

## 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	16/04/2018 13:18
Date Of Accident	15/04/2018 14:50
Exact Location Of Accident	PIE TOWARDS EUNOS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLB9461R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN HUI KOON
NRIC No	S8417037B
Email Address	PEARLYNTANHUIKOON@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98265515
Alternative Phone No	Others-98265515

<b>Vehicle Particulars</b>	
Manufacturer	MAZDA
Model	MAZDA 3
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

<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100462844-01000
Cover Note Number	

<b>Driver</b>	
Name of Driver	CHEN XIANGSHENG, ROY
NRIC No	S8913459E
Date Of Birth	20/04/1989
Occupation	INDOOR
Date Of Driving Pass	09/07/2008
Driving Experience	9 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-91280290
Fax Number	
Contact Number	
E-Mail Address	SUPERDUPERROY@HOTMAIL.COM
Address	BLK 40 WOODLANDS DRIVE 16 #10-40
Postcode	737774
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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 TO REAR
Weather Conditions	RAINING
Road Surface	WET

#### 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)	3
Passenger 1	Name: : PAN YONGYU Gender: : Male
Passenger 2	Name: : NG YUE YI DORIS Gender: : Female

#### 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

REFER TO SKETCH PLAN & STATEMENT

#### 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 Witness 1

Name	PAN YONGYU
Phone Number	98750934
Email Address	

Details of Witness 2

Name NG YUE YI DORIS  
Phone Number 96164839  
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLW3494A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver ONG JIA WEI MELVIN  
NRIC/Passport Number S9315910A  
Contact Number 96285521  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 2

## Sketch Plan



### SKETCH PLAN

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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

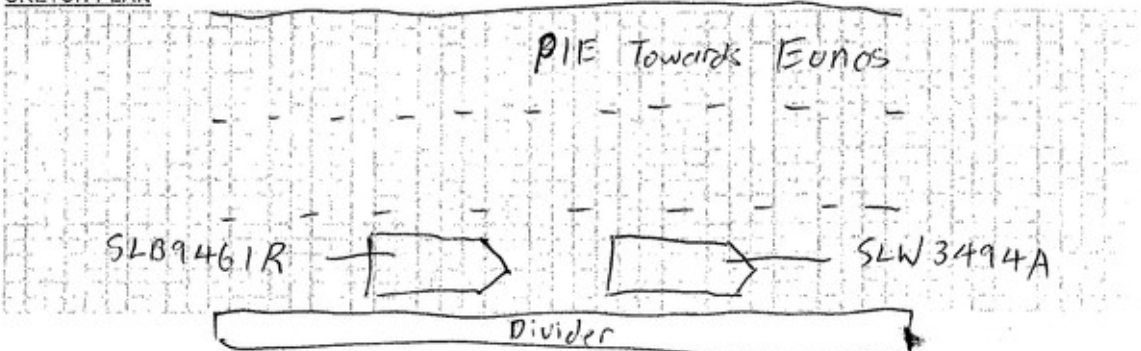
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such personal information to all insurer(s) who have insured vehicle(s) involving 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' lawyer/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' lawyer/law firm, 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/are disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyer/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policy holder) / Date & Time Witnessed by Reporting Centre Personant Time

#### SKETCH PLAN





## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15<sup>th</sup> April 2018 at around 2.49 pm I was driving my vehicle SLB9461R along PIE towards Eunos near Lamp post 437/36A. I was driving along the first lane when suddenly the vehicle SLW3494 suddenly jammed brake in front of my vehicle which resulted in my vehicle colliding into the rear portion of SLW3494A.

## Declaration

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

16/4/2018 11am  
16/4/2018 11am  
D April 16, '18

Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policy holder) / Date & Time Witnessed by Reporting Centre Personnel

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

