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 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

| aforesaid. | | |
|------------------------------------------------------------------------------|--------------------------------------------------|--|
| | ACCIDENT STATEMENT | |
| Date Of Report | 12/11/2018 11:07 | |
| Date Of Accident | 11/11/2018 21:15 | |
| Exact Location Of Accident | BLK 346 BUKIT BATOK STREET 34 OPEN SPACE CARPARK | |
| Country/State of Loss | SINGAPORE | |
| DETAILS OF OWN VEHICLE | | |
| Vehicle Registration Number | SGZ2860B | |
| Insured/Policyholder | | |
| Name Of Registered Owner | ONG SENG CHOON | |
| NRIC No | S1490443C | |
| Email Address | ALVINONG89@HOTMAIL.COM | |
| Mobile Phone No | (LOCAL) +65-92952835 | |
| Alternative Phone No | OFFICE-92952835 | |
| Vehicle Particulars | | |
| Manufacturer | SUZUKI | |
| Model | SWIFT 1.5 AT | |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE | |
| 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 | FWD SINGAPORE PTE. LTD. | |
| Type Of Coverage | COMPREHENSIVE | |
| Fleet Policy | NO | |
| Policy Number | PNPV2018-00011602 | |
| Cover Note Number | | |
| Driver | | |
| | | |

Name of Driver ONG GUAN XIONG ALVIN

NRIC No S8939842H
Date Of Birth 07/11/1989
Occupation INDOOR
Date Of Driving Pass 14/07/2008

Driving Experience 10 YEARS AND 3 MONTHS

Gender MALE

Mobile Number +65-92952835

Fax Number
Contact Number

EMail Address ALVINONG89@HOTMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured CHILDREN

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
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

NO

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : JENNY CHUA

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

I was at Blk 346 Bukit Batok Street 34 open space carpark. I was in the carpark lot wanted to exit out from the lot. I inched out forward slowly to check for any oncoming vehicle. As i was slowly inching forward, vehicle GY1897H came from my right after making a left turn, driving at a fast speed and did not slow down at the left turn and its left rear side collided onto my car front right side. As shown from the pictures provided, both my headlights and foglights are turned on, usually when people see lights, they shouldn't be driving at a normal speed but on controlled speed. The driver also made no attempt to avoid the accident as there was still relatively sufficient space for him to do so if he had seen my car inching out from the lot, which means that he didn't see me at all. And judging from the amount of distance that my car has been dragged along with his van and out of my parking lot, it is sufficient to say that he is driving above the stipulated speed limit in a carpark.

