

## 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	27/06/2019 08:15
Date Of Accident	24/06/2019 20:40
Exact Location Of Accident	BEDOK RESERVOIR ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ9295A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	BIS MOTORING PTE LTD
Co Reg No	201735055D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96631987
Alternative Phone No	Office-96631987

### Vehicle Particulars

Manufacturer	OPEL
Model	ASTRA-1.4 HB (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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994322
Cover Note Number	

### Driver

Name of Driver	WONG ANN FEI
NRIC No	S7399081E
Date Of Birth	14/10/1973
Occupation	INDOOR
Date Of Driving Pass	29/04/2000
Driving Experience	19 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-96759292
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	APT BLK 220A BEDOK CENTRAL #15-54
Postcode	461220
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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?	NO
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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGG8586D
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

### IMPORTANT NOTICE

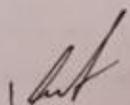
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8. **Consent under the Personal Data Protection Act (PDPA)**

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:

 96759292  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 25.6.19

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

Driving License

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S7399081E**



Name  
**WONG ANN FEI  
(WANG ANFEI)**  
王 峽 斐

Race  
**CHINESE**

Date of birth  
**14-10-1973**

Sex  
**M**

Country/Place of birth  
**MALAYSIA**



5200699



NRIC No. **S7399081E**



Date of issue  
**15-07-2013**

Address  
**APT BLK 220A BEDOK CENTRAL  
#15-54  
SINGAPORE 461220**

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number  
**S7399081E**

Name  
**WONG ANN FEI  
(WANG ANFEI)**

Birth Date  
**14 Oct 1973**

Issue Date  
**01 Apr 2014**



002290644K



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

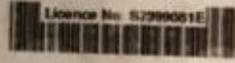
EFFECTIVE DATE

Class 3 Motor Cars < 2000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg

29 Apr 2000

NP 426A

Licence No. **S7399081E**



Land Transport Authority



**VOCATIONAL LICENCE**

Licence No : **S7399081E**  
Name : **WONG ANN FEI**

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
13	PRIVATE HIRE CAR VL	17/04/2019



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

