

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	02/12/2019 21:27
Date Of Accident	17/10/2019 12:15
Exact Location Of Accident	JOHOR BAHRU CUSTOM
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW8331R
Insured/Policyholder	
Name Of Registered Owner	GAN TING ENG
NRIC No	S2755227G
Email Address	JANICEKHOOMY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98159757
Alternative Phone No	Office-98159757

Vehicle Particulars

Manufacturer	NISSAN
Model	TEANA 2.0 PREMIUM
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	2100430565-04
Cover Note Number	

Driver

Name of Driver	GAN TING ENG
NRIC No	S2755227G
Date Of Birth	15/01/1960
Occupation	INDOOR
Date Of Driving Pass	13/10/2014
Driving Experience	5 YEARS AND 0 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98159757
Fax Number	
Contact Number	
E-Mail Address	JANICEKHOOMY@GMAIL.COM
Address	3 ROSEWOOD DRIVE #10-05 SINGAPORE
Postcode	737935
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?	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

Circumstances Of Accident #straightroad Accident_Scenario Moving out from Stationary position & Moving straight Blue Car SKM8111L White Car SKW8331R The accident took place at the Johor Bahru customs. I had cleared the custom immigration checks and was moving straight ahead in my lane. The claimant's vehicle SKW8111L subsequently came from the left and collided into the side of my vehicle. The photograph evidence would reveal that my car had already passed over his vehicle by at least one-third of the car body. His car (right) bumper had rubbed against the left doors of my vehicle. I wish to emphasise that the collision was very minor. It had only resulted in a minor scratch on my car (which was almost unnoticeable). As there was no serious damage to my car I did not fill a claim against him. In fact I do not believe that his collision to my vehicle would have caused any major damage (if at all) to his vehicle. If anything my car would have suffered a more serious damage than his car since the panel of my car is much softer than his bumper. In any event I do not think that I am at fault since I was on the straight road and he was coming from the left and had collided into me. For the sake of clarity I wish to add that I did not file a claim against him as the damage to my car was very minor. I also wish to add that I did not take a photo of the accident as we were within the custom premises and photo taking was not allowed. For the reasons set out above I do not expect his bumper to have suffered any damage and even if there was any damage I should not be made liable for the same.

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 SKM8111L

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

