

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	19/06/2019 09:16
Date Of Accident	25/05/2019 12:50
Exact Location Of Accident	BRADDELL RD JUNC. CTE TWDS LORNIE RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA6976K
Insured/Policyholder	
Name Of Registered Owner	EUROKARS LEASING PTE LTD
Co Reg No	199200636C
Email Address	MARNIKASSIM@EUROKARS.COM.SG
Mobile Phone No	
Alternative Phone No	Office-98262666

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	CARS FOR HIRE
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

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	NOEL JANE ALEXANDRA
NRIC No	S7788168I
Date Of Birth	17/07/1977
Occupation	INDOOR
Date Of Driving Pass	11/03/2011
Driving Experience	8 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-91507067
Fax Number	
Contact Number	
EMail Address	JANECXBORROW@MAC.COM
Address	14 JALAN HITAM MANIS
Postcode	278428
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

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 Witness 1

Name	MARY JANE APOSTLE ACOSTA
Phone Number	84305894
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDA5595P
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	MAX KUM CHEN
NRIC/Passport Number	S1585994F
Contact Number	91015595
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

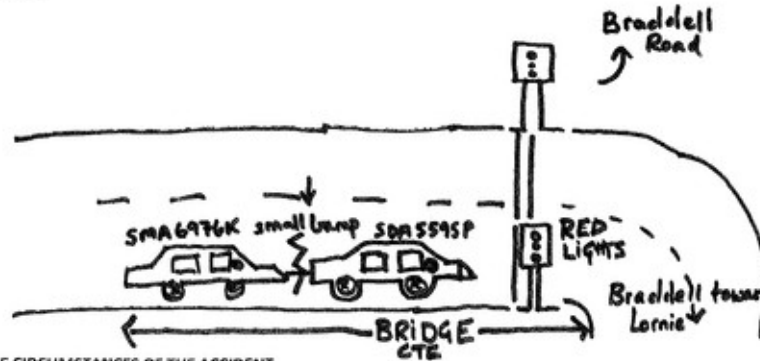
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

BOTH CARS STATIONARY AND STOPPED AT A TRAFFIC LIGHT WAITING TO THEN RIGHT ONTO BRADDELL ROAD TOWARDS LORNIE. MY CAR GENTLY ROLLED INTO THE BACK OF VEHICLE: SDA 5595P, AS I MUST OF LIGHTENED MY FOOT ON BRAKE PEDAL AS I REACHED FOR TISSUE INSIDE RIGHT DOOR BY MY SIDE. NO DAMAGE LIKELY DONE, BUT DRIVER OF CAR (ABOVE REGISTRATION) ASKED FOR MY NUMBER AND FOR REPAIRS TO BE MADE AT WORKSHOP DIRECT, NO INSURERS NECESSARY, WITH SCRATCHES AT THE BACK OF VEHICLE. THESE SCRATCHES LOOKED INCONSISTENT WITH NATURE OF A LIGHT ROLL BUMP.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S82780311



5694355



Name
ALEXANDRE JOSEPH RAOUL NOEL



Race
CAUCASIAN
Date of birth
21-09-1982
Sex
M
Country/place of birth
SOUTH AFRICA



Address
25 FENNYALE LANE
#02-33
SINGAPORE 797602

Date of issue
26-01-2017

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S77881681



91060339



Name
NOEL JANE ALEXANDRA



Race
CAUCASIAN
Date of birth
17-07-1977
Sex
F
Country of birth
MALAYSIA



Address
14 JILAN HATAM MANIS
SINGAPORE 770428

Date of issue
16-01-2013

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licensee's Number: S82780311

Name: ALEXANDRE JOSEPH RAOUL NOEL

Birth Date: 21 Sep 1982

Issue Date: 11 Jul 2017

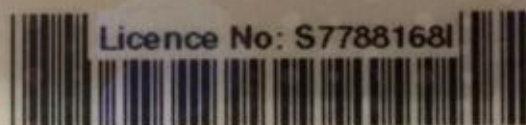
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YOU ARE LICENSED TO DRIVE VEHICLE IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars= \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg 11 Mar 2011

NP 428A



Licence No: S7788168I

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

