

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	07/11/2019 16:53
Date Of Accident	05/11/2019 07:45
Exact Location Of Accident	BKE TOWARDS KJE AFTER EXIT 5
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC4485T
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	KHODA25@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90697104
Alternative Phone No	OFFICE-90697104

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994313
Cover Note Number	

Driver

Name of Driver	ANAMALAI ARUNKUMAR
NRIC No	G6082134N
Date Of Birth	15/10/1984
Occupation	OUTDOOR
Date Of Driving Pass	18/12/2008
Driving Experience	10 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90697104
Fax Number	
Contact Number	OTHERS-90697104
Email Address	KHODA25@GMAIL.COM

Address	BLK 581 WOODLANDS DRIVE 16 #07-486
Postcode	730581
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	CHAIN COLLISION
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	3
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	SMC9609R
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMK6345D
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle CategoryPRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

[illegible]

[Signature]
 Professor of Economics
 University of California, Berkeley

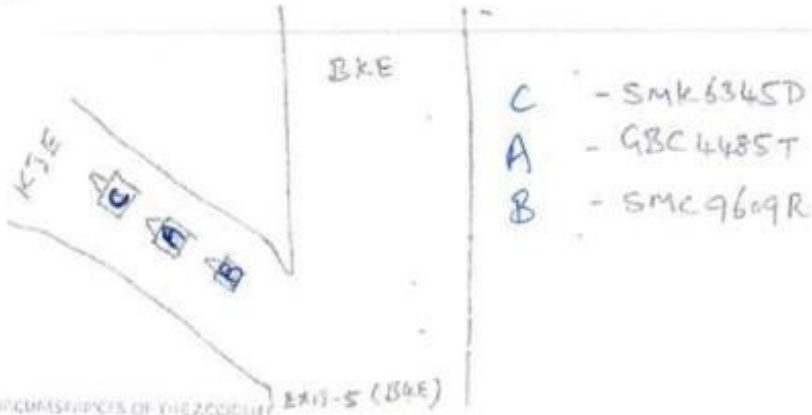


07/11/19

02/11/2019

Sketch Plan #2

SKETCH PLAN



RECORD OF CIRCUMSTANCES OF THE ACCIDENT

ON THE 5 NOV 2019 ABOUT 7:45 AM I WAS DRIVING THE VAN GBC 4485T ALONG THE BKE TO KJE THROUGH EXIT 5 CAR SMK 634SD WAS IN FRONT OF ME APPLIED STAPPED BRAKE AND STOPPED THE CAR. SINCE I WAS 6M AWAY. BBHIND BEN CAR I MANAGED TO APPLY THE BRAKE AND STOPPED MY VAN. BUT THE CAR BEHIND ME SMC 9609R HIT MY VAN AT REAR SIDE AND MY VAN MOVED AND HIT THE CAR (SMK 634SD) IN FRONT OF ME AND CAUSED DAMAGE TO THE CAR REAR BUMPER. IN MY VAN REAR SIDE DENT HAPPENED SINCE THE CAR. SMC 9609R.

DECLARATION

I hereby declare that the above information is true and correct to the best of my knowledge.



Signature of the driver
Date: 07/11/19

Signature of the witness
Date: 07/11/19

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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