

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	12/07/2018 15:03
Date Of Accident	11/07/2018 15:30
Exact Location Of Accident	ALONG PIE TWDS TUAS AFT THOMSON FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM7176U
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597k
Email Address	REPORTING@AUTOINSURE.COM.SG
Mobile Phone No	
Alternative Phone No	Office-31572626

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN L SP.6EAT (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995090
Cover Note Number	

Driver

Name of Driver	ONG KWAN BOON , IVAN (WANG GUANGWEN)
NRIC No	S8840952C
Date Of Birth	21/10/1988
Occupation	OUTDOOR
Date Of Driving Pass	19/07/2012
Driving Experience	5 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-87498335
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 339 HOUGANG AVE 7 #12-417
Postcode	530339
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

REFER TO ATTACHMENT

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM1268C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHANG HEW KIEN
NRIC/Passport Number	S1593818H
Contact Number	96409807

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- Reporting may be referred to the Police for investigation.
- This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Corporation of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
- By submitting this report to the Insurers, you hereby consent to the archiving of this report at the centre and to copies of this report being made available aforesaid.
- This consent is given under the Personal Data Protection Act (PDPA)

acknowledge, agree and consent that

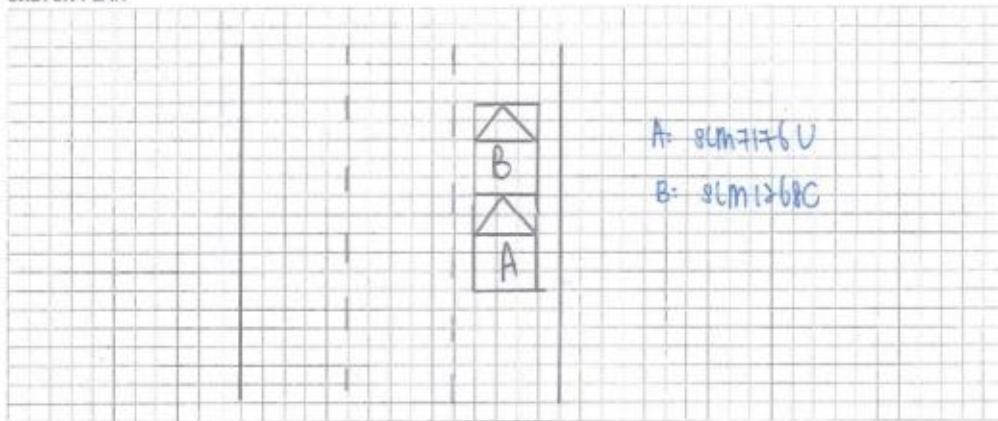
- er, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, and/or process my personal data/personal information set out in this [form] and any other personal information and by me or possessed by my insurer (collectively the "Personal Information") 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 [s] involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Regulatory Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
- (a) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (b) investigating the accident and/or my claims;
- (c) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (d) 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
- (e) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- 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
- Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- 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.
- Information so collected under (d) above may be shared / disclosed:
- (a) 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
- (b) complying with requirements under any regulations, laws or court orders.

nature

Driver's Signature
(If driver is not the policyholder)
Date & Time: 12/7/18 14 20hr

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 11/7/2018 around 15:30hrs. I was travelling along PIE tnds
 Tuas aft Thomson Flyover. The traffic was normal. I was travelling
 along the extreme right lane. ^{At} ~~After~~ the down slope, the vehicle in front
 braked hard once, I managed to slow down. After that, the vehicle
 in front accelerated as per normal. Suddly when approaching the end of
 the down slope, the vehicle in front E-braked. I did not have
 enough reaction time, therefore I bumped into the vehicle in front.

