

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	23/05/2019 10:51
Date Of Accident	23/05/2019 08:10
Exact Location Of Accident	ALONG MANDAI ROAD SLIP ROAD TO SEMBAWANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLX7233E
Insured/Policyholder	
Name Of Registered Owner	ROSZANAH BTE ABDOL LATIFF
NRIC No	S1551081A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91001008
Alternative Phone No	Office-91001008

Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL
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	1800032523-01
Cover Note Number	

Driver	
Name of Driver	MOHAMAD SAFAIE BIN MOHAMAD HUSSIN
NRIC No	S1548094G
Date Of Birth	06/01/1962
Occupation	INDOOR
Date Of Driving Pass	12/02/2000
Driving Experience	19 YEARS AND 3 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-91001008
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 159 JALAN TECK WHYE #01-141 SINGAPORE
Postcode	680159
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?	
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

#straightroad Moving straight & Moving straight Blue Car SLX7233E White Car SLL5498J While driving along the Mandai Road towards Sembawang front vehicle suddenly stop and I am unable to brake on time and hit the front car.

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	SLL5498J
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)

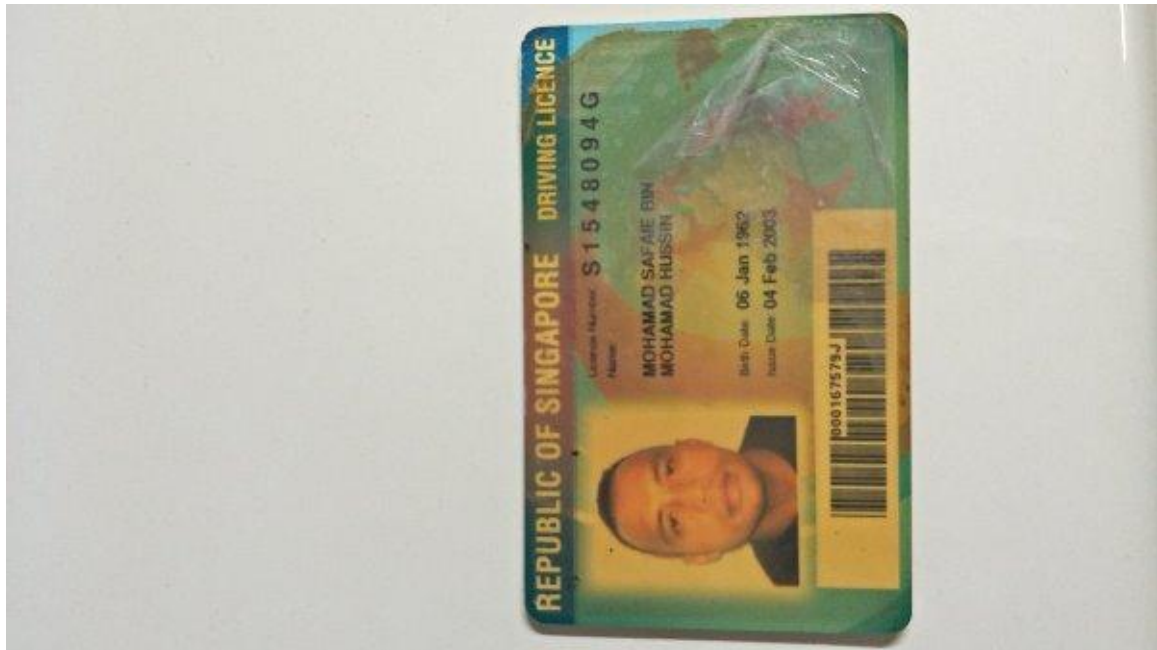
Sketch Plan



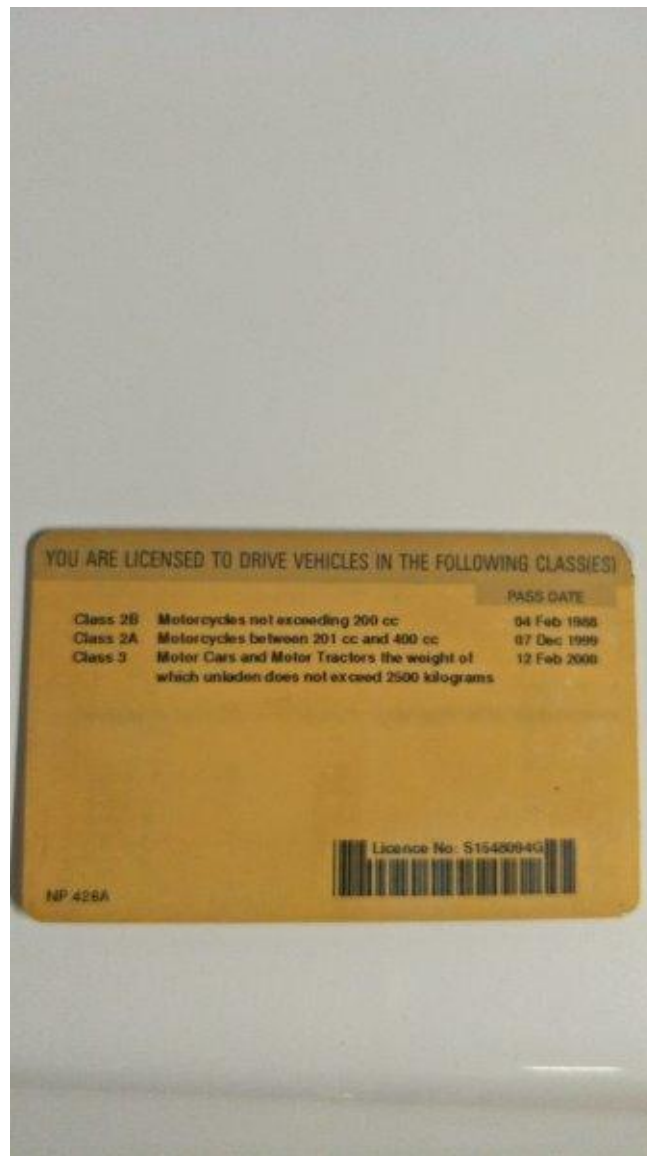
Accident Photo



Accident Photo



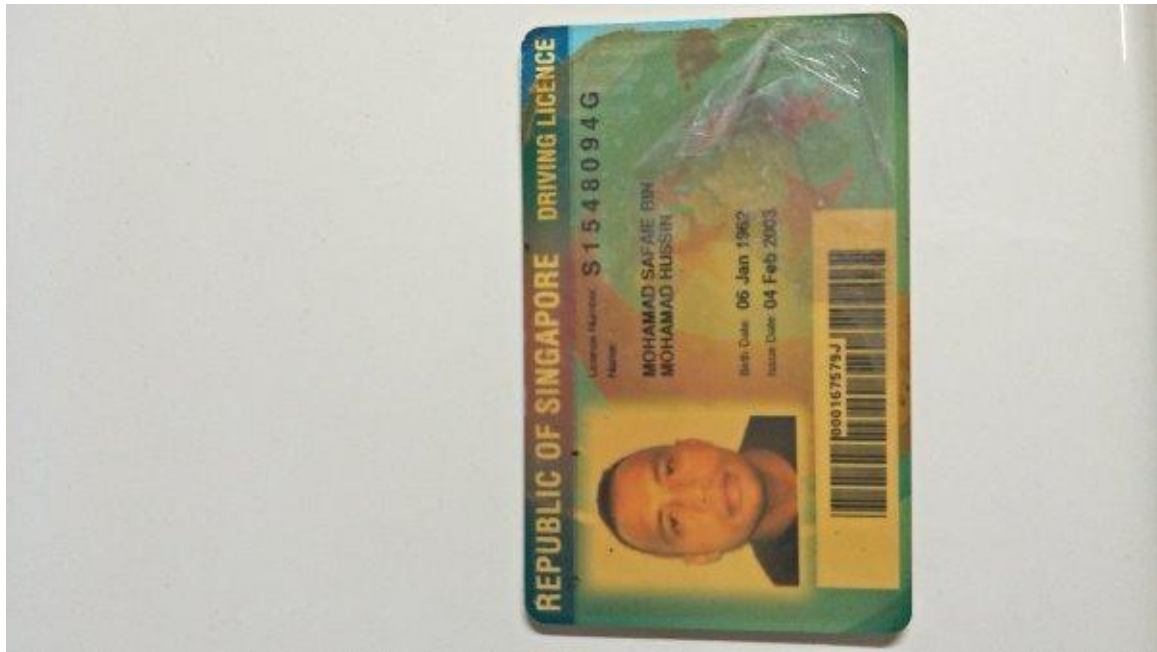
Accident Photo



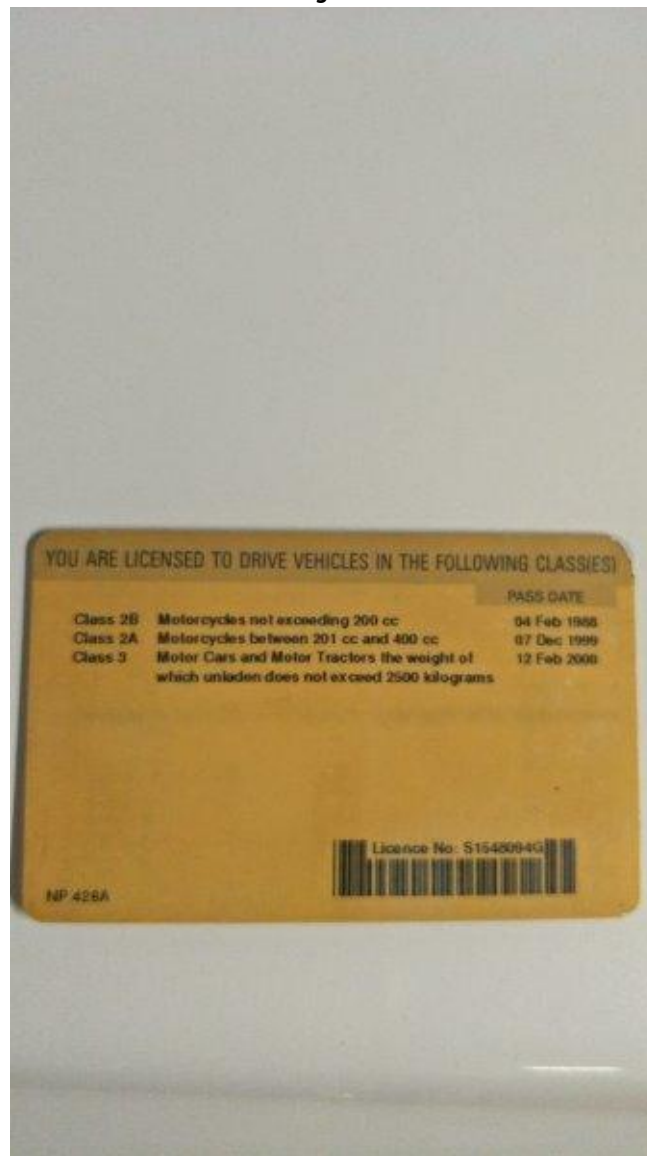
Accident Photo



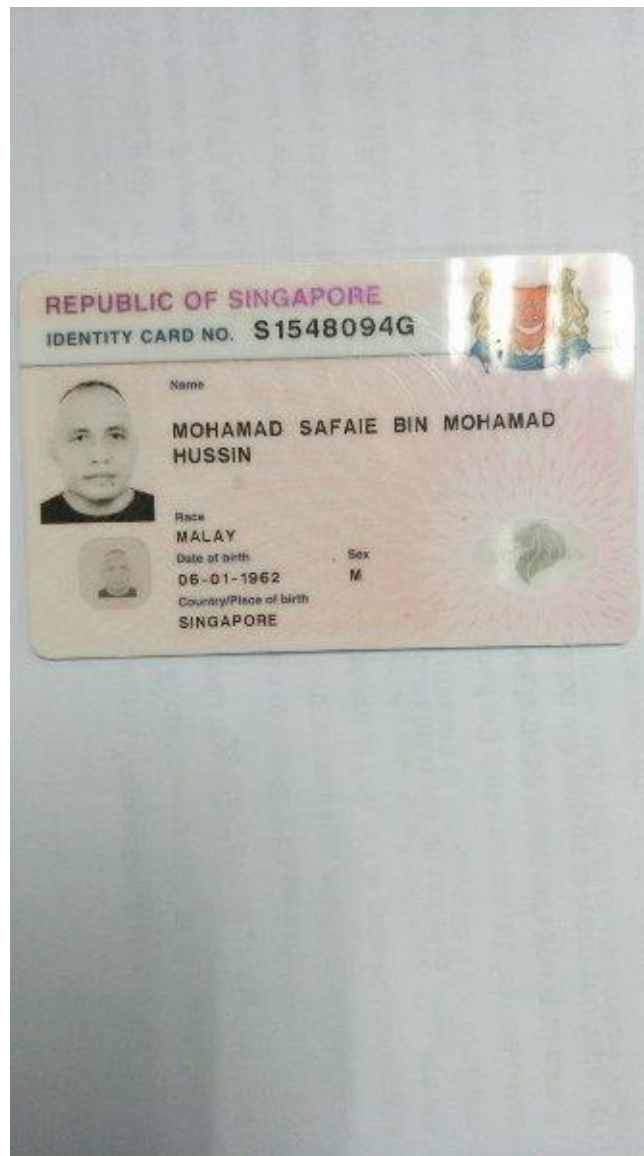
Driving License



Driving License



Identification Card



Identification Card

