### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

**Date Of Driving Pass** 

**Driving Experience** 

Mobile Number

Fax Number
Contact Number

**EMail Address** 

Gender

- 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	08/05/2019 18:40
Date Of Accident	14/04/2019 15:00
Exact Location Of Accident	MAIN ORCHARD BLVD
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SCN8019K
Insured/Policyholder	
Name Of Registered Owner	CHIOK SIEW NEO HEDY
NRIC No	S0153219G
Email Address	SN.CHIOK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96791819
Alternative Phone No	OFFICE-96791819
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180 BLUE EFFICIENCY-1.6 (A)
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	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	2100316907-06
Cover Note Number	
Driver	
Name of Driver	CHIOK SIEW NEO HEDY
NRIC No	S0153219G
Date Of Birth	19/07/1952
Occupation	INDOOR

07/01/1971

**FEMALE** 

48 YEARS AND 3 MONTHS

(LOCAL) +65-96791819

SN.CHIOK@GMAIL.COM

OFFICE-96791819

162 CORONATION ROAD WEST Address

Postcode

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 NO COLLISION

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

NO

ambulance?

Was any other material or property damaged?

YES

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?

If Yes, Please state which Police Station

NO

Was notice of intended Prosecution given?

NO

If Yes, against whom?

**Circumstances of Accident** 

PLS REFER TO STATEMENT ATTACHED.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SMF3791U Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE HIRE Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

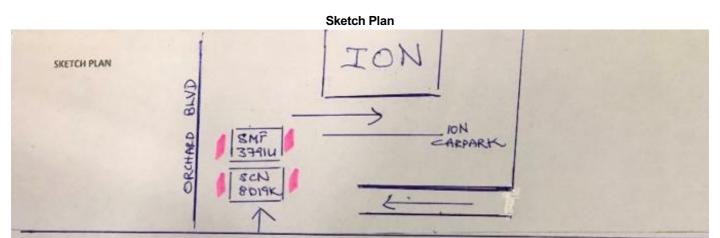
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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# DESCRIBE CIRCUMSTANCES OF THE ACCIDENT:

- (1) There was no accident involving the 2 cars (SMF 3791U and SCN8019K) on Sunday 14/4/2019. At 1500 hours (3pm) our 2 cars were inching our way into ION carpark so very slowly (almost bumper-to-bumper) as it was a long queue into the carpark (along main Orchard Blvd).
- (2) Car SMF 3791U did not move forward when all the other cars started moving . So my car just merely touched the bumper of SMF 3791U
- (3) We both (drivers) came out to take a look and found nothing wrong at all. We each took a video too of the bumper. We agreed on the spot then that all is OK.
- (4) We exchanged telephone numbers (he told me he is David). He then called his boss who insisted that David take a copy of my IC. Obviously I refused as we already agreed (with David) that there was absolutely no problem. I was kind absolutely no damage at all to the bumper (see video & picture attached to prove the fact).
- (5) That evening David called me again and told me he is a GRAB driver and his boss now insisted in making a claim. He said SMF3791U is a brand new car. I told David to send the car to the workshop (Leng Wang Motor @ Ubi) to confirm that no scratch or damage had happened (as agreed on the spot at ION Orchard in the afternoon).
- (6) In fact I also sent the video clip to Alice @ Leng Wang Motor who also saw nothing wrong with the back bumper. She was told to expect car SMF 3791U to turn up.
- (7) I strongly feel both driver David and his boss are unethical and dishonest in trying to make a claim when there is no
- (8) I only knew that these 2 men made the 3rd party claim when I received the Notice letter from LKK consultants on 2 May (after the public holiday).

DECLARATION

We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Onte & Tune

Driver's Signature

Driver's Signature

Iff driver is not the policyholder)

Reporting Centre Personne's Signature

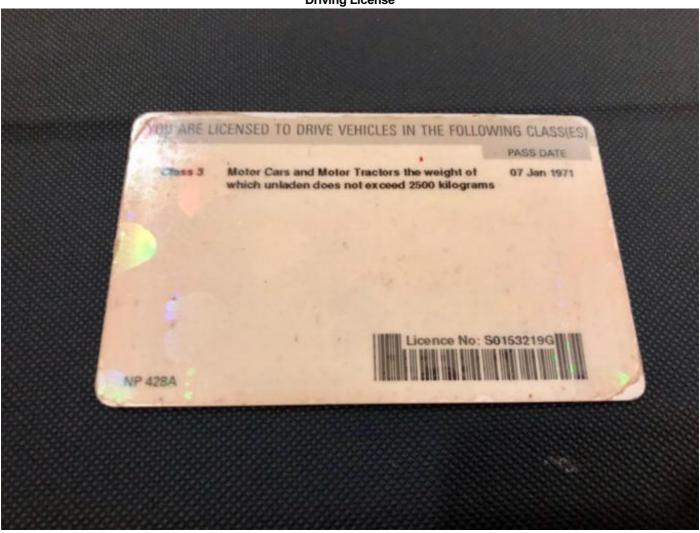
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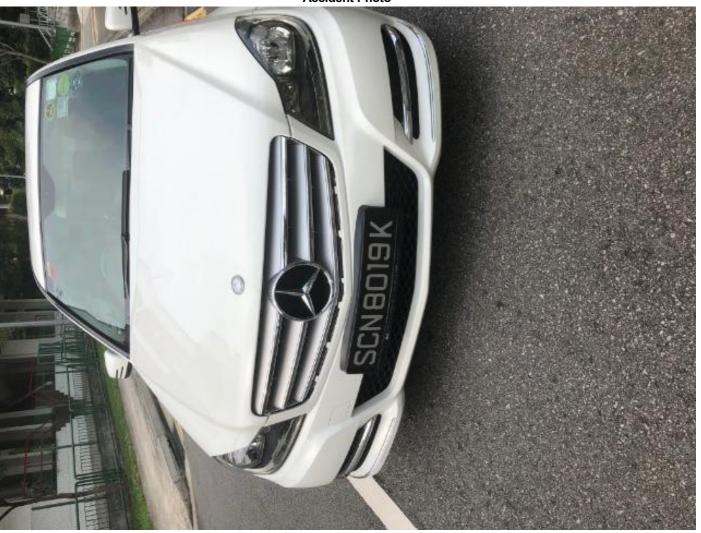
NAME/FIN No.:



### **Driving License**



## **Accident Photo**



### **Accident Photo**



# **Accident Photo**

