

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	14/08/2018 10:38
Date Of Accident	11/07/2018 20:25
Exact Location Of Accident	JUNCTION OF BEACH AND ROCHOR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR7514M
Insured/Policyholder	
Name Of Registered Owner	MELATI OKA MASAGUNG
NRIC No	F2262227R
Email Address	ERWINCIPUTRA@CAPCX.COM
Mobile Phone No	(LOCAL) +65-96288088
Alternative Phone No	Office-96288088

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	BENZ GLA200 BE

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? NO

If No, Please state action to be taken REPORTING ONLY

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	2100504262-01
Cover Note Number	

Driver

Name of Driver	ERWIN CIPUTRA
NRIC No	X117083
Date Of Birth	21/06/1974
Occupation	INDOOR
Date Of Driving Pass	30/04/2017

Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96288088
Fax Number	
Contact Number	
EMail Address	ERWINCIPUTRA@CAPCX.COM
Address	25 ANDERSON ROAD, AVALON
Postcode	259986
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	COLLIDED INTO MOTORCYCLIST
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?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	Name: : Melati Masagung 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

#straightroad Moving out from Stationary position & Moving straight Blue Car FBH7937K White Car SKR7514M Our car was on the second lane to the right which has an option to go straight or turn right and we were going straight. We had no intention (nor made any indication no signals/turns) of making a right turn. The motorcyclist was on the left side of our car. The motorcyclist had chosen to turn right. He assume we were turning right and almost ran to our car. We swerved right to avoid him hitting our car. And in the process he fell from the bike.

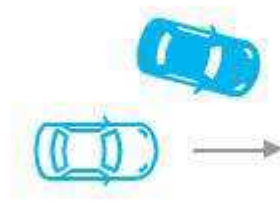
Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO


Details of Witness 1

Name	MELATI MASAGUNG
Phone Number	96288088
Email Address	MELATI@PTDELTA.NET

Sketch Plan





Other


**KEPOLISIAN NEGARA
REPUBLIK INDONESIA**
SURAT IZIN MENGENEMUDI
(Driving License)

A
METRO JAYA
PRIA

Nama : **ERWIN CIPUTRA**
Alamat : **JL PROF M YAMIN NO 34
RT: 004/005 MENTENG
JAKARTA PUSAT**

Tempat & : **BANDUNG**
Tgl. Lahir : **21-06-1974**
Tinggi : **168 cm**
Pekerjaan : **SWASTA**
No. SIM : **740612050536**
Berlaku s/d : **21-06-2022**
JAKARTA, 30-04-2017
DIRLANTAS POLDA METROJAYA



DRS. ERMAYUDI SUMARSONO
KOMBES POL NRP. 67020346

