MBHH19021545 / Ajax Mars Pte Ltd - Bukit Merah ENTRY DATE & TIME: 15/02/2019 22:24 SUBMITTED BY: Victor Ang

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 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

	ACCIDENT STATEMENT
Date Of Report	15/02/2019 22:24
Date Of Accident	15/02/2019 11:50
Exact Location Of Accident	SLIP RD TO UPPER BUKIT TIMAH RD FRM DAIRY FARM RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SLQ7149C
Insured/Policyholder	
Name Of Registered Owner	DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD.
Co Reg No	199803778Z
Email Address	BENNY.CHONG@DAIMLER.COM
Mobile Phone No	
Alternative Phone No	Office-68498118
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180 COUPE (R17 LED)
Exact Purpose for which vehicle was being used at ime of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f 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.
Гуре Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995580
Cover Note Number	
Driver	
Name of Driver	NG HIANG GEK ANGELINA
NRIC No	S7120388C
Date Of Birth	17/06/1971

INDOOR

26/02/2000

18 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96823488

Fax Number

Contact Number

EMail Address ANGELINANG.SKYCITY@GMAIL.COM

Address NIL

Postcode

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

nde

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?

Number of vehicles (including own vehicle)

involved in the accident

2

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO YES

NO

1

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

I (SLQ7149C) was stationary at the slip road to Upper Bukit Timah road, from dairy farm road, giving way to oncoming traffic from the right, when suddenly a SMRT bus (TIB1246J) who was going straight along Upper Bukit Timah road, hit me. The middle left section and the rear left side of the bus make contact with the front right side of my car. No injuries involved.

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 TIB1246J

Vehicle Make/Model/Colour MERCEDES BENZ 0405G AUTO

Details Of Properties NA

Vehicle Category BUS

Name of Driver NA

NRIC/Passport Number

Contact Number

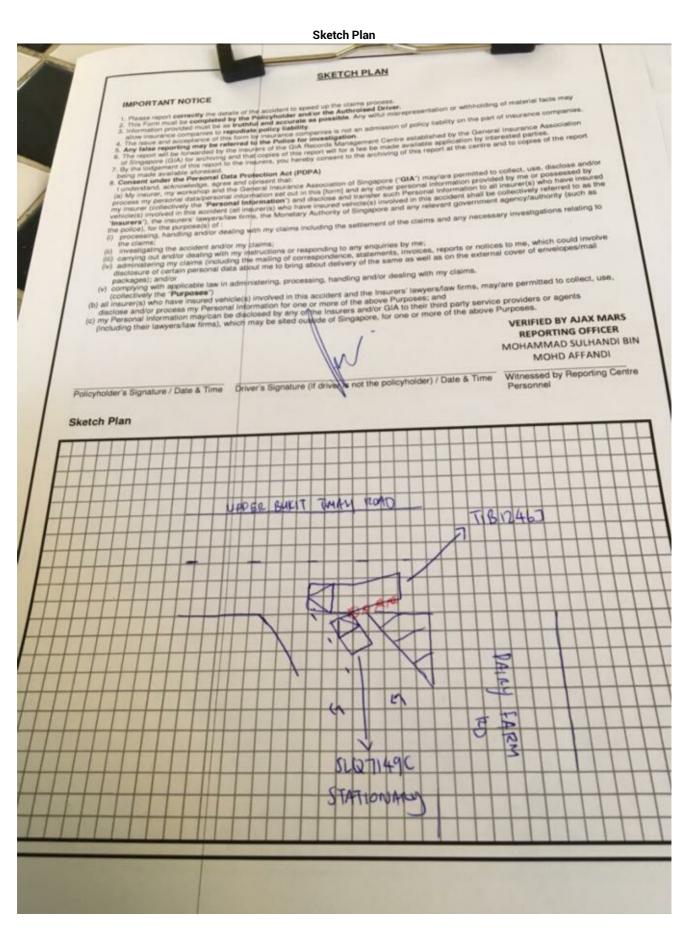
Address

Postcode

Insurance Company Name

Nature Of Damage

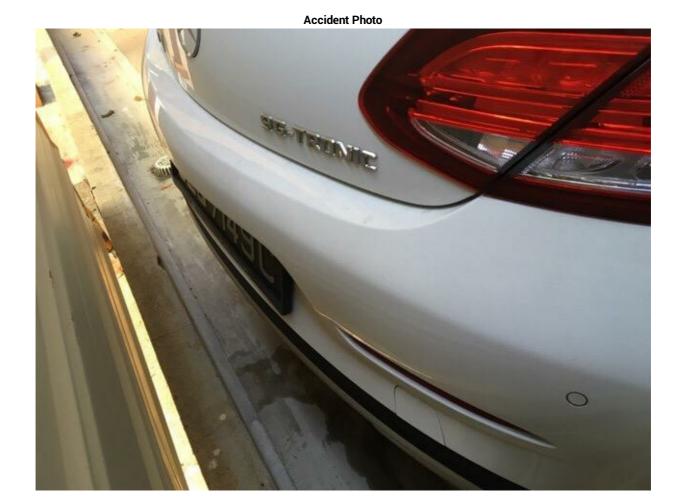
No. Of Passenger (Including Driver)



ACCIDENT STATEMENT (2000 characters)

