

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 | 16/06/2018 23:22 |
| Date Of Accident | 16/06/2018 18:20 |
| Exact Location Of Accident | JUNCTION OF NORTH BOUNA VISTA RD AND COMMONWEALTH |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SKV6986U |
| Insured/Policyholder | |
| Name Of Registered Owner | TAY SIONG KAH |
| NRIC No | S1347162B |
| Email Address | IVAN-TAY@HOTMAIL.COM |
| Mobile Phone No | (LOCAL) +65-99999999 |
| Alternative Phone No | Office-91195600 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | LEXUS |
| Model | ES250 |
| 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 | 2100430969-02 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | TAY MING HOE, IVAN |
| NRIC No | S8836856H |
| Date Of Birth | 25/08/1988 |
| Occupation | INDOOR |
| Date Of Driving Pass | 11/12/2008 |
| Driving Experience | 9 YEARS AND 6 MONTHS |

| | |
|---|-------------------------------------|
| Gender | MALE |
| Mobile Number | (LOCAL) +65-91447828 |
| Fax Number | |
| Contact Number | |
| EMail Address | IVAN-TAY@HOTMAIL.COM |
| Address | 97 HOLLAND ROAD, THE ESTORIL #03-02 |
| Postcode | 278541 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | CHILDREN |
| 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. | YES |
| 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), #others, Upload the drawing sketch plan, I was in a lane that allows for turning left and going straight. The junction showed a red light and the yellow comfort delgro taxi was the first car at the junction and I was the second car. Both cars were stationary at the junction. When the light turned green taxi turned left but stopped abruptly as there were pedestrians crossing I had intended to go straight and could not bring the vehicle to stop in time. As a result there was a minor dent to the rear of the taxi. Both parties got out to assess the situation. Taxi driver took some photos did not bother to exchange contact details and decided to drive off.

Attachment(s)

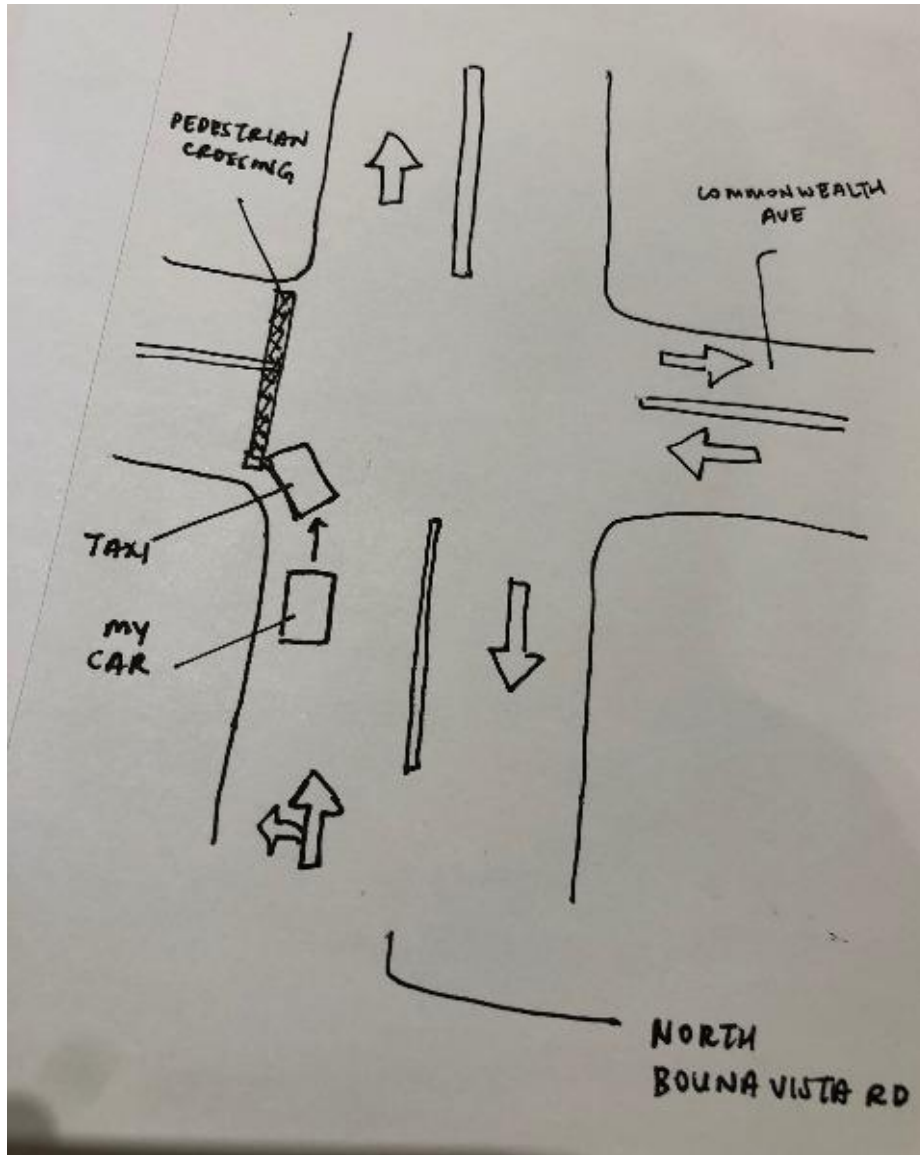
| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

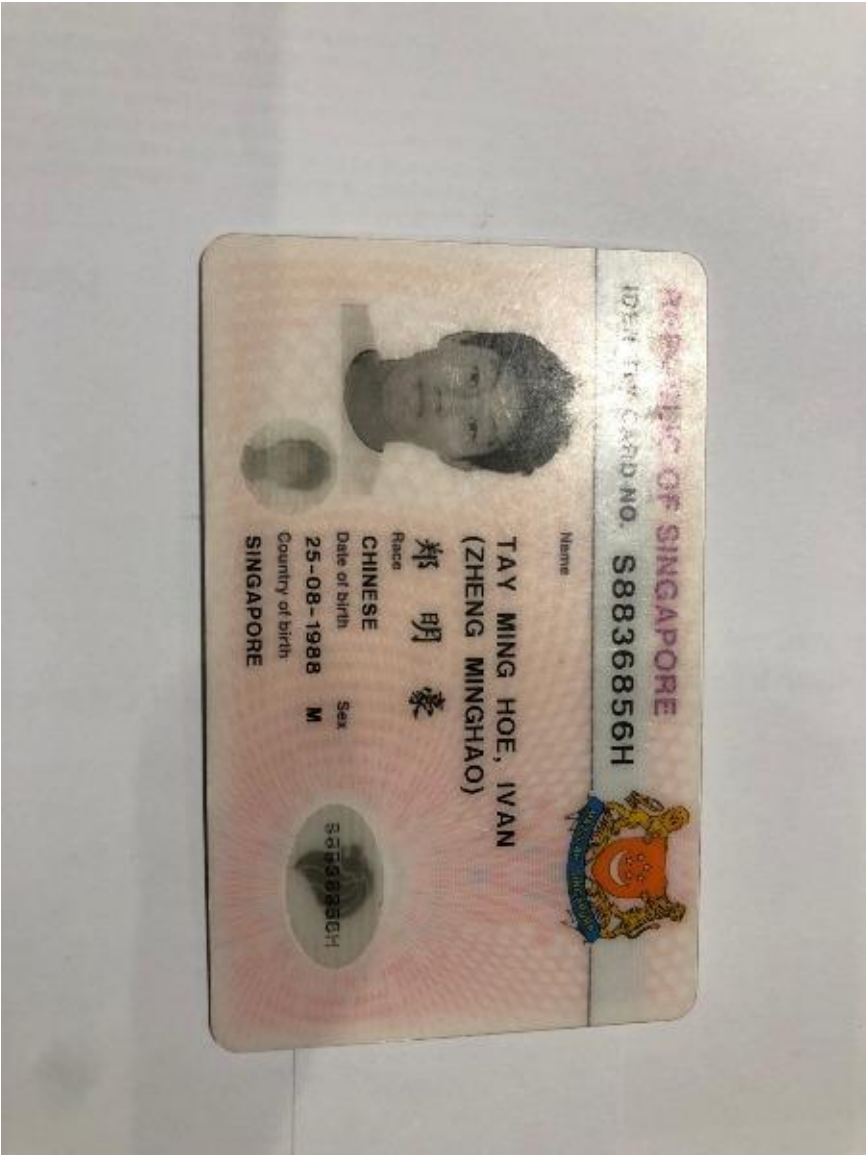
| | |
|-----------------------------|---------|
| Vehicle Registration Number | SHC783M |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |

