

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	27/04/2018 00:38
Date Of Accident	26/04/2018 21:35
Exact Location Of Accident	PIE NEAR EXIT TO AMK. IN THE DIRECTION TOWARDS TUA
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDB10M
Insured/Policyholder	
Name Of Registered Owner	NG BOON CHING
NRIC No	S1191428D
Email Address	DRBCNG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-99999999
Alternative Phone No	Others-96151515

Vehicle Particulars

Manufacturer	JAGUAR
Model	XJ63.0
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	2100154147-08
Cover Note Number	

Driver

Name of Driver	NG BOON CHING
NRIC No	S1191428D
Date Of Birth	07/10/1956
Occupation	INDOOR
Date Of Driving Pass	04/04/2013
Driving Experience	5 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-99999999
Fax Number	
Contact Number	
EMail Address	DRBCNG@GMAIL.COM
Address	72 SUNRISE DRIVE SINGAPORE
Postcode	806575
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 TO REAR
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?	
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

Collision - Head to Rear (I hit a third party vehicle), #straightroad, Moving straight & Moving straight, Blue Car SDB10M, White Car SHD7199Z, SHD 7199Z was travelling along PIE in the lane to enter Exit to AMK. Suddenly the taxi SHD7199Z stopped. I applied emergency brake but could not stop in time. My vehicle front bumper hit the taxi rear bumper. My vehicle speed at time of accident was 45km/h as shown in the video. Time of accident according to video recording is 2143hours April 26, 2018. The driver and 3 passengers alighted and inspected the damage to both vehicles. Driver SHD7199Z and I exchange Identity Cards details for the purpose of reporting the accident to insurance company. We agree and drive off from place of accident.

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

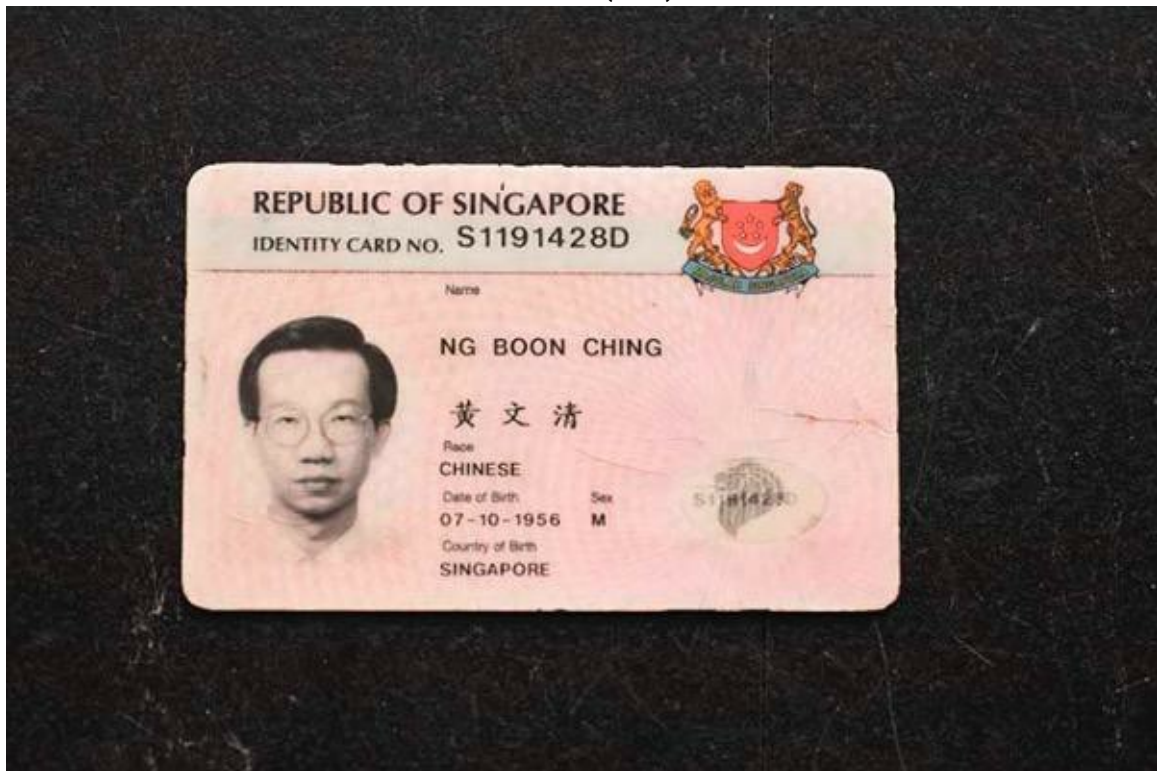
Vehicle Registration Number	SHD7199Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI

Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan



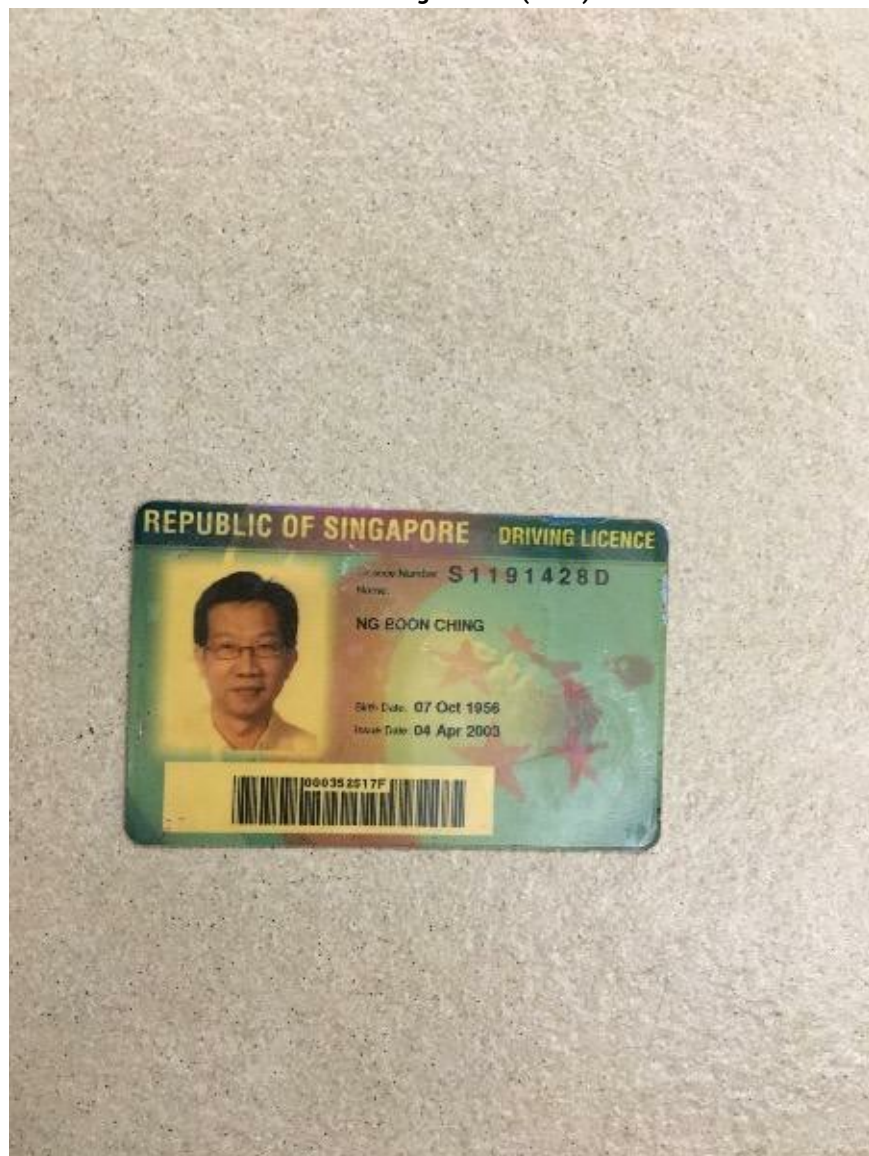
Insd's Nric (Front)



