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	07/01/2019 16:05		
Date Of Accident	05/01/2019 12:45		
Exact Location Of Accident	JEM BASEMENT 3 CARPARK		
Country/State of Loss	SINGAPORE		
DETAILS OF OWN VEHICLE			
Vehicle Registration Number	SMF9672R		
Insured/Policyholder			
Name Of Registered Owner	PREMIUM AUTOMOBILES PTE LTD		
Co Reg No	199902271W		
Email Address	NOEMAIL		
Mobile Phone No			
Alternative Phone No	OFFICE-90234438		
Vehicle Particulars			
Manufacturer	AUDI		
Model	A4 SEDAN 2.0 TFSI 8W		
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	999994629/100869033-00002		
Cover Note Number			
Driver			
Name of Driver	SONG HAO		

Name of Driver SONG HAO
NRIC No S6960597D
Date Of Birth 12/01/1969
Occupation INDOOR
Date Of Driving Pass 08/03/2011

Driving Experience 7 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90234438

Fax Number

Contact Number

EMail Address SONGHAO1969@GMAIL.COM

BLK 288D JURONG EAST STREET 21 Address

#06-416

Postcode 604288

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

COLLISION - MAJOR/MINOR RD Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

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

SDF331R. DRIVEN BY MR LIM SOO CHEE WAS STOPPING IN FRONT OF EXIT GATE OF B3 CARPARK IN JEM BUILDING JURONG EAST. SMF9672R DRIVEN BY MR SONG HAO, WAS JUST BEHIND TO BE READY TO GET THROUGH ONCE SDF331R, CLEAR THE GATE AND DRIVE OFF. INSTEAD OF GOING FORWARD TO CLEAR THE EXIT GATE, SDF331R, HAD A SUDDEN REVERSED AND HIT RIGHT HAND SIDE OF SMF9672R.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SDF331R

Vehicle Make/Model/Colour

ΚIΑ

Details Of Properties

PRIVATE CAR Vehicle Category LIM SOO CHEE Name of Driver NRIC/Passport Number S2564143D **Contact Number** 91547788

Address

Postcode

AIG ASIA PACIFIC INSURANCE PTE, LTD. Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 .
 - 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 Outper Resonnel's Signature Name: PANA CHOOM HUANCO

NRIC/FIN No.: 577026346

Sketch Plan #2

SKETCH BLAN	JEM :	TURONT FOST, B3 carpane
Exit 90	te.	
SMF 9672R		
DESCRIBE CIRCUMSTANCES OF THE A	200000000000000000000000000000000000000	
SOFBIR DRIVEN A	Mr. LIM soo C	MZE was stopping in
Front of Exit 9	late of B3 co	wpark in JEM Building
JURONUT EAST.	IMF 9672R BRIT	VEN AY MY. SONET HISO
		get through once
		drive offs Instead
		he exit gate,
1 PAGE 2 VIII 198	4 4	use and hit right
hand si'de of s		
	101212	
DECLARATION		610
I/We declare the foregoing particulars are tru	ie in every respect.	PIE LO
Cu	CAL	
Policyholder's Signatura	and Standard or other transfer	The state of the s
Date & Time: 1330 km (If dr	er's Signature iver is not the policyholder) & Time: 1320 km	Reporting Centre Personnel's Signature Name: HUA CHOCH HUANG NRIC/FIN No.: 517016346
1-1201	P101/2019	



Driving License











