

## 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	19/07/2018 13:14
Date Of Accident	18/07/2018 12:05
Exact Location Of Accident	AFTER EXIT FROM PIE TO PAYA LEBAR ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG6813L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ALYNN TAN CHOR LUANG
NRIC No	S1526285J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96634019
Alternative Phone No	OTHERS-96634019

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E250
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	2100433289-02
Cover Note Number	

### Driver

Name of Driver	LIM WEI MING
NRIC No	S8812970I
Date Of Birth	22/04/1988
Occupation	INDOOR
Date Of Driving Pass	23/11/2007
Driving Experience	10 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93891340
Fax Number	
Contact Number	
Email Address	JAMESLIM@EL-NANDATE.COM

Address	BLK 128A CANBERRA STREET #02-502
Postcode	751128
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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)	2
Passenger 1	
	NAME: : ELSIE LIM
	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.

#### 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	SHC898R
Vehicle Make/Model/Colour	MERCEDES BENZ TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YIO SWEE KEAT
NRIC/Passport Number	S17052171
Contact Number	96204522
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**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.

FOR

Policyholder's Signature  
Date & Time:

19 JUL 2018

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

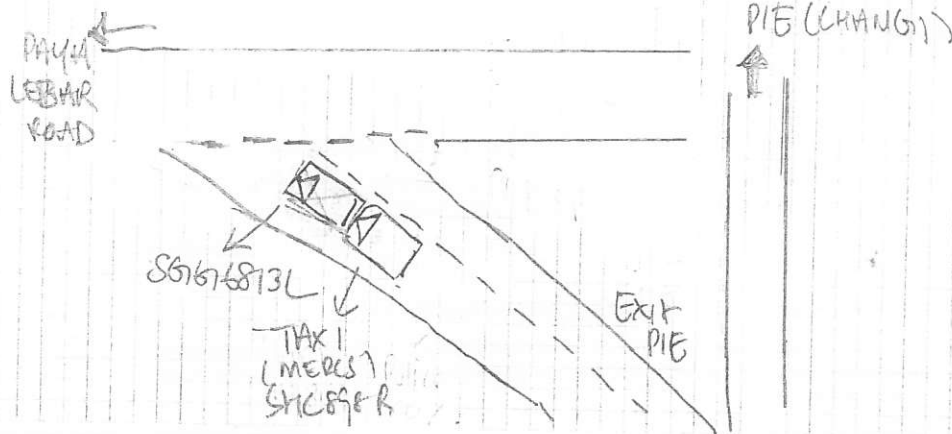
19 JUL 2018

Reporting Centre Personnel's Signature  
Name:

NRIC/FIN No.:

Jenny Lim  
S6927273H

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 180718

At approximate 12:05pm, I, LIM WEIMING, S8872701, WAS DRIVING THE VEHICLE, SG66513L TOWARDS UBI AVENUE 2 FOR BUSINESS APPOINTMENT. I CAME TO A HALT AT THE FILTER LANE AFTER EXITING PIE TOWARDS PAYA LEBAR ROAD.

I WAS AT A COMPLETE HALT TO WATCH FOR INCOMING VEHICLES ALONG PAYA LEBAR ROAD WHEN I HEARD A BANG AT MY BACK BY SHIC89FR, WHITE MERCEDES TAXI BY COMFORT DECKARD. DROVE BY YIO SWEE KEAT, S17052172.

THE WHITE MERCS CAME INTO CONTACT WITH MY BUMPER. NO ONE WAS INJURED.

DECLARATION

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

FOR

Policyholder's Signature

Date & Time: 19 JUL 2018

Driver's Signature

(If driver is not the policyholder)

Date & Time: 19 JUL 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Jenny Lim  
S6927273H