

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	13/06/2018 12:51
Date Of Accident	12/06/2018 21:45
Exact Location Of Accident	HILTON GARDEN INN MSCP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC4682Y
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66944919

Vehicle Particulars

Manufacturer	TOYOTA
Model	SIENTA
Exact Purpose for which vehicle was being used at time of accident	HIRER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995076
Cover Note Number	

Driver

Name of Driver	ALBERT LEE SOON CHYE
NRIC No	S1468073Z
Date Of Birth	14/04/1961
Occupation	OUTDOOR
Date Of Driving Pass	30/10/1984
Driving Experience	33 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90106639
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	44 BENOI ROAD BLOCK B (ENTTRANCE B) ENTRANCE 6 BENOI SECTOR
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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

PLEASE REFER TO PHOTOS ATTACHED, THANK YOU.

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	SLR5536B
Vehicle Make/Model/Colour	
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan Pg. 1

SKETCH PLAN



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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) involved 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' lawyers/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' lawyers/law firms, 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

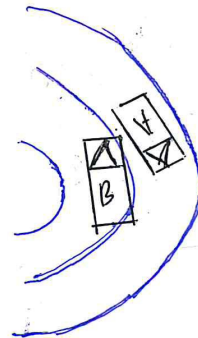


Name: **ABRA RAHMAN**

HILTON GARDEN HILL INN NSCP

SKETCH PLAN

- Ⓐ SLG46824
Ⓑ SLR5536B



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While I was going up the NSCP suddenly I felt an impact coming from the right of my car. I realise vehicle B has collided into my right passenger door and cause the damage.

DECLARATION

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

Policyholder's Signature
Date & Time:



Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

RAHMAN

IDENTIFICATION CARD, DRIVING LICENCE & VOCATIONAL LICENCE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S1468073Z**

Name: **ALBERT LEE SOON CHYE**

Birth Date: **14 Apr 1961**

Issue Date: **01 Sep 2016**

002605190E

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1468073Z

Name: **ALBERT LEE SOON CHYE**

Race: **CHINESE**

Date of birth: **14-04-1961**

Sex: **M**

Country/Place of birth: **SINGAPORE**

VMG USE ONLY

Land Transport Authority

VOCATIONAL LICENCE

Licence No: **S1468073Z**

Name: **ALBERT LEE SOON CHYE**

Card Issue Date: **16/03/2018**

Please visit www.lta.gov.sg to check the status of this vocational licence

VMG USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	EFFECTIVE DATE
Class 2B	Motorcycles <= 200 cc	09 Sep 1985
Class 2A	Motorcycles between 201 cc and 400 cc	09 Sep 1985
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	30 Oct 1984
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	13 Nov 1990

Licence No: **S1468073Z**

NP 425A

5642709

NRC No. S1468073Z

Date of issue: **31-08-2018**

Address: **APT BLK 63 CIRCUIT ROAD #10-287 SINGAPORE 370063**

VMG USE ONLY

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	16/03/2018
03	BUS VL	18/12/1990

