

## 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	04/05/2019 09:02
Date Of Accident	03/05/2019 14:25
Exact Location Of Accident	550B SEGAR ROAD
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGG3506T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ALVIN LIM ENG WAH
NRIC No	S2591929G
Email Address	ALVIN.E.LIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96814785
Alternative Phone No	Office-96814785
<b>Vehicle Particulars</b>	
Manufacturer	NISSAN
Model	X-TRAIL-2.0 (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100458650-03
Cover Note Number	
<b>Driver</b>	
Name of Driver	SEETO WAI KEE HEPHIZIBAH
NRIC No	S7138641D
Date Of Birth	12/10/1971
Occupation	INDOOR
Date Of Driving Pass	11/02/1997
Driving Experience	22 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-90184841
Fax Number	
Contact Number	OFFICE-90184841
E-Mail Address	WAIKEE.SEETO@GMAIL.COM
Address	624 SENJA RD #04-96
Postcode	670624
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG
Police Station Address	<b>ROAD:</b> 1 SEGAR ROAD , <b>POSTCODE:</b> 677738 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8929999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER ATTACH

#### 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	SLF3060H
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	MARK
NRIC/Passport Number	
Contact Number	96538407
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

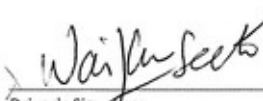
Vehicle No: SGG 3506T

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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) 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 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.
- (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.

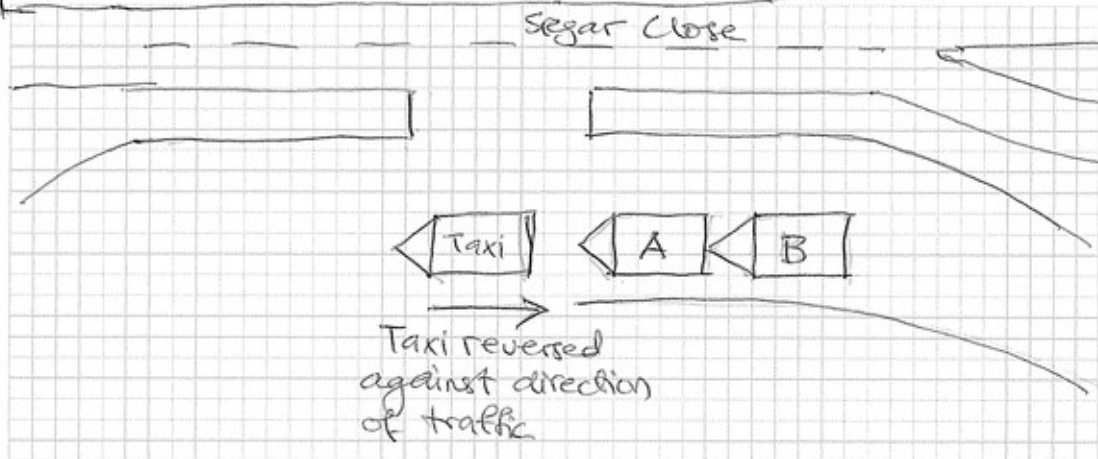
  
Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# SKETCH PLAN

WEST SPRING PRIMARY SCHOOL



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My Vehicle No (A): SGG 3506T.

Accident Location:	
Accident Date:	Time: am / pm
- Brief Details Of Accident -	
Taxi (SMRT) in front of me <del>sudden</del> stopped in front of me to alight passengers, then suddenly did an illegal reverse into me, causing me to panic and have to reverse, and into the car behind me.	
No video footage as the SD card was corrupted.	
- Other Vehicle Involve Details -	
(B) Veh No: <u>SLP3060H</u> Hp: <u>96538407</u> Pax: <u>1</u> Driver Name: <u>Mark</u>	
(C) Veh No: <u></u> Hp: <u></u> Pax: <u></u> Driver Name: <u></u>	

## DECLARATION

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

[Signature]  
Policyholder's Signature  
Date & Time:

[Signature]  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

[Signature]  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



CONFIDENTIAL

NOTICE OF COMPLIANCE

This is to inform that Mr / Ms SEETO WAI KEE HEPHZIBAH  
NRIC/FIN S7138641D, residing at Blk 624 SENJA ROAD #04-96 has reported to  
police a non-injury traffic accident which occurred at BLK 550B SEGAR ROAD  
SERVICE ROAD

on 03/05/2019 at 1423hrs hrs am/pm involving the following vehicles:

- I SGG3506T
- II SLF3060H
- III -
- IV -

2. If the accident was reported to Police within 24 hours of its accident occurrence,  
he/she therefore has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer : SGT(2) T140380 MUHD SIDDIQ  
Date : 03/05/2019  
Time : 1435 hrs  
S/D Ref : 67  
Police Post/Unit : Bukit Panjang NPC

**Bukit Panjang NPC**  
1 Segar Road #01-05  
Singapore 677738  
Tel : 6892 9999

Original – To be issued to informant  
Duplicate – To be retained at NPC or Police Post

Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



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