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.	by consent to the archiving of this report at the centre and to copies of the report being made available	
	ACCIDENT STATEMENT	
Date Of Report	20/09/2019 13:59	
Date Of Accident	19/09/2019 17:20	
Exact Location Of Accident	JUNCTION OF IRRAWANDY RD & BALESTIER RD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SFE26D	
Insured/Policyholder		
Name Of Registered Owner	LEE CHEOW YEW JULIAN	
NRIC No	S1811026A	
Email Address	DOCSINUS@SINGNET.COM.SG	
Mobile Phone No	(LOCAL) +65-97209820	
Alternative Phone No	OFFICE-97209820	
Vehicle Particulars		

Manufacturer AUDI

Model A5 SPORTBACK 2.0 TFS

Exact Purpose for which vehicle was being used at

time of accident

PRIVATE USE

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 1800156747

Cover Note Number

Driver

Name of Driver VIVIAN TEO EE LING

 NRIC No
 \$1795287J

 Date Of Birth
 13/04/1967

 Occupation
 INDOOR

 Date Of Driving Pass
 27/09/1986

Driving Experience 32 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-94680600 Fax Number (LOCAL) +65-94680600

Contact Number

EMail Address VIVTEO@SINGNET.COM.SG

Address 3 JALAN HAJIJAH

#03-05

Postcode 468698

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
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

NO

YES

NO

NO

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) 2

Passenger 1

ambulance?

NAME: : JULIAN LEE

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

THE ACCIDENT HAPPENED AT THE JUNCTION OF IRRAWANDY ROAD AND BALESTIER ROAD AT APPROX 5.20PM 19 SEP 2019. I WAS DRIVING ON IRRAWANDY ROAD, QUEUEING TO TURN ONTO BALESTIER RD, I MOVED SLOWLY FORWARD AND CHECKED THAT TRAFFIC WAS CLEAR BEFORE TURNING ONTO OUTERMOST RIGHT LANE OF BALESTIER RD AND SUDDENLY A CAR DRIVING VERY FAST, HIT INTO MY CAR

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLR2809J

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

SKETCH PLAN

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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 interested parties.
- By the lodgment 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.
- 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:
 - 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

12040197X

Name: Tory Fory

NRIC/FIN No.:

Sketch Plan #2

ESCRIBE CIRCUMSTANCES OF THE ACCIDENT The accident happened at the junction of Irrawaddy Road and Balestier Road at approx. 5.20 pm 19 Sep 2019. I was driving on Irrawaddy road, quenty to turn Ento Balestier Rd. I moved slowly flowered and checked that traffic was clear before turning anto outer most right lane of Balestier Rd and suddenly a har driving very fast, hit into my car.			
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ento Balestier Rd. I moved slowly forward and checked that traffic was clear before turning anto outer most right lane of Balestier Rd and suddenly a har driving very fast, hit into my	ESCRIBE CIRCUMSTANCES OF T	HE ACCIDENT	
	ento Balestie chected that anto outern anddenly d	on Irrawaddy road, of how that I moved slow traffic was clear out right lane of Ballar driving very fast	mental to turn by forward and before turning lection Rd and t, hit into my

Policyholder's Signature Date & Time:

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

GIARMC SketchPlanForm_V3

Reporting Centre Personnel's Signature
Name: 1944 Favg

Name: Toy Forg NRIC/FIN NO.: 670401 47A