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 GY1897H

Vehicle Make/Model/Colour MITSUBISHI L300 HR M

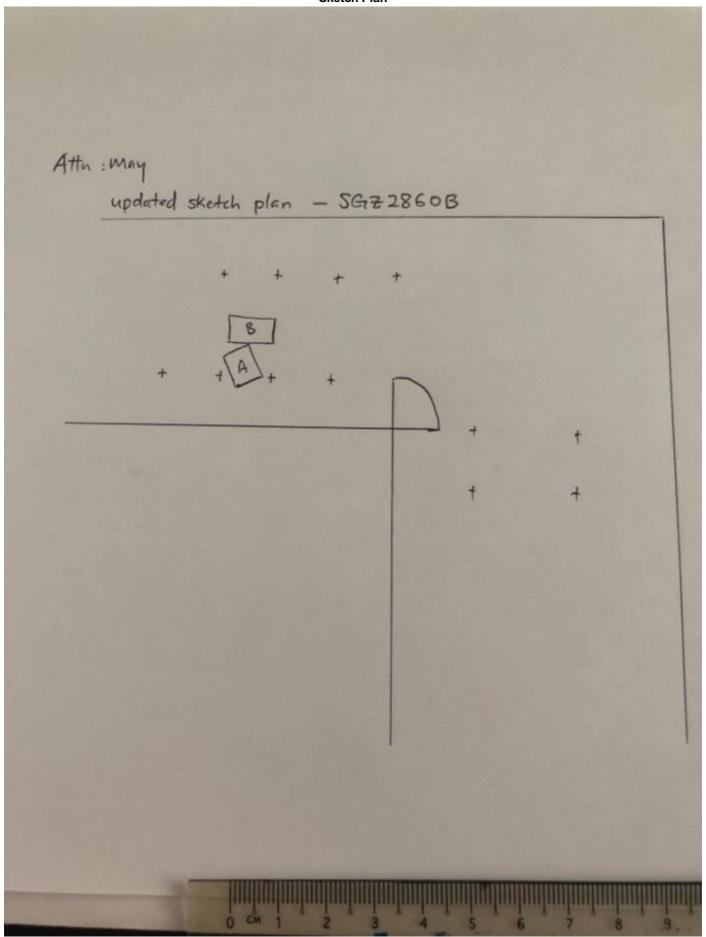
Details Of Properties

Vehicle Category COMMERCIAL VEHICLE
Name of Driver HANIP BIN ABDULLAH

NRIC/Passport Number S1584929J Contact Number 98553577

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)



ACCIDENT STATEMENT (2000 characters)

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Taxi Voucher No.: | |

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -MUHAMMAD FAIZAL BIN PABILA



MARS Officer

Registered Owner or Driver's Signature

Job Complete Date/Time

12 November 2018 at 9:33 AM

12 November 2018 at 9:34 AM

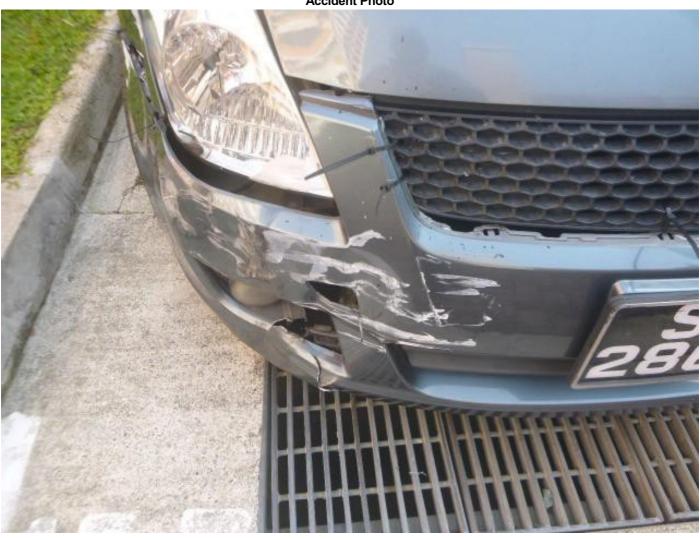
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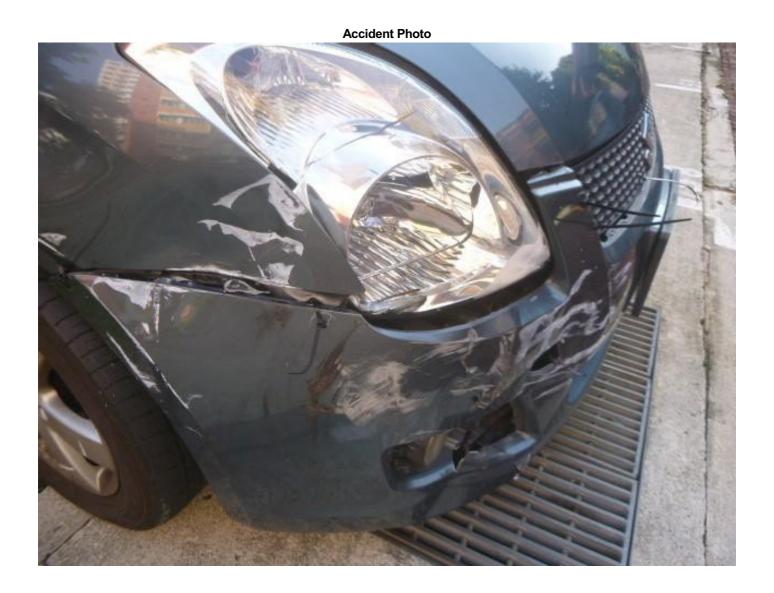










