

## 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	18/10/2019 15:01
Date Of Accident	18/10/2019 07:20
Exact Location Of Accident	LORONG KISMIS (OUTSIDE BUKIT TIMAH PRI SCH)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA575Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SERENE CHING LI-LING
NRIC No	S7341673F
Email Address	TIGGSKAM@YAHOO.COM
Mobile Phone No	(LOCAL) +65-97338723
Alternative Phone No	HOME-64081519

### Vehicle Particulars

Manufacturer	AUDI
Model	Q5 SPORT 2.0 TFSI QU
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	1800057221
Cover Note Number	

### Driver

Name of Driver	SERENE CHING LI-LING
NRIC No	S7341673F
Date Of Birth	04/11/1973
Occupation	INDOOR
Date Of Driving Pass	06/01/1995
Driving Experience	24 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97338723
Fax Number	
Contact Number	HOME-64081519
EMail Address	TIGGSKAM@YAHOO.COM

Address	159 LORONG KISMIS
Postcode	598082
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?	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)	3
Passenger 1	NAME: : RACHEL KAM GENDER: : FEMALE
Passenger 2	NAME: : REBECCA KAM 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

0720AM DRIVING ALONG LORONG KISMIS (TOWARDS ENG KONG), JUST BEFORE BT TIMAH PRI SCHOOL (ON THE LEFT). CARS LINING UP TO TURN LEFT INTO BTPS IN FRONT OF MY CAR. TRAFFIC IN SINGLE LANE (BOTH WAYS) IN OPPOSITE DIRECTION HELD TO A STOP BY SECURITY GUARD. AS THE CAR IN FRONT OF ME IS STARTING TO TURN LEFT INTO THE SCHOOL, I MOVED MY CAR TOWARDS THE RIGHT TO PREPARE TO DRIVE STRAIGHT FORWARD ALONG LORONG KISMIS. I WAS CONCENTRATING ON ENSURING THAT I WAS A SAFE DISTANCE TO THE CAR IN FRONT OF ME, AND AT THE SAME TIME ENSURING THAT I WAS NOT AFFECTING ANY ONCOMING VEHICLES IN THE OPPOSITE DIRECTION. WHEN A CAR (SLS 4727 T) APPEARED FROM BEHIND, DRIVING AGAINST THE DIRECTION OF TRAFFIC, CAUSING THE COLLISION TO OCCUR.

#### 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	SLS4727T
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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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:

18/10/2019

Driver's Signature

(if driver is not the policyholder)

Date & Time

Reporting Centre Personnel's Signature

Name:

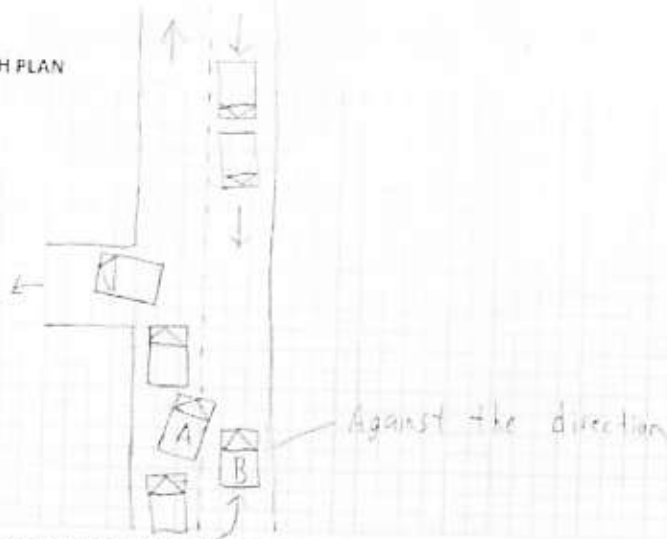
PRICERIN No:

0750431874



# Sketch Plan #2

## SKETCH PLAN



A: SMA5752

B: SLS4727T

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

0720 am

Driving along Lorong Kemis (towards Eng Kong), just before  
 67 Timah Pri school (on the left) cars lining up to turn  
 left into BTPS in front of my car. Traffic in single lane (both  
 ways) in opposite direction held to a stop by school security  
 guard. As the car in front of me is starting to turn left  
 into the school, I moved my car towards the right to  
 prepare to drive straight forward along Lorong Kemis.  
 I was concentrating on ensuring that I was a safe distance  
 to the car in front of me, and at the same time ensuring  
 that I was not affecting any oncoming vehicles in the  
 opposite direction, when a car (SLS4727T) appeared from behind  
 driving against the direction of traffic, causing the collision  
 to occur.

## DECLARATION

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

Policyholder's Signature

Date & Time: 15/10/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time



Reporting Centre Personnel's Signature

Name: Eng Kong

NRIC/IN No: 67041811