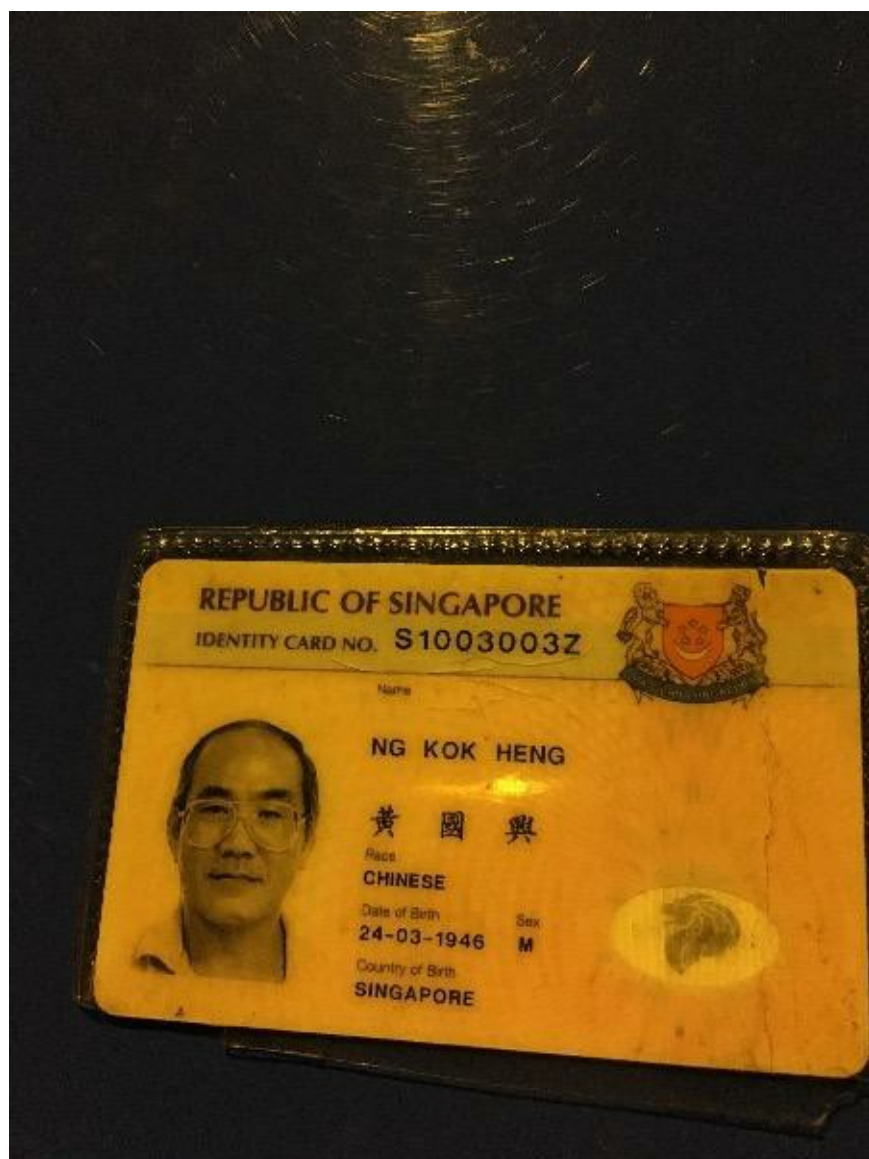
Insd's Nric (Back)



Insd's Driving License (Front)



Insd's Driving License (Back)



TP Nric (Back)

3105787



NRC No S1003003Z



Racial Group Date of issue
O+ 04-11-1999

ADDRESS

APT BLK 228 SERANGOON AVENUE 4
#06-49
SINGAPORE 550228

Accident Photo



Accident Photo



Accident Photo



Accident Photo