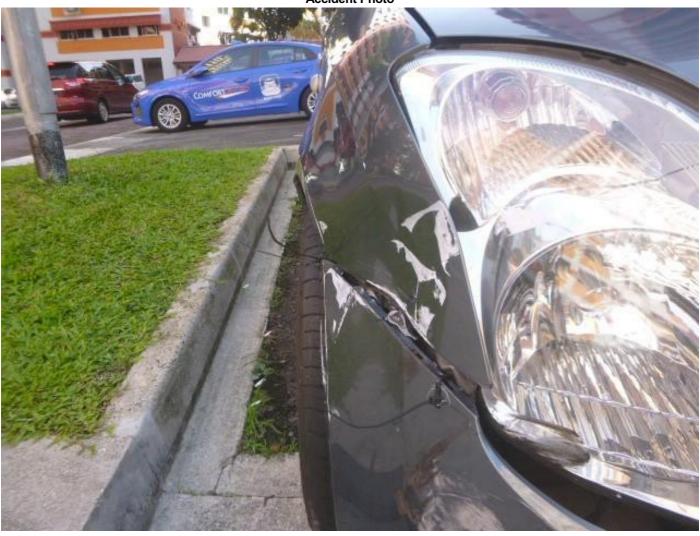


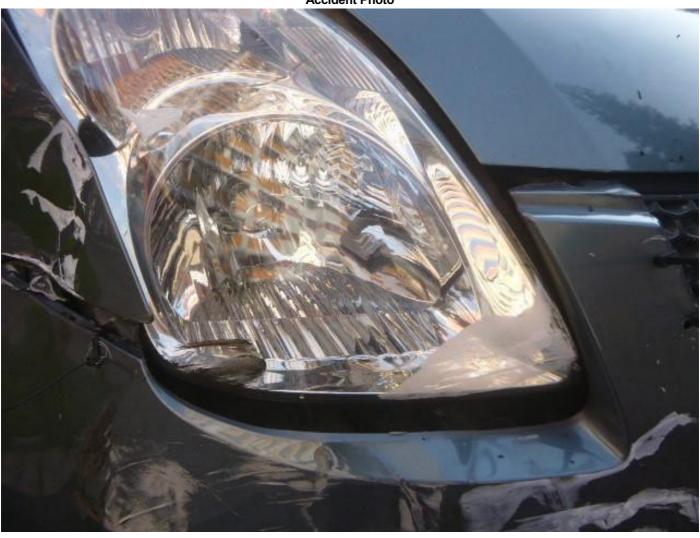


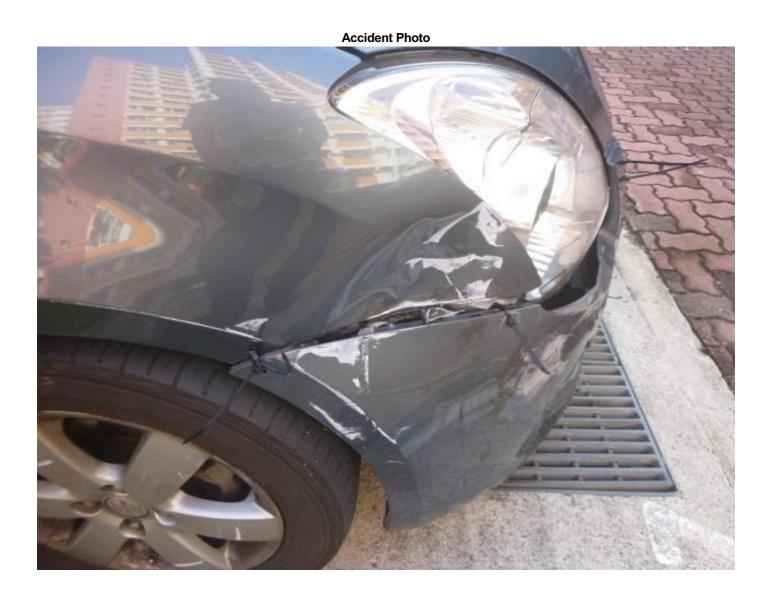


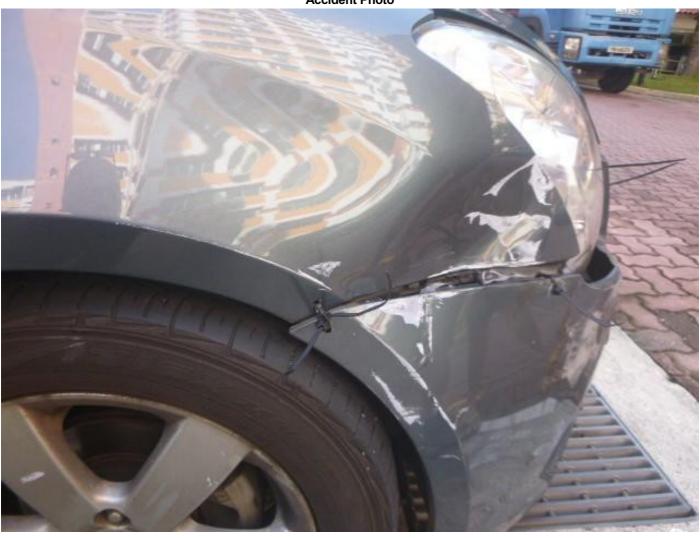


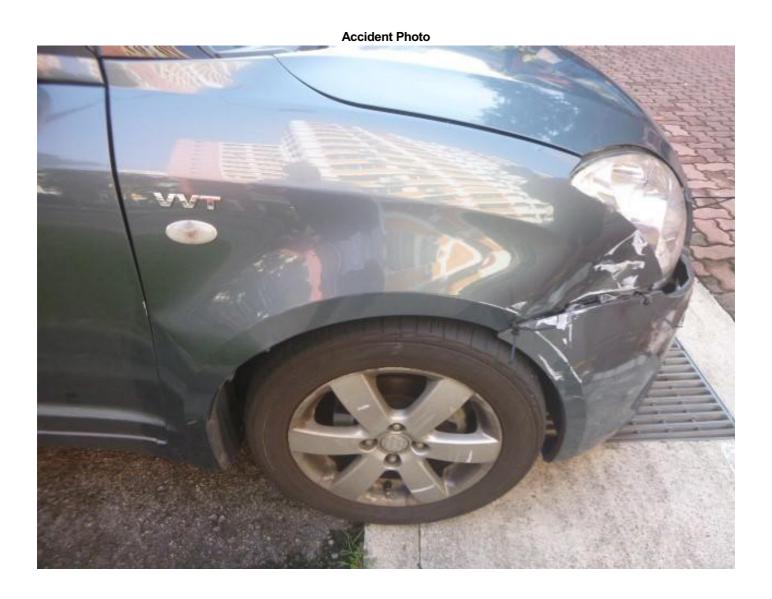


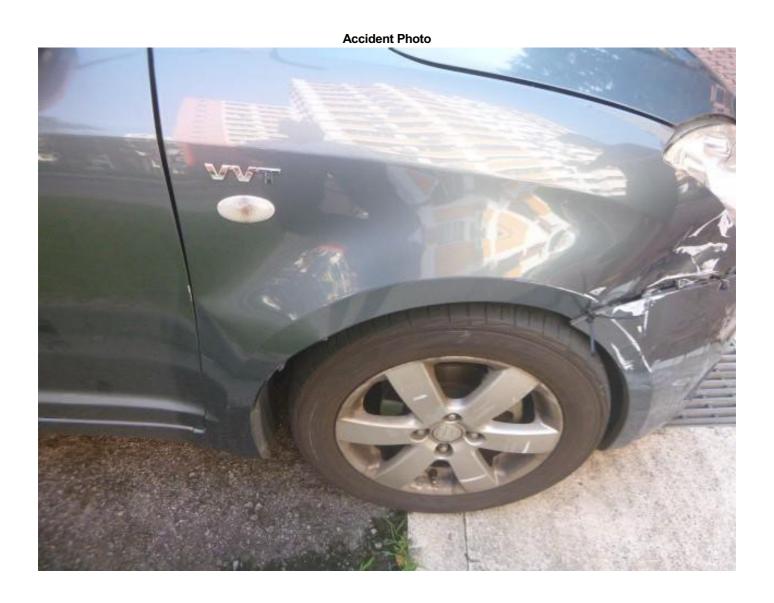


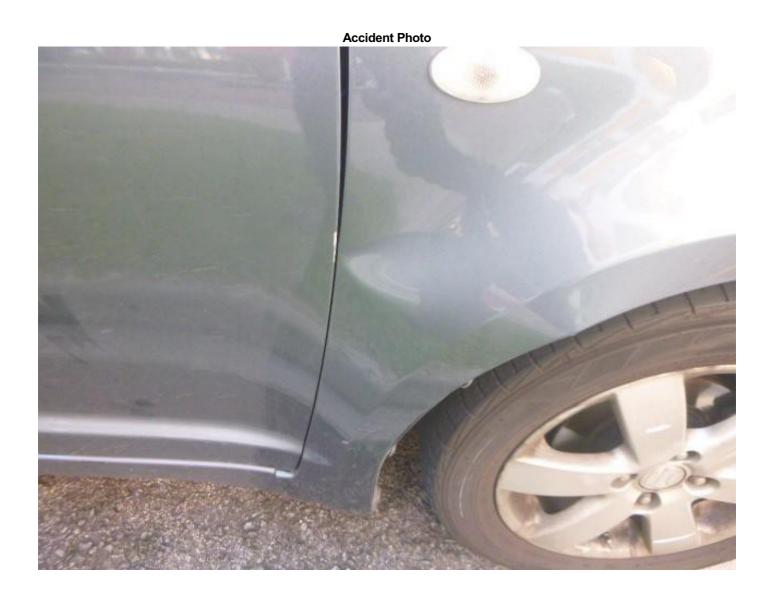


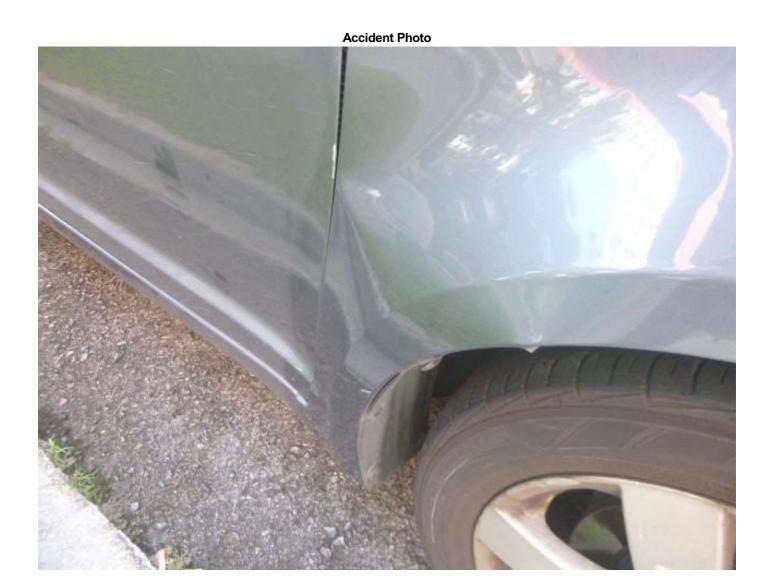


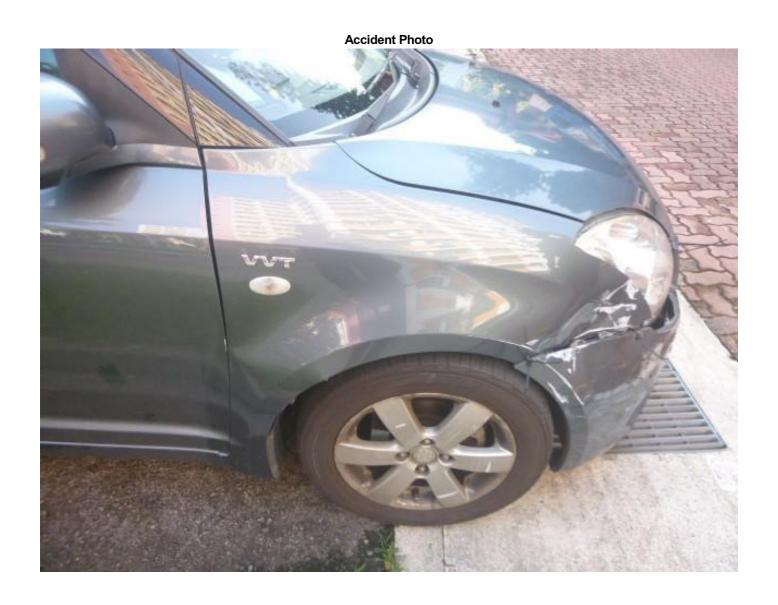