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/IN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8840952C



Name

ONG KWAN BOON, IVAN
(WANG GUANGWEN)

王光文

Race

CHINESE

Date of birth

21-10-1988

Sex

M

S8840952C

Country/Place of birth

SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number S8840952C

Date of birth

ONG KWAN BOON, IVAN
(WANG GUANGWEN)

Date of issue: 21 Oct 1988

Valid until: 12 Jul 2013



9177523



Card No. S8840952C



Date of issue

14-05-2013

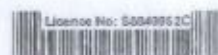
Address

APT BLK 339 HOUGANG AVENUE 7
#12-417
SINGAPORE 530339

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

EFFECTIVE DATE

Class 2 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg 19 Jul 2012



License No: S8840952C

NP 428A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



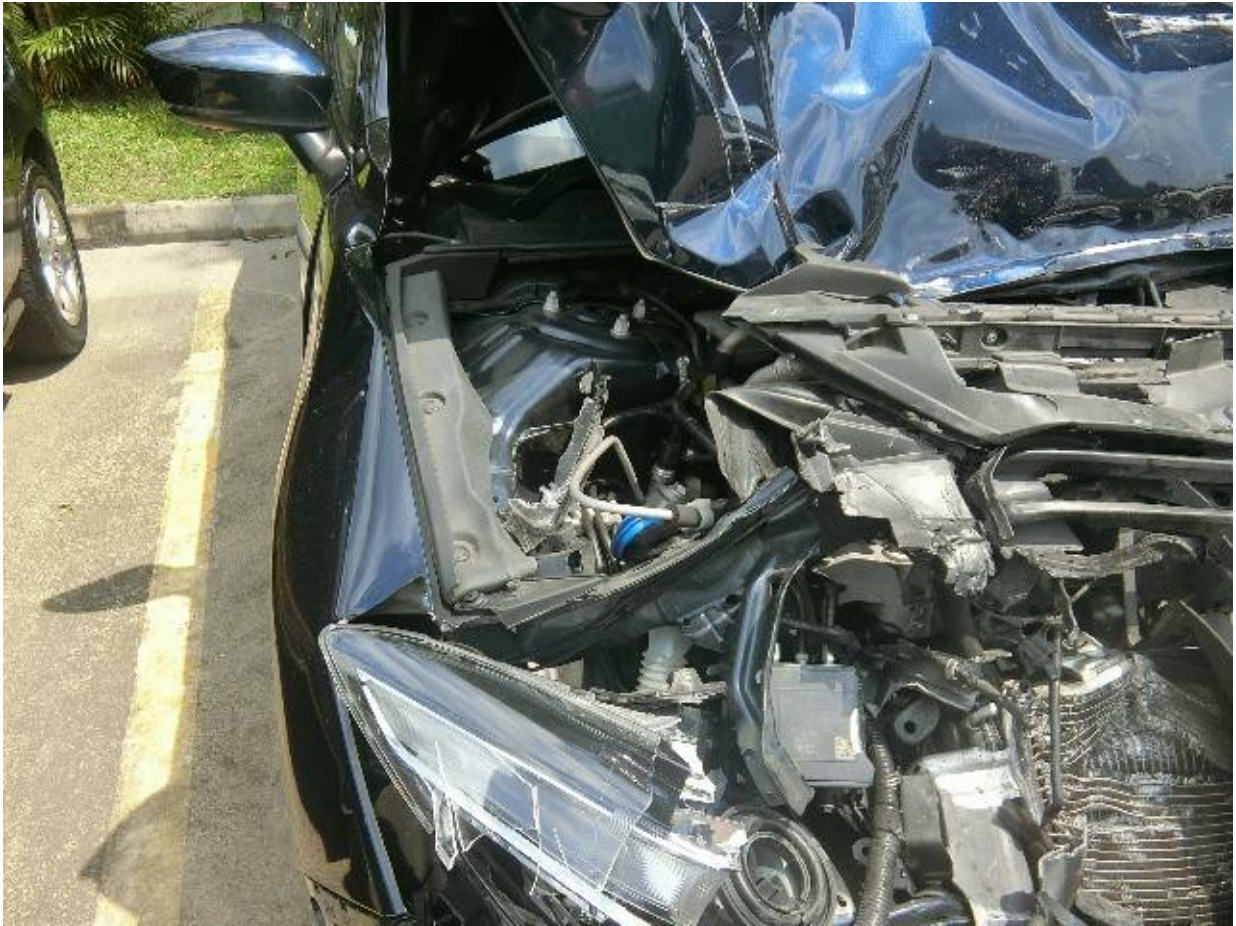
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Driving License



Accident Photo



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