

## 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	23/04/2018 13:21
Date Of Accident	22/04/2018 07:50
Exact Location Of Accident	TAMPINES AVE 2 STREET 11
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLT1174C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN HANG KOK
NRIC No	S1301183D
Email Address	AGNESMH0909@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97826568
Alternative Phone No	Others-97826568
<b>Vehicle Particulars</b>	
Manufacturer	MERCEDES-BENZ
Model	BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE
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
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700064914
Cover Note Number	
<b>Driver</b>	
Name of Driver	AGNES SIM MONG HOON
NRIC No	S1193300I
Date Of Birth	08/12/1956
Occupation	INDOOR
Date Of Driving Pass	05/07/2004
Driving Experience	13 YEARS AND 9 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96650483
Fax Number	
Contact Number	
E-Mail Address	AGNESMH0909@GMAIL.COM
Address	13 MARIAM WAY
Postcode	508538
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PARKED VEHICLE
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

Collided into Parked Vehicle, #carpark, Moving forward or reversing into parking lot & Parked, Blue Car SLP8433E, White Car SLT1174C "reversing into car park slot and bump into the car behind. Damage to both cars very superficial but the other owner opted to report the accident."

#### 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

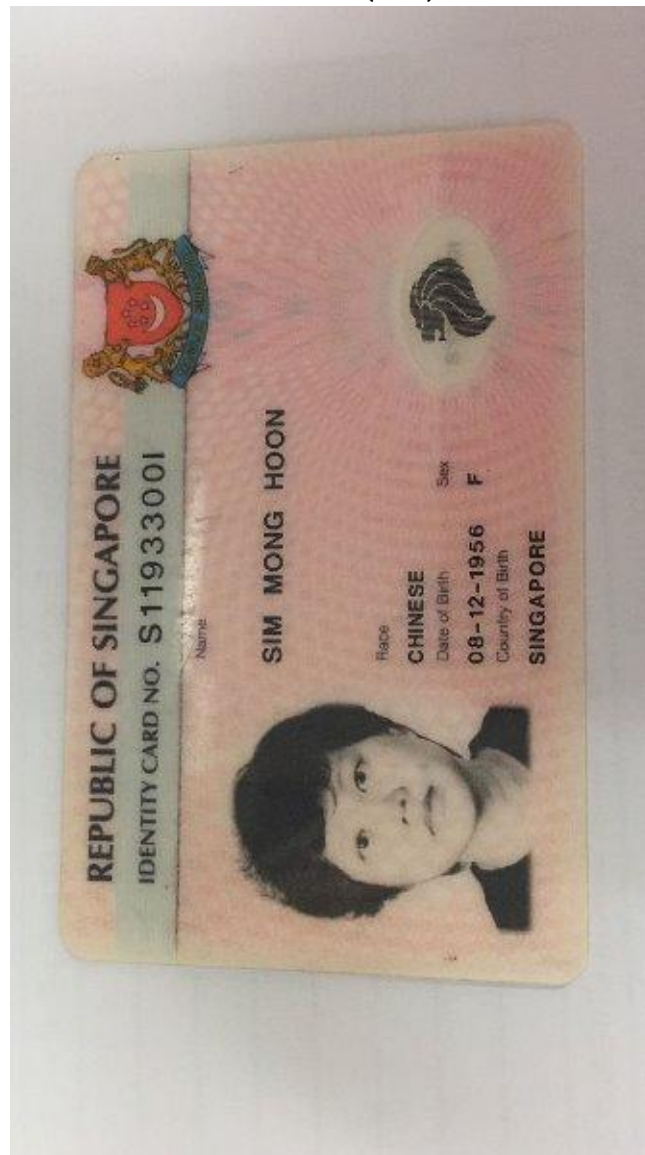
Vehicle Registration Number	SLP8433E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	

Contact Number	98423633
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

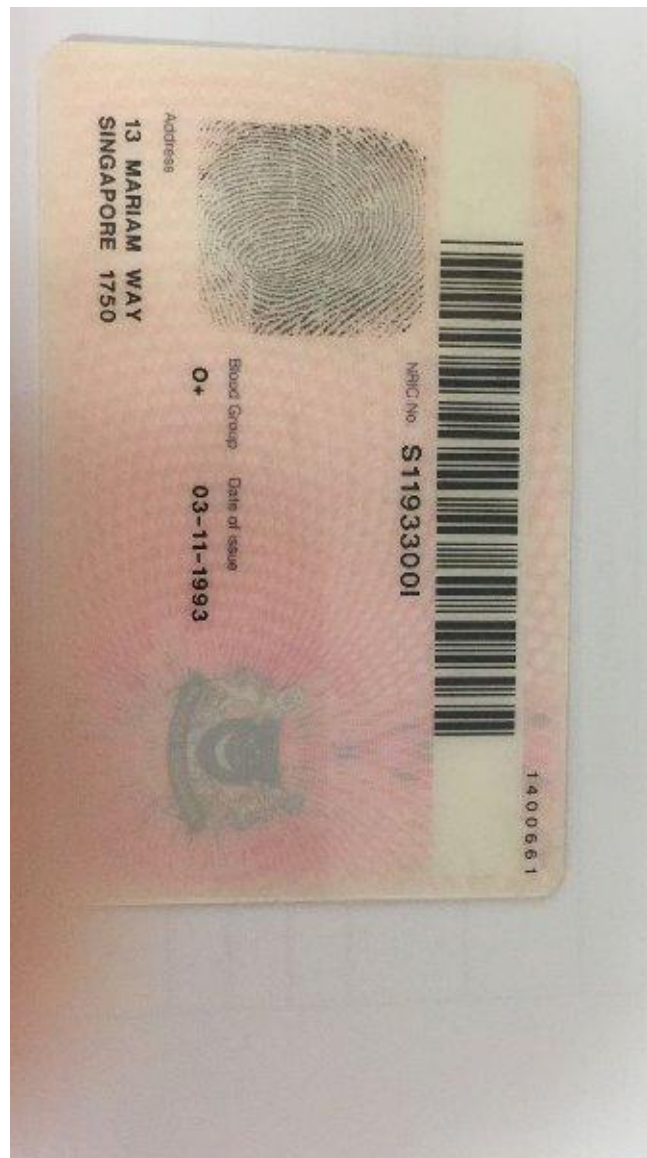
Sketch Plan



Driver's Nric (Front)



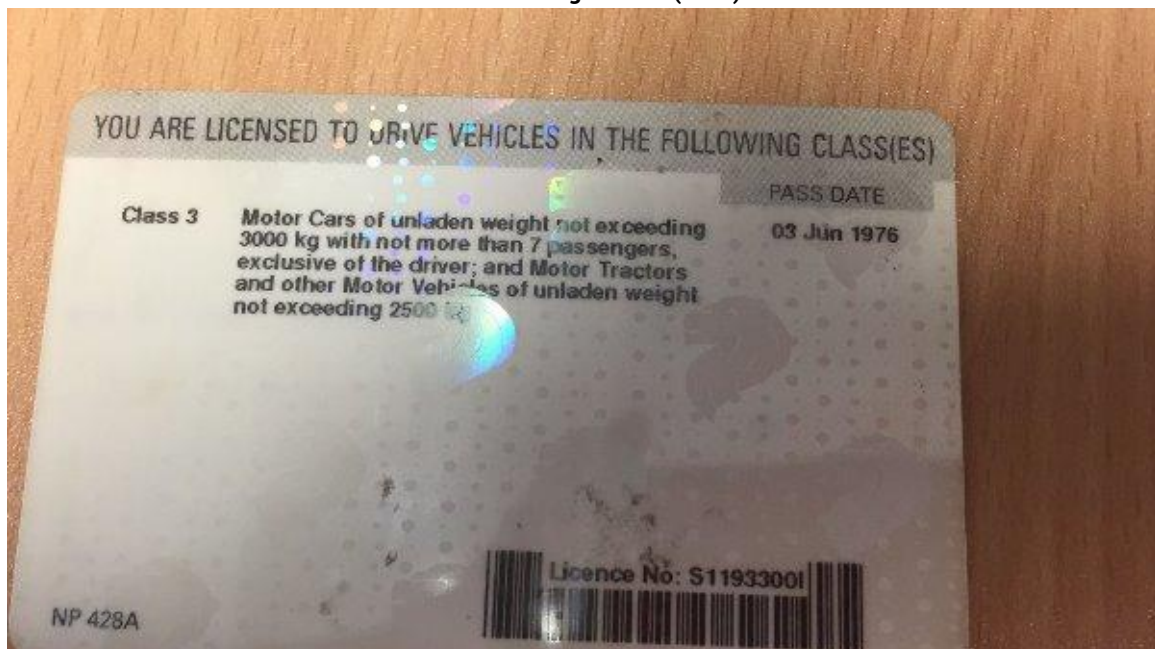
Driver's Nric (Back)



Driver's Driving License (Front)



Driver's Driving License (Back)





Accident Photo



Accident Photo





Accident Photo



Accident Photo