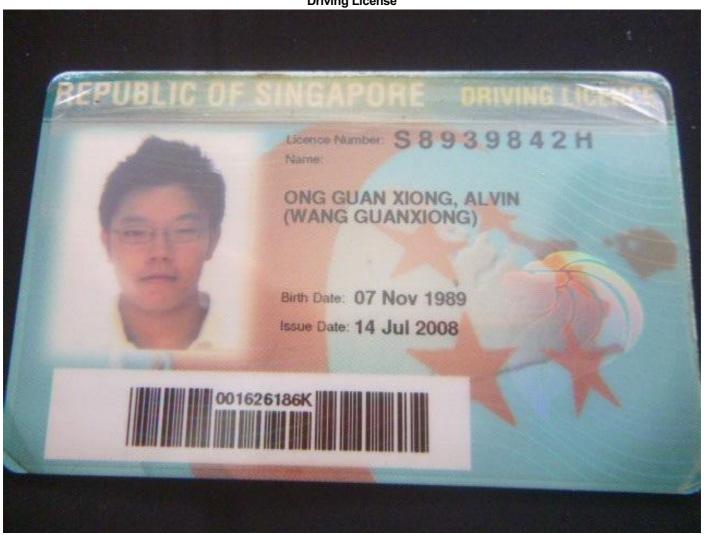




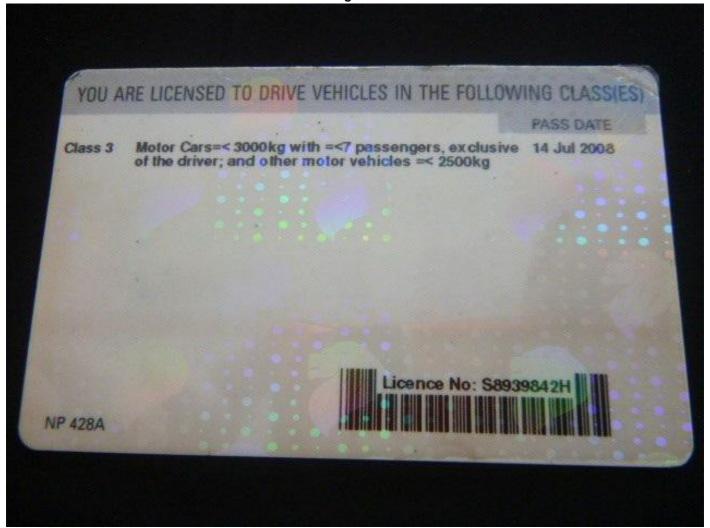




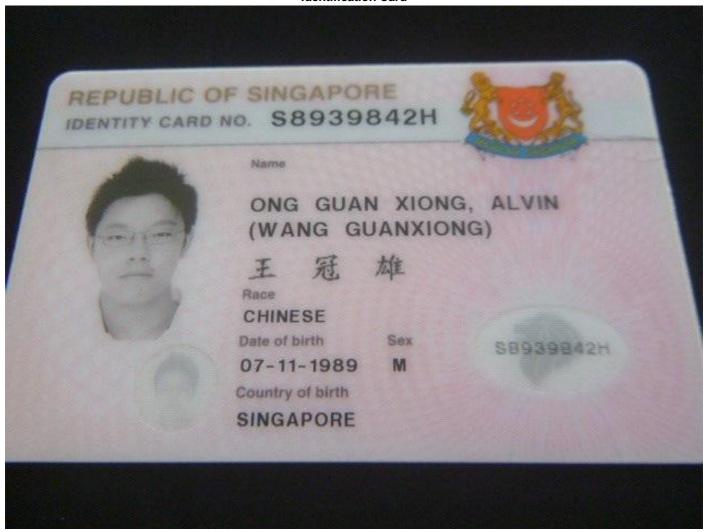
Driving License



Driving License



Identification Card



Identification Card



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: S66SS0020G / GST Reg. No.: M400017735

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre

with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No: MBHH18145930 Vehicle Registration No: SGZ2860B Name(as shownin NRIC): ONG GUAN XIONG ALVIN NRIC/FIN/Passport No: S8939842H (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate Address _Singapore() ____Mobile No. : 92952835 Contact (Tel) : ALVINONG89@HOTMAIL.COM **Email Address** _Time of Accident: 2115HRS : 11/11/2018 Date of Accident Place of Accident : BLK 346 BUKIT BATOK STREET 34 OPEN SPACE CARPARK Insurance Company: FWD SINGAPORE PTE. LTD. (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: **RE-ATTACHED SKETCH**

Joanne Tham
Reporting Centre Personnel's Signature
Name: Joanne Tham

NRIC/FIN No.:

Date: 14 NOVEMBER 2018

Date:

Policyholder / Driver's Signature