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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	22/07/2019 18:51
Date Of Accident	19/07/2019 08:40
Exact Location Of Accident	SUNTEC TOWER FIVE BASEMENT 2 CARPARK PARKING LOT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKK2120K
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	PAULLEE@GSENERGY.CO.KR
Mobile Phone No	(LOCAL) +65-93838742
Alternative Phone No	OFFICE-93838742
Vehicle Particulars	
Manufacturer	TOYOTA
Model	LEXUS ES250 EXECUTIVE A/T S/R
Exact Purpose for which vehicle was being used at time of accident	PARKING AT OFFICE BUILDING TO ATTEND FOR WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994316
Cover Note Number	
D.J	

Driver

Name of Driver LEE PAUL SUNGHOON

 NRIC No
 G3268386Q

 Date Of Birth
 24/09/1972

 Occupation
 INDOOR

 Date Of Driving Pass
 09/03/2017

Driving Experience 2 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93838742

Fax Number

Contact Number OTHERS-93838742

EMail Address PAULLEE@GSENERGY.CO.KR

21 NATHAN ROAD Address

#20-02

Postcode 248743

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

SIDE SWIPE Type Of Accident Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle) involved in the accident

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

PRIVATE CAR

Vehicle Registration Number SLN8256K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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NO

2

NO

NO

YES

NO

NO

Sketch Plan

SKETCH PLAN

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- 6. 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") mayare permitted to cellect, 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 in all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident half be collectively informed to as the Tesumers"), the insurers two yers/law firms, the Monetary Authority of Singapore and any relevant government agencylauthority (such as the police), for the purposets) of

il) processing handling and/or dealing with my citims including the settlement of the claims and any necessary investigations reliating to the claims.

(II) invistigating the accident and/or my claims:

(iii) carrying out another dealing with my instructions or responding to any enquines by me;

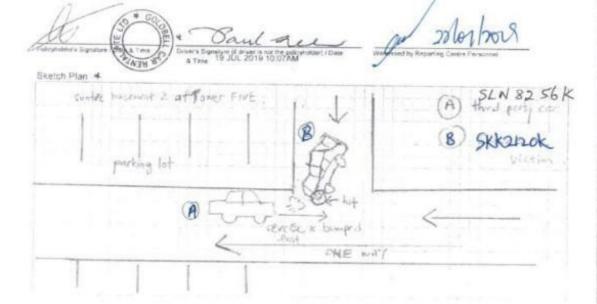
(or) administrating my claims (including the making of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain posserial data about me to bring about delivery of the same as wiell as on the external cover of envelopes/mail packages), and/or

(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 venicle(s) involved in this accident and the insurers lawyers faw firms, maylare permitted to collect use, disclose and/or process my Personal information for one or more of the above Purposes; and

(1) 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 after suitaide of Singapore, for one or more of the above Purposes./



Sketch Plan #2

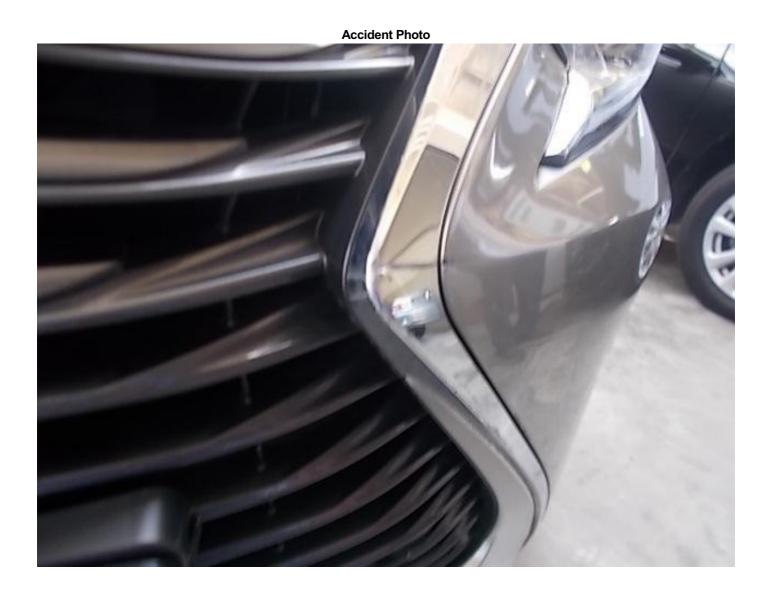
HE COLLISION	HAPPEN WHEN OUR CAR ABOUT TO TURN INTO ONE WAY PARTHWAY AT T-JUCTION.
THE THIRD PARTY REVERSE HER CAR AT HIGH SPEED AND BUMPED TO OUR CAR FRONT WHICH RESULT BASIC SKETCHES	
	TOF THE CARL
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active see see	mg paracounts are true in every respect.
1)	* GOLO
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4	10 x 2 121 21/07/101

















Identification Card





Identification Card





Identification Card



