

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	21/03/2019 17:23
Date Of Accident	20/03/2019 18:15
Exact Location Of Accident	JURONG PIER ROAD - AYE JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME4959C
Insured/Policyholder	
Name Of Registered Owner	BANGALE SANJAYKUMAR LAXMIKANT
NRIC No	S2697452F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97543549
Alternative Phone No	Office-NOPHONE

Vehicle Particulars

Manufacturer	SUBARU
Model	FORESTER-2.0 I-L CVT AWD SR (A)
Exact Purpose for which vehicle was being used at time of accident	PERSONAL / LEISURE
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	1800117205
Cover Note Number	

Driver

Name of Driver	BANGALE SANJAYKUMAR LAXMIKANT
NRIC No	S2697452F
Date Of Birth	12/06/1966
Occupation	INDOOR
Date Of Driving Pass	15/10/2003
Driving Experience	15 YEARS AND 5 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97543549
Fax Number	
Contact Number	OFFICE-NOPHONE
EMail Address	NOEMAIL
Address	APT BLK 765 CHOA CHU KANG NORTH 5 #04-317
Postcode	680765
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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)	1

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

PLEASE REFER TO THE ATTACHED DOCUMENTS

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	GBG51S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	CHEW KAK CHEONG
NRIC/Passport Number	S8035392H
Contact Number	88774422

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS WAITING FOR SIGNAL IN RIGHT MOST LANE. THE 3RD PARTY DRIVER WBS WAITING IN FRONT OF ME AT ONE CAR DISTANCE. AFTER GREEN SIGNAL THE TRIFIC AT MY LEFT LANE MOVED AS WELL DRIVER IN FRONT OF ME ~~RESU~~ JUST MOVED. THINKING THE LANE TRIFIC STARTED MOVING I ALSO MOVED BUT VEHICAL IN FRONT OF ME STOPPED. IN PANIC CONDITION I TRIED TO STOP BUT UNABLE TO BREAK ON TIME AND HIT THE CAR IN FRONT OF ME LIGHTLY & DENTS OBSERVED ON HIS VEHICAL. HE ~~WAS~~ ^{WAS} NOT CLUNG ~~THE~~ VEHICAL. AND CALLED HIS OWNER AND CONFIRMED ME THAT HE WILL CLAIM INSURANCE DESPITE MY REQUEST FOR PRIVATE SETTLEMENT SINCE THE DAMAGE TO CAR IS VERY MINIMAL. ~~THE~~ THERE IS NO DAMAGE TO MY CAR.

I/WE declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 21 MARCH 2014 3:15 PM
GIARMC SketchPlanForm_V3

Driver's Signature _____
(If driver is not the policyholder)
Date & Time: 21 MARCH 19 '3:15 PM




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:
 - (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 permit 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 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  21/3/18
Date & Time: 3.15 PM

Driver's Signature  21/3/18
(If driver is not the policyholder)
Date & Time: 3.15 PM


Reporting Centre Personnel's Signature
Name: DANIEL JUDE
NRIC/FIN No.:

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S2697452F**
Name: **BANGALE SANJAYKUMAR LAXMIKANT**
Birth Date: **12 Jun 1966**
Valid Date: **15 Oct 2003**

000922318A

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S2697452F**

Name: **BANGALE SANJAYKUMAR LAXMIKANT**
Race: **INDIAN**
Date of Birth: **12-06-1966**
Country/Place of Birth: **INDIA**
Sex: **M**
S2697452F

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 3500 kilograms

PASS DATE: **15 Oct 2003**

NP 426A

Licence No: **S2697452F**

5656638

APRIC No: **S2697452F**

Date of Issue: **04-10-2018**

Address: **APT BLK 765 CHOA CHU KANG NORTH 5 #04-317 SINGAPORE 680768**

INSURANCE CERT



Name of Policyholder : Bangale Sanjaykumar Laxmikant
Period of Insurance : 01 Oct 2018 To 30 Sep 2019
Engine No. : FB20YE38996
Chassis No. : JF1SJ5KC5JG112063

Vehicle No. : SME4959C
Policy No. : 1800117205
Endorsement No. :
Issued Date : 18 Oct 2018

Make/Model : SUBARU Forester 2.0i-L
Engine Capacity/Tonnage : 1,995.00 CC
Driver Restriction : NA
Person or Classes of Persons Entitled to Drive* :

Sum Insured : Market Value
Off Peak Car : No

First Year of Registration : 2018
Insuring with COE/PARF : Yes

a) The Policyholder
b) Any other person who is driving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

*You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition
Limitation as to use* :

This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1500cc - 1600cc

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 55 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

Section 1
Fire - \$0 Own Damage - \$800 Theft - \$0 Flood Cover - \$0

Section 2
Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)
Bangele Sanjaykumar Laxmikant - \$800 (Own Damage)

1. Motor Image Enterprises Pte Ltd. Add: 10 Lorong 8 Toa Payoh Singapore 310255 64170100

For other Approved Reporting Centres/AIG Authorised Repairs, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

Hire Purchase Company/Employer's Loan: MayBank

(We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).)

0500519235

TAN CHONG CREDIT SUBARU-TGX
911 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE
SINGAPORE 589622
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.
AUTHORISED REPRESENTATIVE

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Accident Photo



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