SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/01/2019 15:19
Date Of Accident	26/01/2019 10:40
Exact Location Of Accident	JUNCTION OF ARAMUGAN ROAD AND PAYA LEBAR ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMC3923Y
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-66039390
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS ALPHA
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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 HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SMC3923Y
Cover Note Number	
Driver	
Name of Driver	ONG LEONG HAO (WANG LIANGHAO)
NRIC No	S7941062D
Date Of Birth	22/12/1979
Occupation	OUTDOOR

20/05/2004

14 YEARS AND 8 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-84987607

Fax Number **Contact Number**

EMail Address NOEMAIL

BLK 310B PUNGGOL WALK Address

#03-556

Postcode 822310 NO

Was driver an employee of the Insured's Company

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

Type Of Accident COLLISION - MAJOR/MINOR RD

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

NO

NO

NO

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

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) 1

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?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND 1 GRAB PASSENGER.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: VIDEO WITH WORKSHOP - ESTEEM PERFORMANCE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SLD1231E Vehicle Registration Number

Vehicle Make/Model/Colour MERCEDES-BENZ

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SHEYCA PLAN

MPORTANT MOTICS

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- Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 7. 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)
 - (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.
- 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: 28 144 2010

15:19/03

Driver's Signature

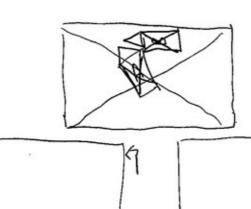
(If driver is not the policyholder) Date & Time 2 3 JAN 7919

CS (9h0)

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: Poh Kwee Choo



A: SMC 3973Y

B: 500 1731E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 26th Jan 2019, I was an aramugan Rd turning out to paya Lebar Rd. AR it was heavy traffic and all vehicles were standstill,
turning out to paya Lebar Rol. AR it was
heavy traffic and all vehicles were standstill,
I turn not into the yellow box to lane 1.
SLD1231E was at that wornt of time inside
I turn out into the yellow box to lane I, SLD 1231 E was at that point of time inside the yellow box, when I tried to slowly more to lane I of the stationary traffic,
move to I are 1 of the stationary traffic.
the said vehicle purposely more Bruard and hit my front right of my vehicle to.
and hit my front right of my vehicle to.

DECLARATION

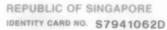
particulars are true in every respect.

Policyholder's Signature Date & Time: 11N 7019 Driver's Signature (If driver is not the policyhelder) Date & Time: 2 3 1.3 2 2 1 3 Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:









(WANG LIANGHAO) 王良豪

CHINESE 22-12-1979 M

SINGAPORE

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

EFFECTIVE DATE

NP 428A





This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found. please return to LTA, 10 Sin Ming Drive, Singapore 575701.

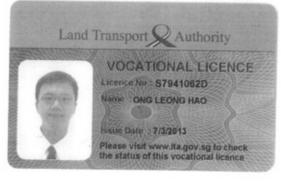
Type 02

Description TAXI VL

Issue Date 09/03/2010







Accident Photo





Accident Photo



Accident Photo



CHASSIS NUMBER