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)

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

Class 3 Motor Cars =< 3000kg with =<7 passengers, ex clusive of the driver; and other motor vehicles =< 2500kg

PASS DATE

11 Dec 2006

Licence No: S80316576

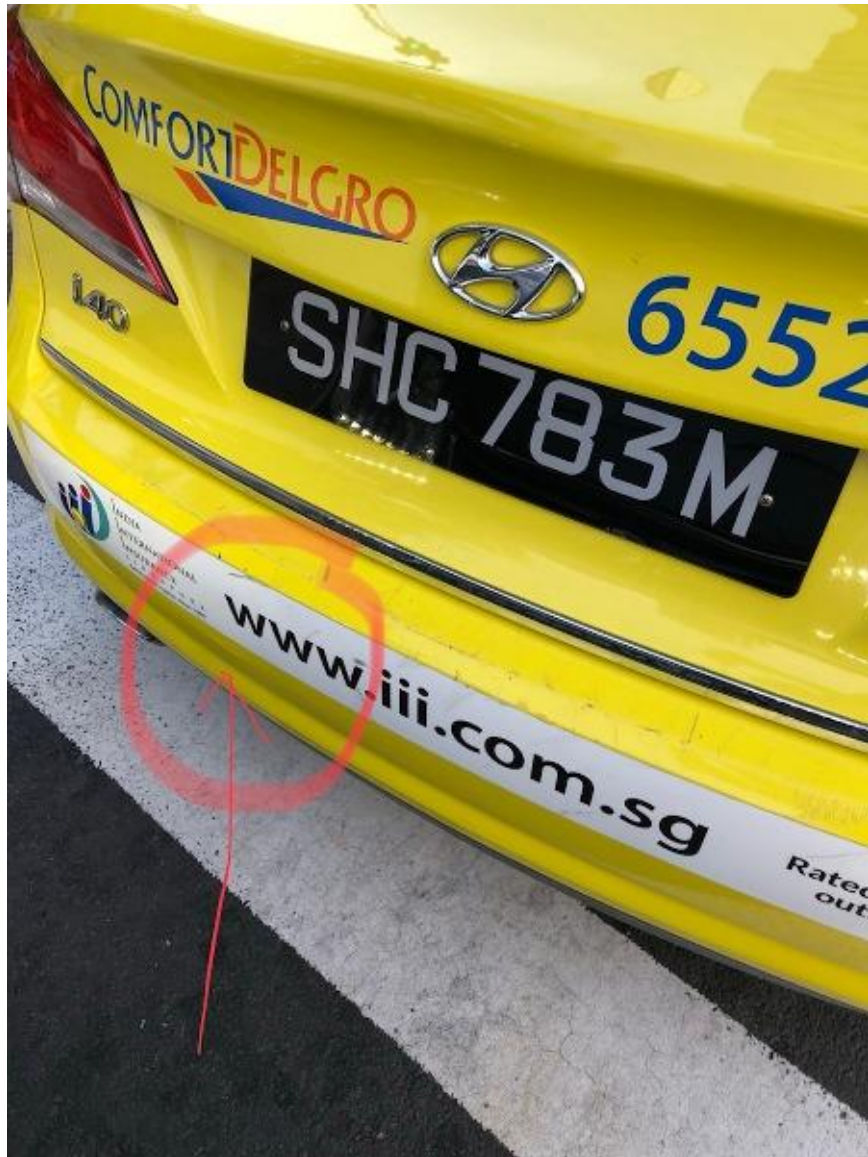


NP 428A

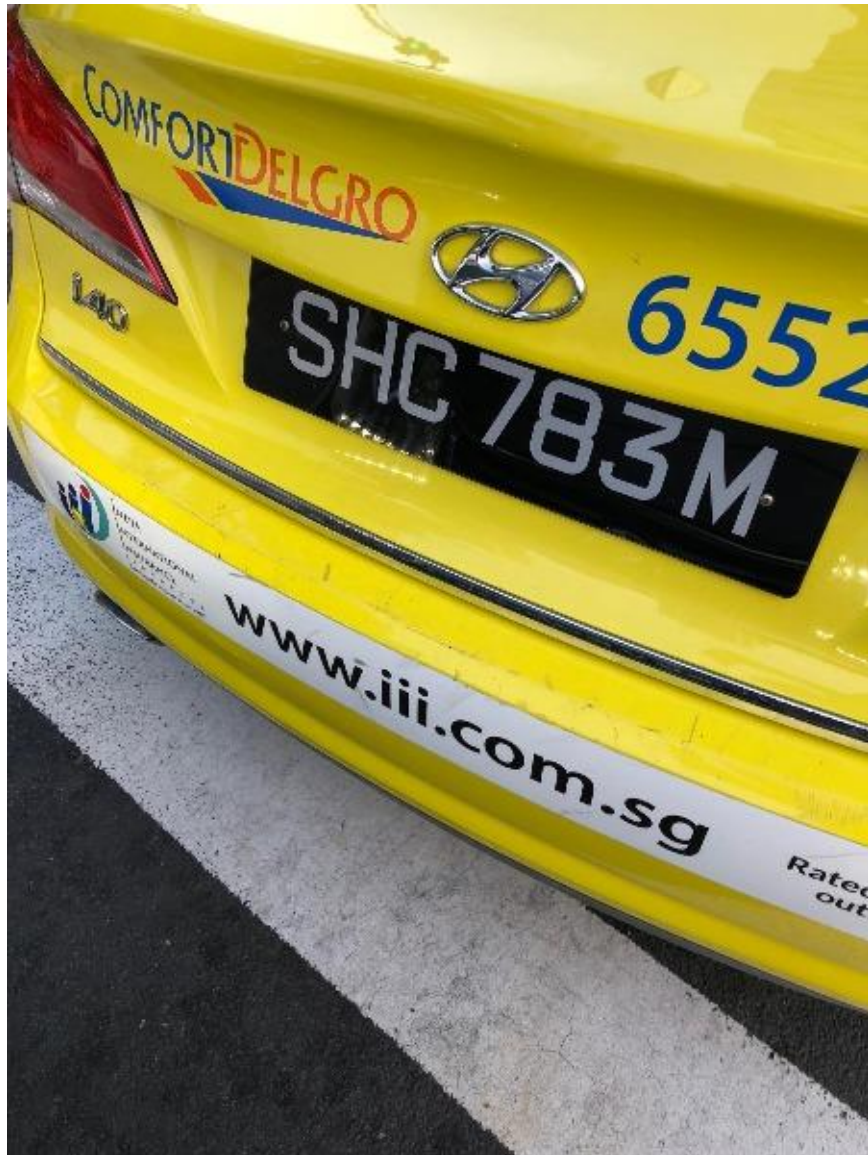
Accident Photo



Accident Photo



Accident Photo



Accident Photo

