

## 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	16/10/2019 16:52
Date Of Accident	14/10/2019 13:55
Exact Location Of Accident	SEBANG ROAD (INTERSECTION WITH YISHUN AVE 3)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT3023D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	ANGPJ89@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82281700
Alternative Phone No	OFFICE-82281700

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	

### Driver

Name of Driver	ANG PHON JING
NRIC No	S8980040D
Date Of Birth	14/07/1989
Occupation	OUTDOOR
Date Of Driving Pass	19/02/2014
Driving Experience	5 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82281700
Fax Number	
Contact Number	OTHERS-82281700
Email Address	ANGPJ89@GMAIL.COM

Address	BLK 514 WOODLANDS DRIVE 14 #06-119
Postcode	730514
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

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?	NO
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)	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

PLEASE REFER TO SKETCH PLAN

#### 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	SMJ7126T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TEO WEN SHUEN
NRIC/Passport Number	S7901871F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Sketch Plan

## SKETCH PLAN

### 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 willful misrepresentation or withholding of material facts may allow insurance companies to reassess 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 Traffic Police Department for investigation.
  6. This report will be forwarded by the insurers to 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.
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' law yer/s 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 of 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' law yer/s 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 law yer/s law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature: *[Signature]* Date: *14/10/19*

Driver's Signature (if driver is not the policyholder): *[Signature]* Date: *16/10/2019*

Witnessed by Reporting Centre Personnel: *[Signature]*

Sketch Plan: *TRAFFIC LIGHT JUNCTION*

*SK7 3023D*  
*B) SMJ 71267*

*SMJ 71267*  
*SK7 3023D*

*VAN*  
*BENZ*

Lane: *(4)* *(3)* *(2)* *(1)*

*SUMBAWANG ROAD INTERSECTION WITH YONGE AVENUE*

## Sketch Plan #2

Describe Circumstance of the Accident \*

I was driving my vehicle on Sembawang Road, from Mando, Ave towards Gombas Ave. Collision happened at traffic light junction where Sembawang Road and Yishun Ave 3 meet. Weather was clear and road condition was dry.


My vehicle was on lane 2 at the traffic light junction. In front of my vehicle was a van that was waiting to turn right. As I intended to go straight, I put on the left turn direction/signal indicator and waited for traffic clearance before switching my vehicle to lane 3.


Upon confirming that traffic was safe on lane 3 with my side mirror and back mirror, I proceeded to switch from lane 2 to lane 3. When my lane-switch was almost completed, my vehicle was collided by a Hyundai-branded vehicle that switched from lane 4 to lane 3 abruptly, without turning on direction/signal indicator.

On lane 3, my vehicle was hit at the left front part, while Hyundai branded vehicle was damaged at its right rear passenger door. Hyundai's driver and I then alighted and confirmed that both parties did not sustain any injury. We then agreed to move our vehicle to the left side of the road, to minimize traffic disruption while we assessed damage of our vehicles.

### Declaration

(We declare the foregoing particulars are true in every respect.)

Policyholder's Signature /  

Driver's Signature (if driver is not the policyholder) / Date & Time  
 14/10/19

Witnessed by Reporting Centre Personnel  


Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo

