

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	06/07/2018 10:47
Date Of Accident	06/07/2018 06:50
Exact Location Of Accident	PIE TWDS TUAS AT CLEMENTI RD EXIT 26A
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW5337H
Insured/Policyholder	
Name Of Registered Owner	LOW WAI MUNG
NRIC No	S6926397F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97641499
Alternative Phone No	OTHERS-97641499

Vehicle Particulars

Manufacturer	AUDI
Model	TT COUPE 1.8 TFSI S
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?	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	NO
Policy Number	1800015962
Cover Note Number	

Driver

Name of Driver	LEE CHAI YEN
NRIC No	S7323445Z
Date Of Birth	03/07/1973
Occupation	INDOOR
Date Of Driving Pass	25/01/2005
Driving Experience	13 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97641499
Fax Number	
Contact Number	OTHERS-97641499
Email Address	NOEMAIL

Address	23 JALAN RAJAH #08-02
Postcode	329138
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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

I WAS DRIVING AT PIE, THE TAXI INFRONT MAKE AN ILLEGAL EXIT AT CLEMENTI ROAD EXIT 26A FROM RIGHT MOST LANE. I JAMMED BRAKED TO AVOID COLLISION. SJF2150L WAS UNABLE TO STOP IN TIME AND HIT ME FROM BEHIND. DRIVER'S PARTICULAR AS FOLLOWS: MR RAYMOND KOH, S7415950J, INSURER: AIG. WITNESS (INDEPENDENT) PARTICULARS AS FOLLOWS: MR ISWANDI BIN MASDUKI, S7734576J .

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 Witness 1

Name	ISWANDI BIN MASDUKI
Phone Number	98776974
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJF2150L
Vehicle Make/Model/Colour	INENITI / Q50 / SILVER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RAYMOND KOH
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

AIG ASIA PACIFIC INSURANCE PTE. LTD.

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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:

6 Jul '18
9.40 am

GIA/IMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

6 Jul 2018
9.40 am

Reporting Centre Personnel's Signature

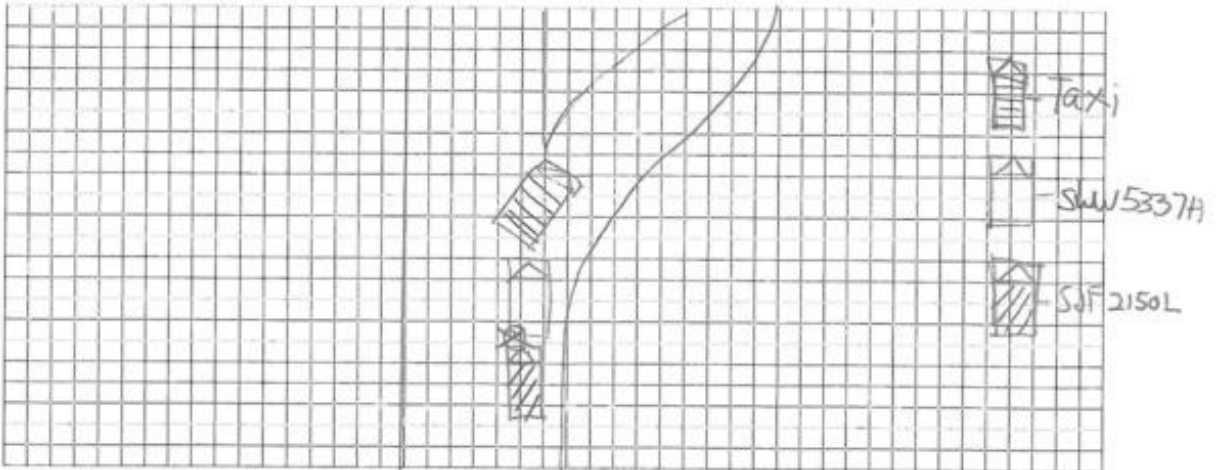
Name: WONG KHAU SENG, George

NRIC/FIN No.:

G258746X

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- I was driving at PIE, the taxi in front make an illegal exit at Clementi Road Exit 26 A from right most lane
- I jam ^{brake} to avoid collision.
- SJF 2150L was unable to stop in time and hit me from behind.
- Driver particulars as follows
 Name: Mr Raymond Koh
 IC: S7415950J
 Insurer: AIG
- Witness (Independent) particulars as follow:
 Name: Mr ~~A~~ Iswandi Bin Masduki
 IC: S7734576J

