

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	18/07/2018 15:28
Date Of Accident	01/04/2018 11:00
Exact Location Of Accident	MANDAI COLUMBARIUM CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK8898Z
Insured/Policyholder	
Name Of Registered Owner	SIM LENG KUAN
NRIC No	S1800548D
Email Address	DISCOVER_1002@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97908855
Alternative Phone No	Office-97908855

Vehicle Particulars

Manufacturer	JAGUAR
Model	XF 2.2 DIESEL PREMIUM LUXURY
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	2100288318-06
Cover Note Number	

Driver

Name of Driver	SIM LENG KUAN
NRIC No	S1800548D
Date Of Birth	19/06/1967
Occupation	INDOOR
Date Of Driving Pass	11/12/1992

Driving Experience	25 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97908855
Fax Number	
Contact Number	OFFICE-97908855
EMail Address	DISCOVER_1002@YAHOO.COM.SG
Address	348 ANG MO KIO AVENUE 3 #09-2092 SINGAPORE
Postcode	560348
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	NO
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

#carpark, Moving in/ out of parking lot & Going straight, Blue Car SLK8898Z, White Car SHAXXXX. As usual the Columbarium was packed with people and cars due to Ching Ming. There was a long queue of car behind mine. I waited for the moving car to vacate the parking lot I was waiting for (fortunately it was right in front of my car) with my signal indicator activated that I was next in line to take this lot. Once the lot was vacant. I moved my car forward to give me an angle to do a reverse back in into the lot. The apparently impatient vehicle (taxi) behind my car moved his vehicle forward and hit the back of my car. Taxi driver and myself came out of our vehicle and had an altercation in the chaos and other impatient cars horned that we were jamming the traffic/blocking their path. I had to quickly get into my car and complete my parking thinking I could continue our unfinished business after we parked and not hold the traffic up. Unfortunately the taxi driver did not come back to me after waiting for him at the accident location for 10-15 mins. Fortunately, the columbarium security guard saw the whole incident and he was kind enough to wait with me for the taxi driver to come back. When the taxi driver did not appear. Mr. Security Guard gave me his mobile number to be my witness if the needs arise. The next day, 2nd April 2018 I did the norm which was to file a police report on this incident. Please see my Notice of Compliance attached. I was upset initially thinking the taxi driver did a hit and run on me and I didn't get his vehicle number or driver's license. I decided not to think too much of it because there was no damage to my car no dent or scratch. Most importantly no bodily damage to me or the taxi driver. No pictures were taken because there was nothing to show of any damages. I did not even think I need to file this insurance report because there isn't any damages to claim.

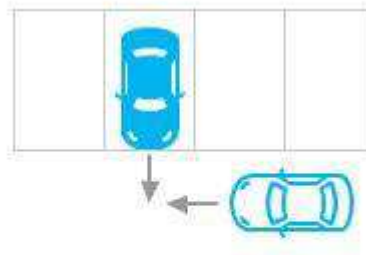
Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	DUM0000Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan



Insd's Nric (Front)



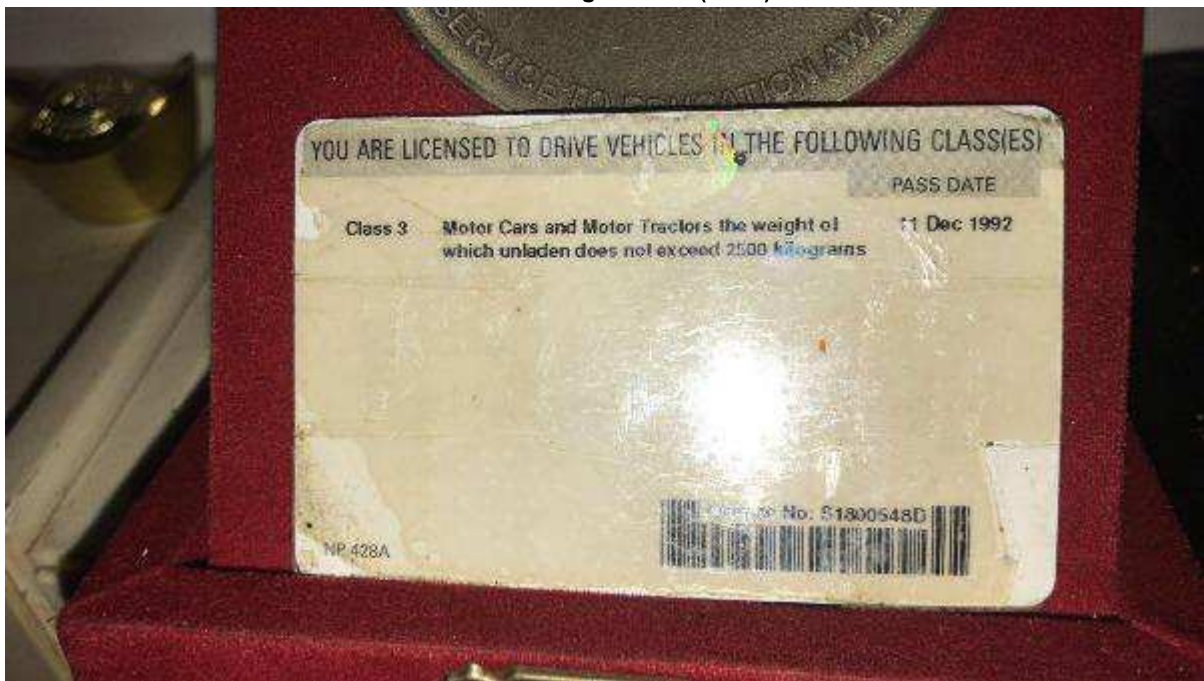
Insd's Nric (Back)



Insd's Driving License (Front)



Insd's Driving License (Back)



Additional Docs

CONFIDENTIAL

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Report of an Accident

On or about the 17th day of April, 1962,
at 1111 1/2th Street, San Francisco, California,
where a vehicle of the type is being investigated
which involved a ...
on 4/17/62 at 11:00 AM, subject having the following vehicle
number:

1. Vehicle was reported to the Police within 24 hours of the accident.
That vehicle has complied with the rules of the State Traffic Act, Cap 216.

Signature of issuing officer: [Signature]

Date: 4/17/62 Time: 11:00 AM

4/17/62

Police Postcard, San Francisco, Calif.

Original - to be placed in folder
Duplicate - to be submitted to Traffic Bureau

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Printed on 4/17/62

[Signature]

[Signature]

San Francisco Police Dept.
415 Montgomery Street
Room 1000
San Francisco, Calif.