

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 liability.
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	09/11/2018 17:09
Date Of Accident	09/11/2018 13:00
Exact Location Of Accident	ALONG THOMSON RD(INFRONT OF THOMSON MEDICAL CTR)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGA1163T
Insured/Policyholder	
Name Of Registered Owner	TAY BEE CHOO
NRIC No	S1174601B
Email Address	BEETAY9@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98309623
Alternative Phone No	OTHERS-98309623
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	TUCSON
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	2100435559-03
Cover Note Number	
Driver	
Name of Driver	TAY BEE CHOO
NRIC No	S1174601B
Date Of Birth	09/12/1955
Occupation	INDOOR
Date Of Driving Pass	31/10/1973
Driving Experience	45 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98309623
Fax Number	
Contact Number	OTHERS-98309623
EEmail Address	BEETAY9@GMAIL.COM

Address	31D CHANCERY LANE
Postcode	1130
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	3
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

PLEASE 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	SGT7722R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	WANG YUAN JUN
NRIC/Passport Number	S8205403J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLE3954J
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	HAR CHAW KHEAN
NRIC/Passport Number	S7678317I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Accident Sketch Plan

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.

Policyholder's Signature
Date & Time:

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

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

9 Nov 2018, 3.20pm

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 1) My Car A (SGA 1163T) was stationary, in front of yellow box.
- 2) Car B exited from Thomson Med Ctr, moved across yellow box approaching into lane 1
- 3) Car C moving in lane 1, hit Car B
- 4) Car B then hit my car (A) on the right

DECLARATION

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

Jay Rubin

Policyholder's Signature
Date & Time:

9 Nov 2018, 3.20 pm

iculars are true in every respect.

Driver's Signature
(If driver is not the policyholder)

Date & Time:

9 Nov 2018 3:20pm

Reporting Centre Personnel's Signature
Name: *Resh*
NRIC/FIN No.: *h01003*

Reporting Centre Personnel's Signature
Name: Robert Lee

NRIC/FIN No.:

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S1174601B**

Name: **TAY BEE CHOO**

Birth Date: **09 Dec 1955**
Issue Date: **22 Aug 2003**





REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S1174601B**

Name: **TAY BEE CHOO**



鄭美珠
Race: **CHINESE**
Date of Birth: **09-12-1955** Sex: **F**
Country of Birth: **SINGAPORE**





YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

Valid Date: **31 Oct 1973**





Licence No: **S1174601B**

NP 428A



1021551



SPIC No: **S1174601B**

Blood Group: **A+** Date of issue: **03-10-1993**

Address: **31D CHANCERY LANE
SINGAPORE 1130**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

