

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	13/02/2019 12:12
Date Of Accident	18/01/2019 18:30
Exact Location Of Accident	GEYLANG LORONG 25
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT9762P
Insured/Policyholder	
Name Of Registered Owner	AUYONG SZE LINDA
NRIC No	S1239643J
Email Address	JONATHAN.D98@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98248183
Alternative Phone No	Office-67374597

Vehicle Particulars

Manufacturer	AUDI
Model	A3 SEDAN 1.4 TFSI (AMBIENTE PLUS)
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	2100419561-03
Cover Note Number	

Driver

Name of Driver	JONATHAN MING AUYONG DORNEL
NRIC No	S9890661D
Date Of Birth	08/07/1998
Occupation	INDOOR
Date Of Driving Pass	08/08/2018
Driving Experience	0 YEAR AND 5 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-91236231
Fax Number	
Contact Number	
E-Mail Address	JONATHAN.D98@HOTMAIL.COM
Address	3 TAMAN WARNA, HOLLAND RESIDENCES
Postcode	276340
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	COLLIDED INTO MOTORCYCLIST
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?	NO
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: : Latthida Gender: : Female

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	ORCHARD NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Accident Type Collided into Motorcyclist, Circumstances Of Accident #straightroad, Accident_Scenario Changing lane & Moving in own Lane, Blue Car SKT9762P, White Car FBM2694S. Accident_Description On lane 2 turning to lane 1

Attachment(s)

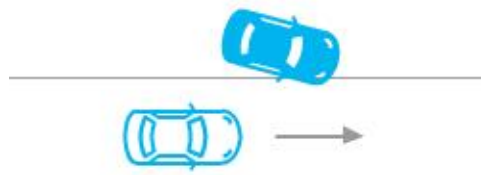
Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBM2694S
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan



Driver's Nric (Front)



Driver's Nric (Back)



Driver's Driving License (Front)



Driver's Driving License (Back)

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

EFFECTIVE DATE

Class 3

Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver, and other motor vehicles with unladen weight $\leq 2500\text{kg}$

06 Aug 2018

NP 428A



License No: S989068101