

## 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	05/02/2020 11:21
Date Of Accident	16/08/2019 11:40
Exact Location Of Accident	MARINA BOULEVARD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGX5827P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOPAL ARIKRISHNAN
NRIC No	S8181585B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-99999999
Alternative Phone No	Office-92324159

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH MPV
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	1800105247-01
Cover Note Number	

### Driver

Name of Driver	GOPAL ARIKRISHNAN
NRIC No	S8181585B
Date Of Birth	04/05/1981
Occupation	INDOOR
Date Of Driving Pass	03/12/2018
Driving Experience	0 YEAR AND 8 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-99999999
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	272A JURONG WEST STREET 24 #11-82 SINGAPORE
Postcode	641272
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 - 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?	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

#straightroad Changing lane & Moving in own Lane sgx5827p skj908z Wsvc20000295 Accident\_Description on 16082019at about 11.40hrs i was driving my vehicle SGX5827P along marina gardens drive 3 lane 3rd and 2 nd lane turn left at the point of time there is a traffic light and i was driving at the extreme left lane and it is only meant to turn left. however i did not turn left and i continue go straight there was one vehicle SKJ908Z beside me and collided on to my vehicle while he was turning left. i alighted and made a check on my vehicle and discovered my front bumper was damaged there was no traffic police or ambulance at the scene .

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKJ908Z
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

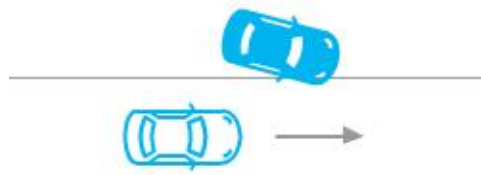
Postcode

Insurance Company Name

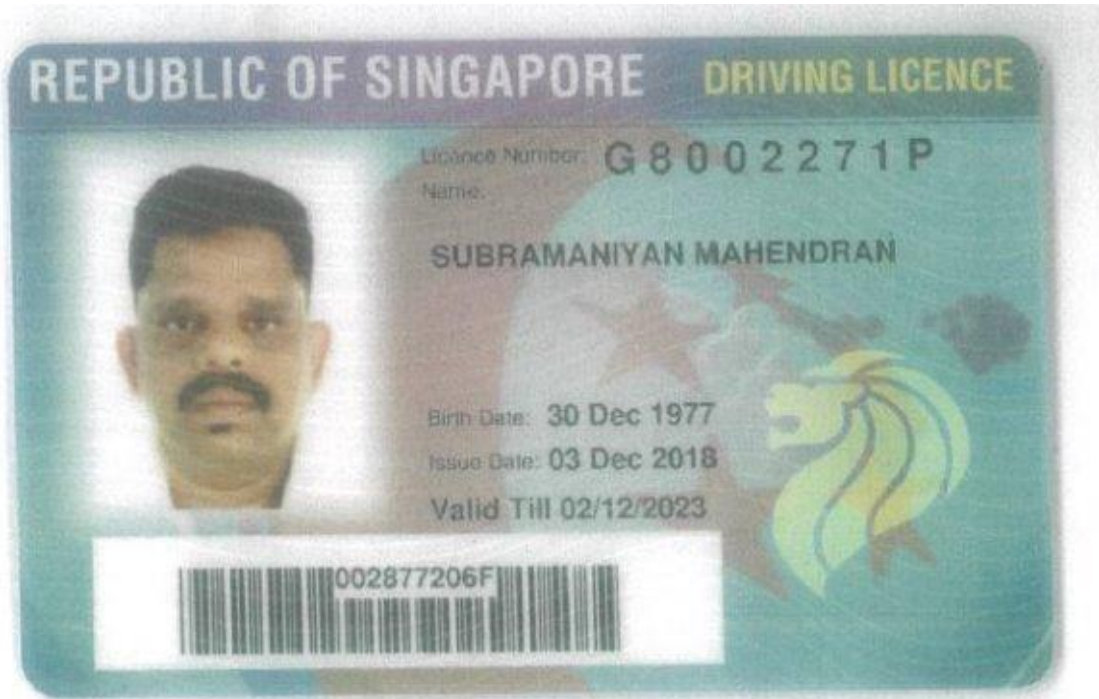
Nature Of Damage

No. Of Passenger (Including Driver)

### Sketch Plan



Driving License



Driving License



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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	03 Dec 2018
Class 3C	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver	03 Dec 2018



NP 428A

## Identification Card





**G8002271P**  
SUBRAMANIAN MAHENDRAN

**VALID**  
Scanned on 20 Aug 2018, 01:25PM

<b>Pass Type</b>	Work Permit
<b>Pass Expires On</b>	04 Aug 2019
<b>Employer</b>	A-STAR TECHNICAL SERVICES PTE. LTD.
<b>Occupation</b>	MARINE TRADES WORKER
<b>Sector</b>	Marine
<b>Date of Application</b>	12 Jun 2015
<b>Issued On</b>	05 Aug 2015
<b>Renewed On</b>	05 Aug 2018
<b>Multiple Journey Visa</b>	Issued
<b>Card Serial Number</b>	K0691261

Accured as of 20 Aug 2018, 12:00PM

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