

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	20/04/2019 14:17
Date Of Accident	20/04/2019 10:40
Exact Location Of Accident	JUNCTION OF FIRST AND SECOND STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN1768X
Insured/Policyholder	
Name Of Registered Owner	HEE YAU KUAN
NRIC No	S7181125E
Email Address	KENNETHHEE@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81866311
Alternative Phone No	Office-81866311

Vehicle Particulars

Manufacturer	AUDI
Model	A6 1.8 TFSI ULTRA
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?	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	2100508221-02
Cover Note Number	

Driver

Name of Driver	HEE YAU KUAN
NRIC No	S7181125E
Date Of Birth	08/04/1971
Occupation	INDOOR
Date Of Driving Pass	31/01/2004
Driving Experience	15 YEARS AND 2 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-81866311
Fax Number	
Contact Number	OFFICE-81866311
E-Mail Address	KENNETHHEE@YAHOO.COM
Address	29 FIRST STREET SINGAPORE
Postcode	458299
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 - MAJOR/MINOR RD
Weather Conditions	RAINING
Road Surface	WET

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?	
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)	2
Passenger 1	Name: : Caitlyn Hee Gender: : Female

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

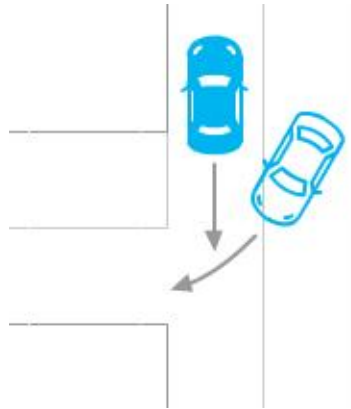
Circumstances Of Accident #tjunction, Accident_Scenario Reversing & Turning Right from opposite direction. Blue Car Sln1768x, White Car Gbc2955s. Accident_Description. Sln1768 x(me) was at junction of 1st and 2nd street. Seeing the on coming traffic from left. I decided to reverse. Split second after engaging reverse i hear a bump at the rear. Not entirely if i bump to stationary vehicle or the vehicle behind bumped into me. The driver of gbc 2955 claimed that he was stationary and has video clip. I have yet to receive the video clip. Equally unclear is why is he so near me if he was stationary. Minor scratch on my car headlamp crashed on gbc 2955s. The sketch above is not accurate. Gbc 2955s was behind me

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NO VIDEO FILE ATTACHED
Was there any audio recorded?	NO

Vehicle Registration Number	GBC2955S
Vehicle Make/Model/Colour	
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



Driver's Nric (Front)



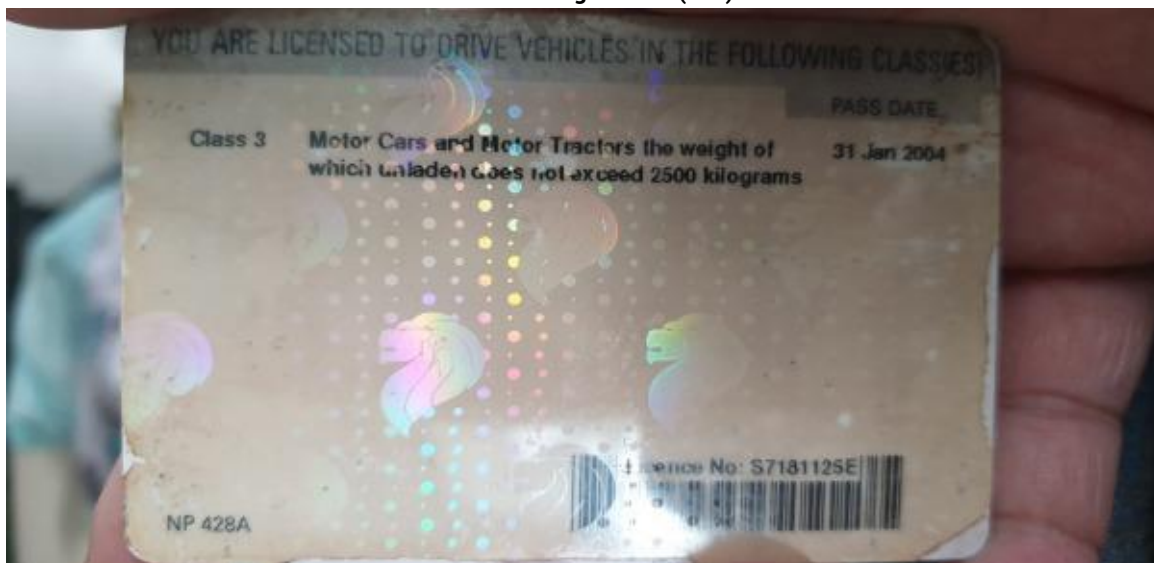
Driver's Nric (Back)



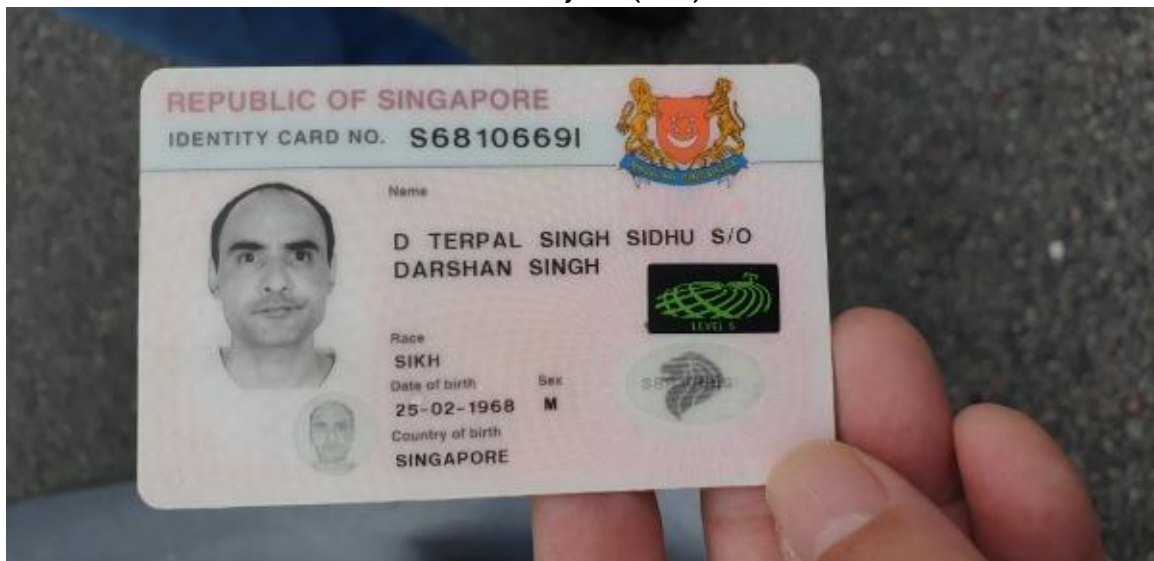
Driver's Driving License (Front)



Driver's Driving License (Bck)



Third Party Nric (Front)



Third Party Driving License (Front)

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S68106691**

Name:

**D TERPAL SINGH SIDHU S/O
DARSHAN SINGH**

Birth Date: **25 Feb 1968**

Issue Date: **29 Sep 2003**



000872231H

Accident Photo



Accident Photo



Accident Photo



Accident Photo

