

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	10/10/2019 16:42
Date Of Accident	09/10/2019 20:00
Exact Location Of Accident	STRAITS BLVD TOWARDS MAXWELL ROAD AT THE TRAFFIC L
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SGN1198A
Insured/Policyholder	
Name Of Registered Owner	KOH YIAK TEE
NRIC No	S1771263B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97851518
Alternative Phone No	Office-67865111

Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	BENZ E250 SEDAN AVANTGARDE
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	1800150484
Cover Note Number	

Driver	
Name of Driver	KOH YIAK TEE
NRIC No	S1771263B
Date Of Birth	20/03/1966
Occupation	INDOOR
Date Of Driving Pass	01/10/2003
Driving Experience	16 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-97851518
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	37 SIMEI RISE #01-14 SINGAPORE
Postcode	528782
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	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 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: : or ting chi gigi Gender: : Female

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

#xJunction Turning into Main Road & Moving Straight Ahead SGN1198A SLG3712E WSVC19002087 Accident_Description
Both Car stop at the traffic lights cross junctions. When traffic lights turn green the other car turning left while I move straights but I have driven too much to the left and swipe through the side of the turning car.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO NOT PROVIDED
Was there any audio recorded?	NO

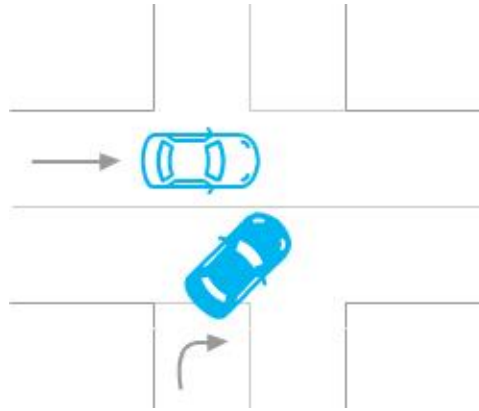
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLG3712E
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



Accident Photo



Accident Photo





Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

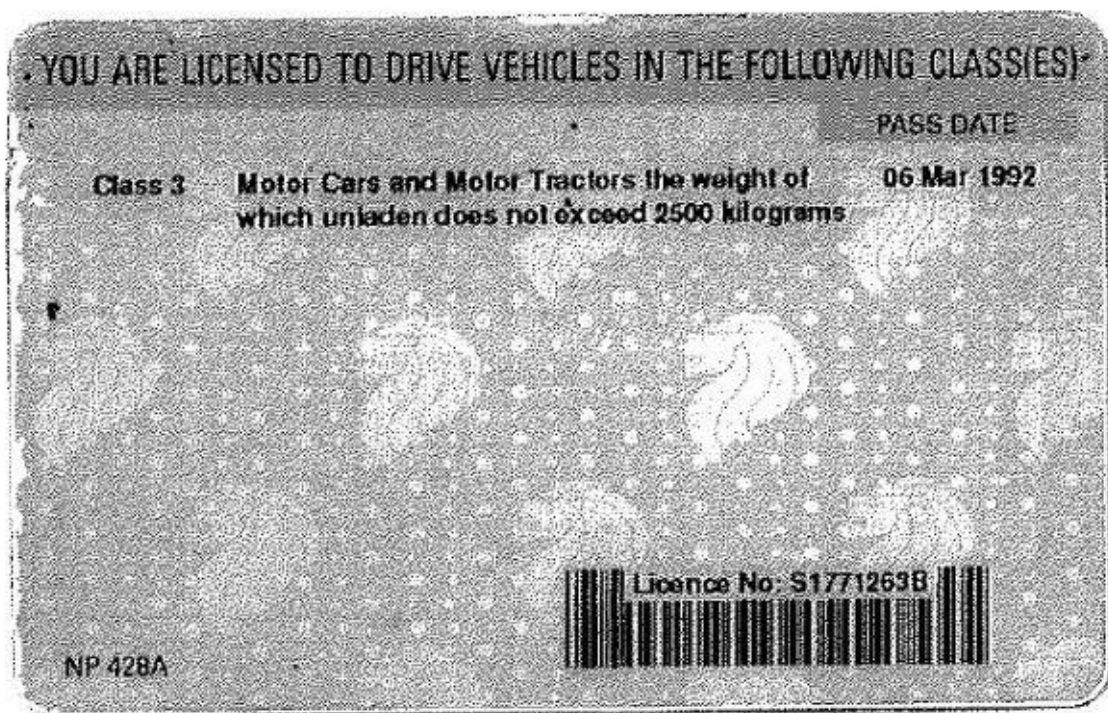
Licence Number: **S 1771263B**
Name:
KOH YIAK TEE

Birth Date: **20 Mar 1966**
Issue Date: **01 Oct 2003**



 000880454B

Driving License



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1771263B



Name

KOH YIAK TEE

Race

CHINESE

Date of birth

20-03-1966

Sex

M

S1771263B

Country/Place of birth

SINGAPORE



Identification Card

5225896



NRIC No. S1771263B



Date of Issue

03-10-2013

Address

37 SIMEL RISE
#01-14
SINGAPORE 528782