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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	15/09/2018 14:24
Date Of Accident	14/09/2018 22:40
Exact Location Of Accident	AIRPORT BOULEVARD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJU7931M
Insured/Policyholder	
Name Of Registered Owner	MARIC MARKETING PTE LTD
Co Reg No	201620700D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	VIOS E AUTO
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994630
Cover Note Number	
Driver	

Name of Driver NG JUN XIANG NIGEL

NRIC No S9522157B
Date Of Birth 23/06/1995
Occupation OUTDOOR
Date Of Driving Pass 28/01/2016

Driving Experience 2 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90105772

Fax Number

Contact Number OFFICE-90105772

EMail Address NOEMAIL

BLK 360 YUNG AN ROAD Address

#01-89

Postcode 610360

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

General Information of the Accident

COLLISION - CHANGE/CROSS LANE Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2 Was any body injured in the Accident? NO

Was any injured conveyed to hospital by ambulance?

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

Passenger 1

NO

YES

3

NAME:

GENDER: : MALE

Passenger 2 NAME: : -

> GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

NO

NO

Circumstances of Accident

REFER TO STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **UNKNOWN**

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- The 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.
- 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 1
 - 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.

Maric Marketing Pte Ltd Co Reg No 201620700D

9 Tagore | ane #03-04 Policyholder's Signature Date & Higapore 787472

Oriver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personne

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN					
	1 1	100	1		
		82			
		Ta2 1		V-W)	SJU7931M
		ME	[4] (B1,	V-B)	Unknown
			Ti		
		AI			
DESCRIBE CIRCUMSTANCES	DE THE ACCIDENT				
		· .	I vehic	de 'A' was	travelling on the
Started Venue. I	was tro	avelling	Straig	ht in va	u lane suddenly
The state of the s		-1	3		, , ,
vehicle B' from	the right	lane	cut	into my	lane and Jaman
				-	
brake. I tried	to avoi	d him	hence	I SWEY	ve my rehucle tud
the left as ther	c was n	o car.	I got	down, v	to the vehicle 'B'
took photo of n	y Ic an	nd left	immedi	ately. I	only manage to
take his damage	portion an	ld J	could	not rem	ember his full
-1					
relicle number.					
Passenger 1	male	Gras	y .		
Passenser 2		AST Female Grab			
DECLARATION					
We declare the foregoing particu	lars are true in ever	y respect.			
aric Marketing Pte Ltd Reg No 201620700D	XI				
plikalgable Lispadii 3-04	Briver's Signat		25/04		Centre Personnel's Signature
os Adapore 787472	(If driver is not Date & Time:	the policyhol	der)	Name: NRIC/FIN 1	10

Annex D



NOTICE OF COMPLIANCE

This is to confirm that NG JUN XIANG NIGEL, Blk 360 Taman Jurong #01-89, HP: 90105772, Driver of vehicle SJU7931M, has reported to the police a non-injury traffic accident which occurred along Airport Blvd on 14/09/2018 at about 2240hrs, involving a male driver of a grey-coloured Toyota Camry SKX69xxx. Particulars of other party was not obtained. No pedestrians and government property damaged.

2 He / She has therefore complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Date: 15/09/2018 S/D Ref: 02 Name of Issuing Officer: <u>Sgt Syafil Yusof</u> Police Post/Unit: Jurong Division / Nanyang NPC

> NANYANG NPC 2 JURONG WEST AVE 3 SINGAPORE 649482 TEL: 1800-7929999

This form was generated from Nanyang NPC





























