SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 witholding 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

	ACCIDENT STATEMENT
Date Of Report	28/06/2018 10:44
Date Of Accident	27/06/2018 18:00
Exact Location Of Accident	UPPER THOMSON ROAD JUNCTION MANDAI ROAD.
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SKP4970J
Insured/Policyholder	
Name Of Registered Owner	TAN AIK KEE KEN STEVEN
NRIC No	S7225628Z
Email Address	ANCHORVALEHOME@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97689870
Alternative Phone No	Office-97689870
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY-1.6 CVT ABS D/AIRBAG 2WD 4DR (A)
Exact Purpose for which vehicle was being used at ime of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
f No, Please state action to be taken	
/ehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Гуре Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100385995-03
Cover Note Number	
Driver	
Name of Driver	TAN AIK KEE KEN STEVEN
NRIC No	S7225628Z

INDOOR

21/12/1995

22 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-97689870

Fax Number

Contact Number OFFICE-97689870

EMail Address ANCHORVALEHOME@HOTMAIL.COM
Address BLK 313B ANCHORVALE ROAD #08-114

Postcode 542313
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 -

Insurance Company of Driver's Own Vehicle -

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR

Weather Conditions CLEAR
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident 2

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 Name: : JONATHAN PEE

Gender: : Male

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?

If Yes, against whom?

NO

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN ATTACH.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

VolksWAGON

Details Of Properties

SALOON CAR

Vehicle Category

PRIVATE CAR

Name of Driver

GOH YEW BOON

NRIC/Passport Number

SI620059Z

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

98781876

Sketch Plan

SKETCH PLAN

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 liability.
- 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. The 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 lodgment 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.
- 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)
 - (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
- (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
- 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.
- 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.

TAN CHONG MOTOR SALES PTE LTD

17 Toa Payoh Lorong 8 Singapore 319254

Tel: 6357 0756 Fax: 6356 4922

olicyholder's Signature

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature 13381888

NRIC/FIN No



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

n / -	11 / 1 2 7 10 11 1 1 1 1 1 1 1
AT Pou	indabout 6pm on 27 Jun 18, at the junction of Monda
Road	and upp- Thomson Rd, a Volkswagen SKH 5343E
hice	driving acress stop line in reasonably feet speed giving me
4),	areas ours style the second of the production
764	impression that he write to dash across the junction.
Whi/	is the alike truttic light was turning amber. But
1:141	a did I know that he changed his what and did an
lin	ergenue brake instand. Howard jammed my bruke it to no avail. I to hit his back. then " speaking to him
hu	It to so will I to hit his back Italian a while to him
1/	to no avail : 1 out the ack them speaking to the
<u> </u>	a applopised to me or he thought there was a red
1),	let camera and didnit want to get caught. The
V	driver was Mr. Goh Yew Boon \$ 16200597. When he
	lid the emergency brake, he was already that half way
a	con the stop line, and I have pletone of his cars
	position as prof.
	1001 (101) 45 proof.

DECLARATION

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

Policyholder's Signature

Date & Time: 28 106/18 0840hrs .

Driver's Signature

(If driver is not the policyholder)

Date & Time:

TAN CHONG MOTOR SALES PTE LTD 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6357 0756 Fax: 6356 4922

Reporting Centre Personnel's Signature
Name: AFFAD 5^
NRIC/FIN Not.: 513381886





Accident Photo









Accident Photo







Accident Photo





