

## 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	07/07/2018 10:41
Date Of Accident	06/07/2018 17:10
Exact Location Of Accident	ALONG BEDOK NORTH AVE 3 - IN FRONT BUS STOP 84529
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS4243Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN GUAN HAN
NRIC No	S7030061C
Email Address	GUANHAN.TAN@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93624292
Alternative Phone No	OTHERS-98774422

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 6
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	1700053544
Cover Note Number	

### Driver

Name of Driver	TAN GUAN HAN
NRIC No	S7030061C
Date Of Birth	03/09/1970
Occupation	INDOOR
Date Of Driving Pass	15/11/1993
Driving Experience	24 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93624292
Fax Number	
Contact Number	OTHERS-98774422
Email Address	GUANHAN.TAN@HOTMAIL.COM

Address	BLK 96 BEDOK NORTH AVENUE 4 #20-1501
Postcode	460096
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	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)	2
Passenger 1	
	NAME: : NEW SIO CHWEE
	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 TO 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 Witness 1

Name	DOREEN (TAXI PASSENGER)
Phone Number	98715558
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC461S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	CHONG SHUAI CHEONG
NRIC/Passport Number	S7116969C
Contact Number	88680014
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

SLZ3063U

Vehicle Make/Model/Colour

RENAULT

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

RAVINPAL SINGH KHAIRA

NRIC/Passport Number

S9034835C

Contact Number

97736729

Address

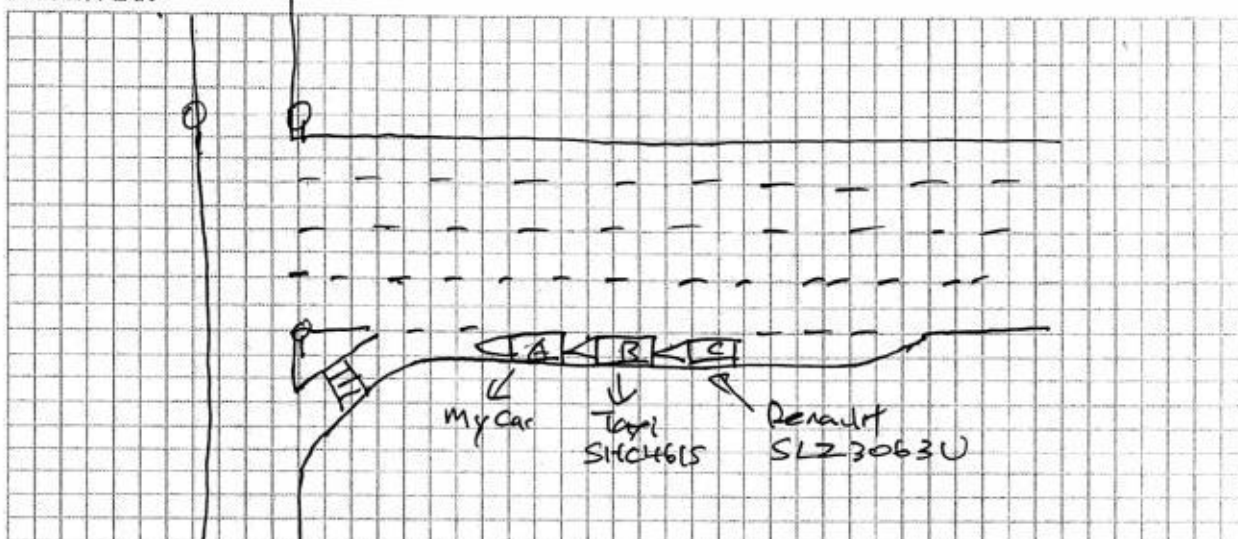
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At around 5:10pm on 6/7/18, I was driving along Bedok North Ave 3. Then while waiting for my turn to turn left before a zebra crossing, my car was stationary and suddenly a taxi with car plate number SHC461S hit me from behind. This happened just happened in front of bus-stop no. 84529. It was a loud bang and my car inches forward a bit and both myself & wife felt a big jerk. Came down & see the damage. Bumper was hit and not sure what other damages. Took down taxi driver & the car behind taxi driver that hit the taxi. Taxi passenger is willing to be my witness

Car A: My Car  
 Car B: Taxi SHC461S  
 Car C: Renault SLZ3063U

## DECLARATION

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

Policyholder's Signature  
 Date & Time: 7/7/18  
 9:40am

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

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

## SKETCH PLAN

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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) 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:

7/7/18  
9:40am

Driver's Signature

(If Driver is not the policyholder)

Date & Time:

7/7/18  
9:40am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: