTOS