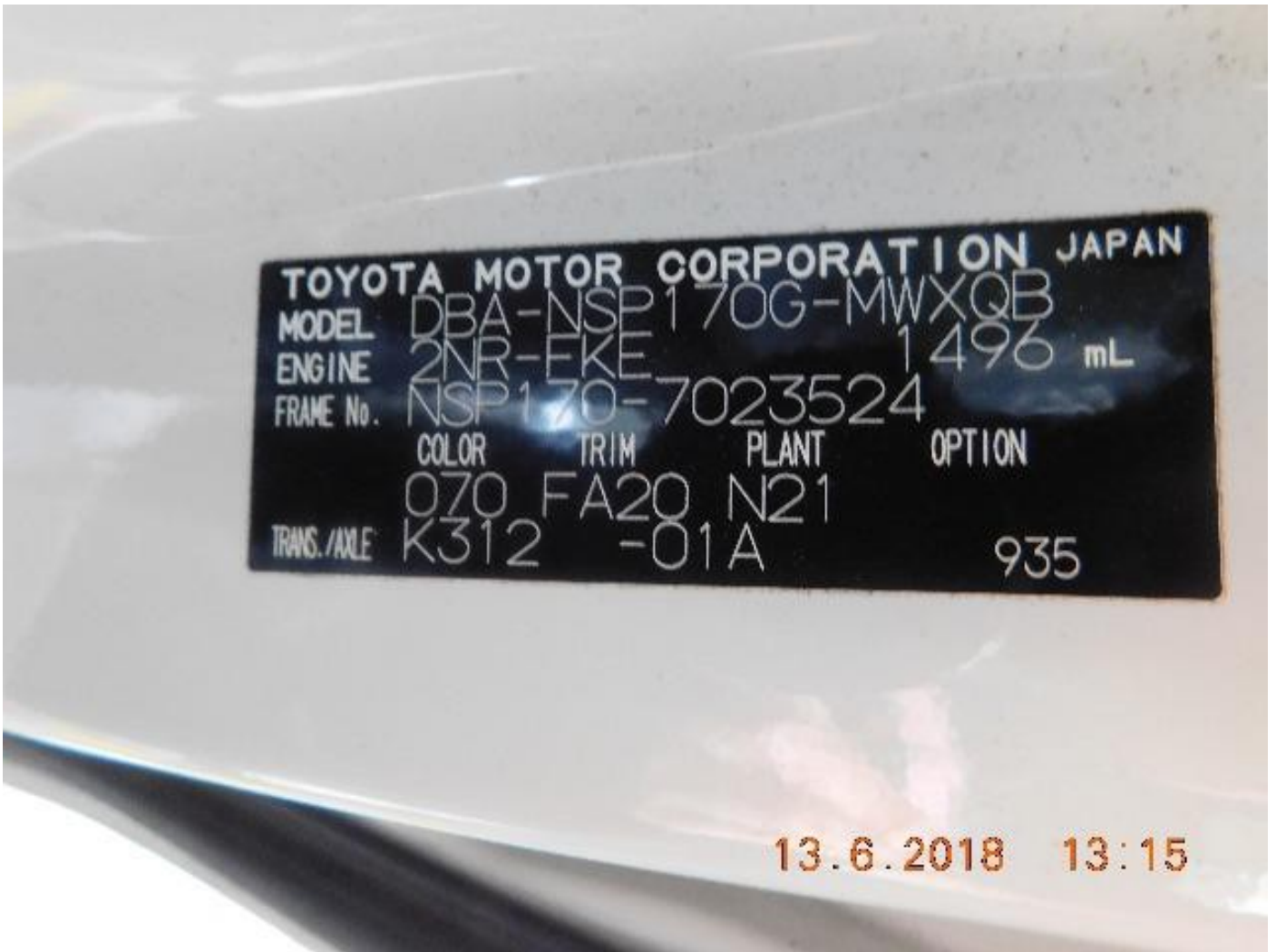
Accident Photo



Accident Photo




Accident Photo




Accident Photo






EMPLOYMENT PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore


Employer
AUDI SINGAPORE PTE. LTD.

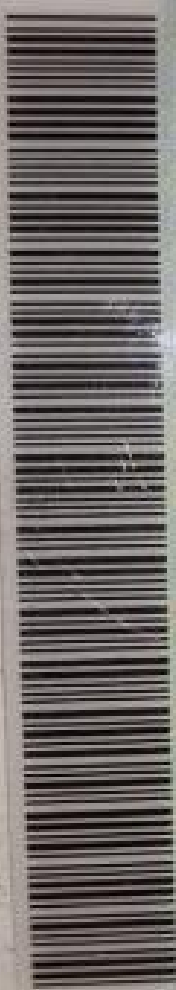


Name
MEYFARTH GEB GIBHARDT KAI HEINZ

FIN
G3451850K







K0236838

VISIT PASS
Immigration Regulations

01-04-2019

Name
MEYFARTH GEB GIBHARDT KAI HEINZ

FIN
G3451850K

Date of Birth
11-06-1969

Sex
M

Nationality
GERMAN

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU

Download SGWorkPass App to check status



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