DECLARATION

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

Policyholder's Signature

Date & Time:

6 Jul '18 / 9.40am

GIARI/C SketchPlanForm V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

6 Jul 2018
9:40 am



Reporting Centre Personnel's Signature

Name: WONG KHOW SEAL, George

NRIC/FIN No.: C798743X 2

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



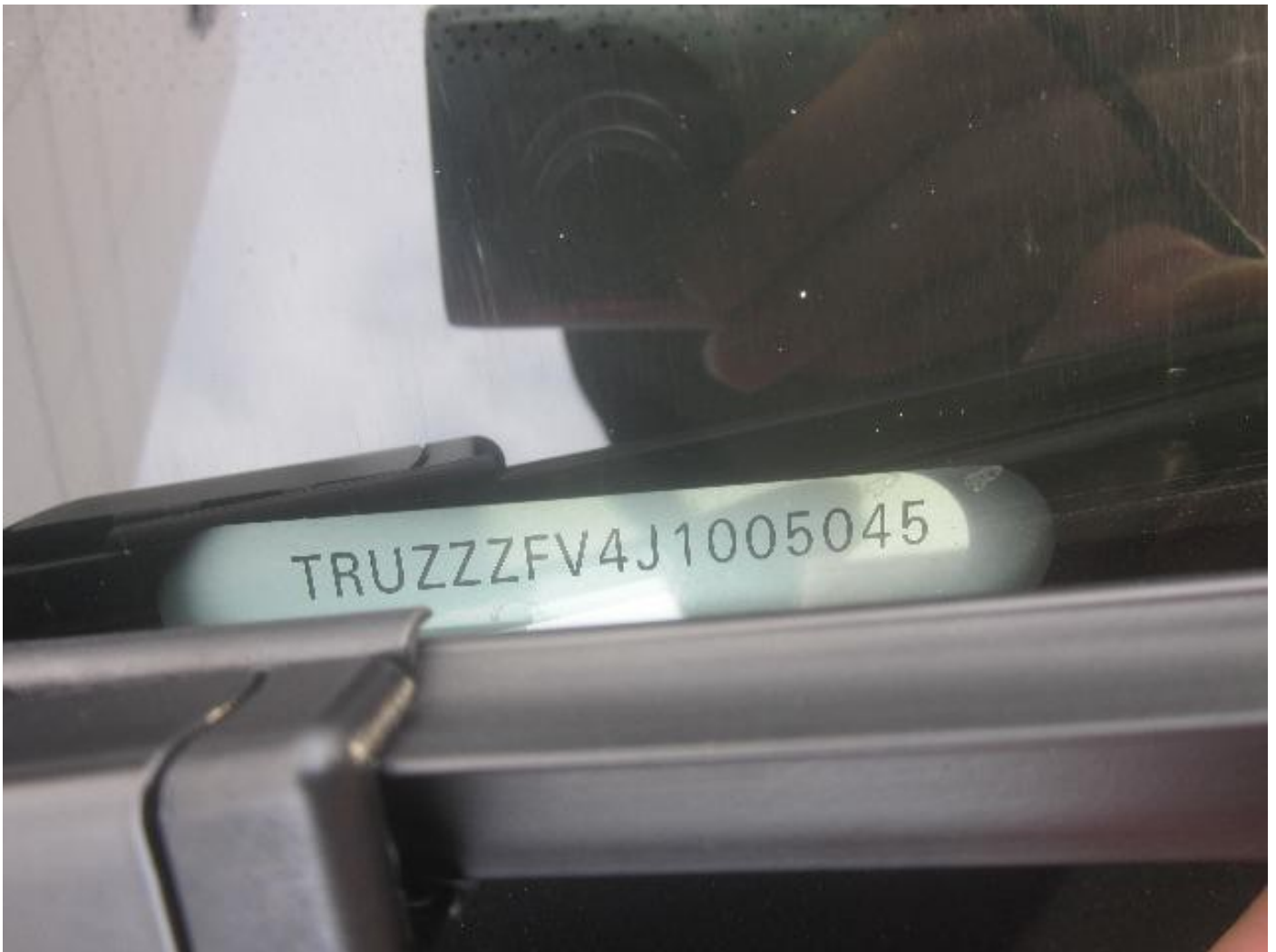
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