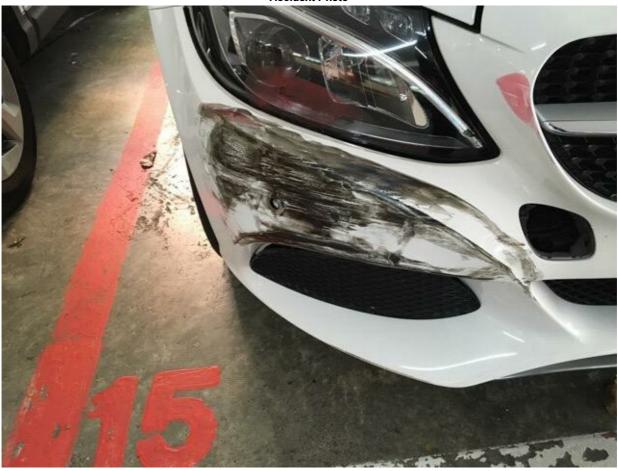
road to Upper Bukit Timah road, from dairy ic from the right, when suddenly a SMRT bus ing Upper Bukit Timah road, hit me. The middle bus make contact with the front right side of my
ded above are true in every aspect
Registered Owner or Driver's Signature Date/Time:
15 February 2019 at 6:05 PM

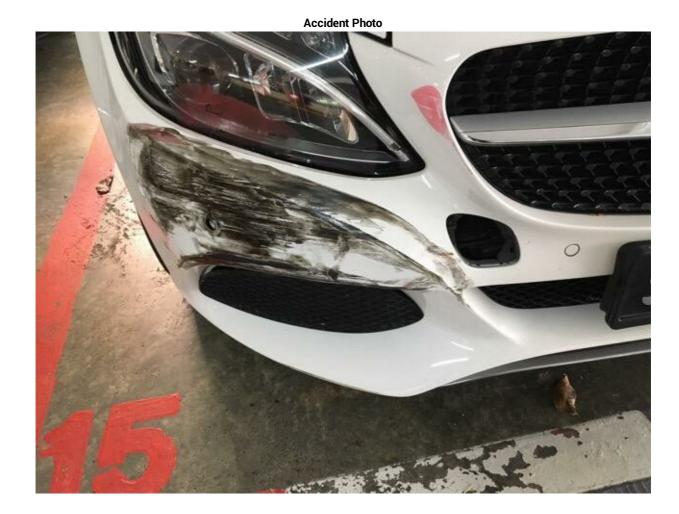


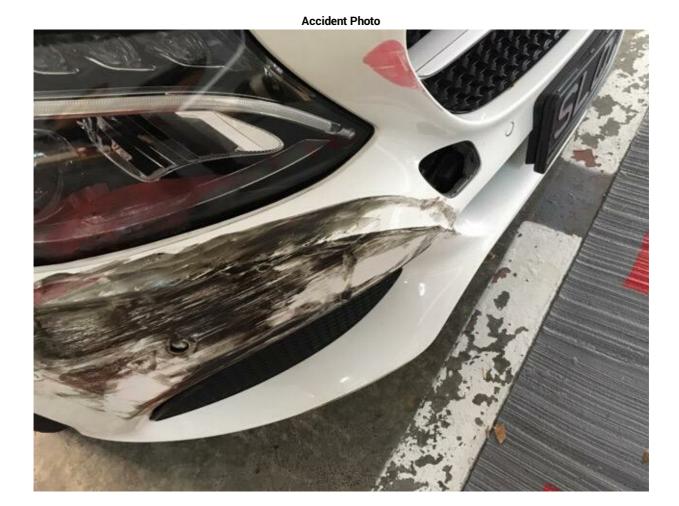








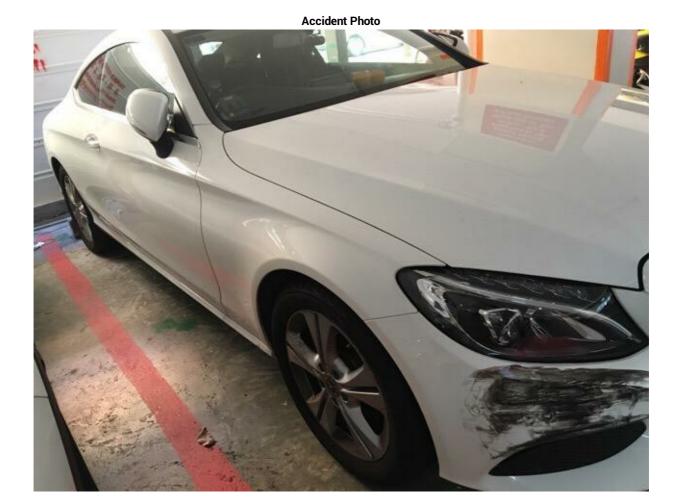




Accident Photo















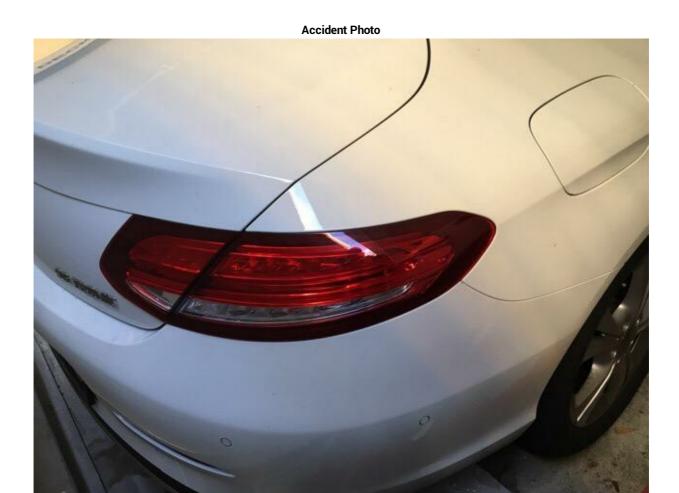
Accident Photo















Driving License

