

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 14:10
Date Of Accident	26/04/2018 19:30
Exact Location Of Accident	PIE TOWARDS TUAS BEFORE EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK3900H
Insured/Policyholder	
Name Of Registered Owner	LOO ZHONGYI JAVIER
NRIC No	S8432651H
Email Address	J_ZHONGYI@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-96359353
Alternative Phone No	Others-96359353

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 2
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	2100498097-01
Cover Note Number	

Driver

Name of Driver	LOO ZHONGYI JAVIER
NRIC No	S8432651H
Date Of Birth	10/10/1984
Occupation	INDOOR
Date Of Driving Pass	26/04/2004
Driving Experience	14 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96359353
Fax Number	
Contact Number	OTHERS-96359353
E-Mail Address	J_ZHONGYI@YAHOO.COM.SG
Address	21 TAMPINES STREET 86 #04-03
Postcode	528592
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	FAIR
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?	
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: : RINU WATI Gender: : Female
Passenger 2	Name: : LOO XINYI CHLOE 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 SKETCH PLAN & STATEMENT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKB3931C
Vehicle Make/Model/Colour	MITSUBISHI
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	WEE HOCK
NRIC/Passport Number	S8325935C
Contact Number	96738790
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJU6920B
Vehicle Make/Model/Colour	TOYOTA PINIC
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PETER TAN
NRIC/Passport Number	S1641224D
Contact Number	96150576
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLK4936Z
Vehicle Make/Model/Colour	NISSAN GTR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ZHENG TONGLI
NRIC/Passport Number	S8327894C
Contact Number	92979197
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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.

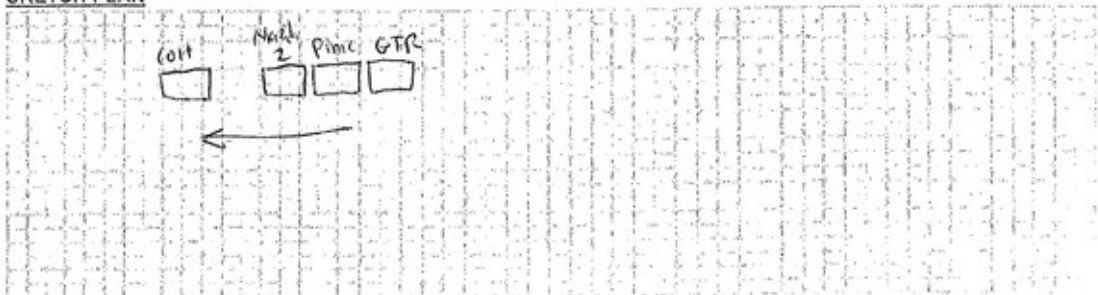
(collectively the "Purposes")

(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/can be 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.

Loo Zhongyi Jane 27/4/18 0940 W APRIL 27, '18
Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policy holder) / Date & Time Witnessed by Reporting Centre Personnel Time

SKETCH PLAN





DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling on PLE towards T495. Just before Eunos exit, I saw braking from the front car. Immediately I myself started to brake and I realise the front car is like coming to a stop and I press the brake harder to emergency brake.

I manage to stop in time but the car behind me bang onto my bumper and causes me to hit the front car. My wife and daughter was with me at the time of accident.

Wife - Rina Witti (Female)

Daughter - Lou xinyi child (Female)

Declaration

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

27/4/18 0930

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

APML 27, '18

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

