SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver.</u>

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. **<u>Any false reporting may be referred to the Police for investigation.</u>**

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	04/09/2019 11:17
Date Of Accident	04/09/2019 07:20
Exact Location Of Accident	JUNCTION OF SENGKANG EASTWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLC4825C
Insured/Policyholder	
Name Of Registered Owner	TAN CHECK GUAN
NRIC No	S1824692I
Email Address	CGTAN168@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97573238
Alternative Phone No	Home-97573238
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ASX-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	NO
Policy Number	2100465514-03
Cover Note Number	
Driver	
Name of Driver	TAN CHECK GUAN
NRIC No	S1824692I
Date Of Birth	12/05/1967
Occupation	INDOOR
Date Of Driving Pass	06/12/1990
Driving Experience	28 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97573238
Fax Number	
Contact Number	HOME-97573238
EMail Address	CGTAN168@SINGNET.COM.SG
Address	BLK 143 RIVERVALE DRIVE #07-553 SINGAPORE
Postcode	540143
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?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	Name: : EUGENE TAN Gender: : Male

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

AS I WAS DRIVING ALONG JUNCTION OF SENGKANG EAST WAY AND TURNING RIGHT TO SENGKANG EAST DRIVE. THE CAR IN FRONT OF ME STOP, I APPLIED MY BRAKE BUT UNFORTUNATELY CANNOT STOP IN TIME.

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	SKN7115C
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver

NRIC/Passport Number   KONG FOH NYIN, ALEX
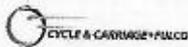
Contact Number   62419933

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

MOTOR ACCIDENT REPORT FORM

CYCLE & CARRIAGE·FULCO		

BASIC INFORMATION

Date of Report:	04/09/19	Time :	10:35
Date of Accident:	04/09/19	Time :	07:20
Exact Location of Accident:	JUNCTION CENGKANG EASTWAY		

DETAILS OF OWN VEHICLE

Vehicle Registration Number:	SLC 4825C	Name of Registered Owner :	TAN CHECK GUAN
NRIC/Passport No./FIN:	S1824692I	Company Reg. No(for Company Veh):	

VEHICLE PARTICULARS

Manufacturer :	MITSUBISHI	Model:	ASX
Exact Purpose for which vehicle was being use at time of Accident		☑ Normal Usage ☐ Others	
Are You Claiming Under Your Own Insurance ?		☑ YES ☐ NO Reporting Only	☐ NO 3rd Party
Vehicle Category	☑ Private car	☐ Commercial Vehicle ☐ Private Hire	

INSURURANCE DETAILS

Name of Insurance:	AIG
Type of Coverage:	☑ Comprehensive ☐ Third Party
Policy Number:	2100465519-03

Driver when the Accident Happen

Name of Driver:	TAN CHECK GUAN	NRIC/Passport/Fin No :	S18246925
Date of Birth:	12/05/1967	Occupation :	ENGINEER
Date of Driving Pass:	01/12/1990	Gender : ☑ Male ☐ Female	
Mobile No.:	99573738	Home No.:	
Address:	BLK K13 RIVERVALE DRIVE #07-553	Postal Code	540K13
Email Address :	cgtan168@singnet.com.sg		
Was the Driver an Employee of the Insured's Company :	☐ Yes ☑ No State the relationship of the driver to insured		OWNER
Vehicle Registration Number of driver's Own Vehicle:			
Insurace Company :			

OTHER INFORMATION OF THE ACCIDENT

Type of Accident :	HEAD TO REAR		
Weather Condition:	☑ Clear ☐ Raining	☐ Others, please specify	
Road Surface ☑ Dry	☐ Wet	☐ Others, please specify	
Was Anybody Injured:	☑ No	☐ Yes	
Was Any other material or Property Damaged:	☑ Yes ☐ No	Number of Passengers(Including Driver) :	2
Any Accident Photo In the Scene of Accident:	☑ Yes ☐ No	Was there any video captured by your Camera? :	NO
Was the Accident reported to police:	☐ Yes ☑ No	Was there any audio recording? :	NO
Which Police Station:			
Was notice of Intended Prosecution given :			

DETAILS OF OTHER VEHICLE (Please fill Annex A if more vehicles involve)

Vehicle Registration Number:	SKN7115C	Name of Registered Owner :	
NRIC/Passport No./FIN:		Company Reg. No(for Company Veh):	
Name of Driver :	KONG FOH NYIN, ALEX	NRIC/Passport/Fin No :	
Mobile No.:		Home No.:	6241 9933
Address:		Postal Code	
Email Address :			
Insurace Company :			

Details of Passenger if any

Passenger Name:	EUGENE TAN
Contact Number:	9666 7713
Gender	MALE

Details of Injured Person

| Name :	Age :
Address	
Injured Sustained :	Injured Person in which vehicle:
Were Seatbelts worn:	☐ Yes ☐ No
Were Injured Convey to Hospital by Ambulance:	☐ Yes ☐ No

cb 042012

Sketch Plan #2

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.
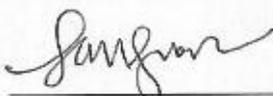
Policyholder's Signature
Date & Time: 4|9|19 11·05 AM.

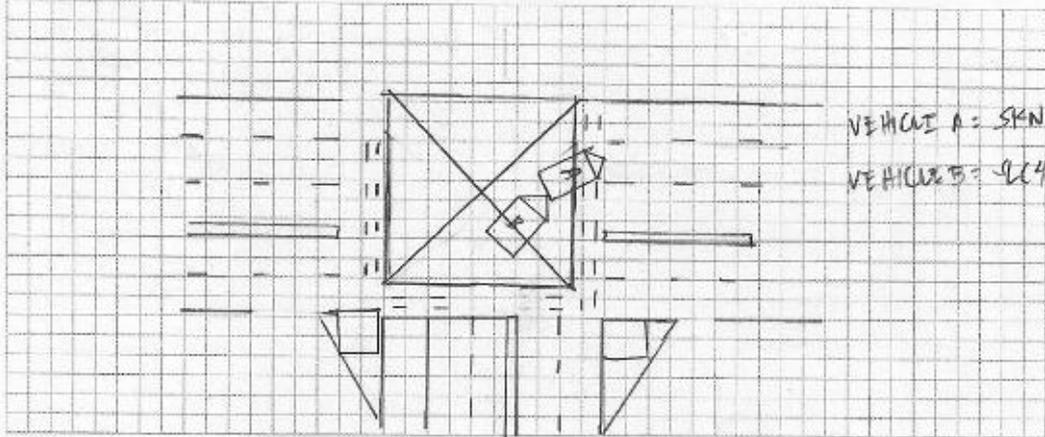Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

GIARMC SketchPlanForm_V3

Sketch Plan #3

SKETCH PLAN

VEHICLE A = SKN 711SC

VEHICLE B = 114825C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As I was driving along the Junction of Sengkang East way and turning right to Sengkang East Drive. The car in front of me stop, I applied my brake but unfortunely cannot stop in time.

DECLARATION

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

Policyholder's Signature

Date & Time: 4/9/19 11.05AM

GIARMC SketchPlanForm_V3

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

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

SERVICE

2

Accident Photo

Accident Photo

Accident Photo