

## 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	18/12/2019 09:43
Date Of Accident	08/12/2019 20:30
Exact Location Of Accident	JALAN STULANG DARAT. JB
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDU7789D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LIM FEOK LOONG
NRIC No	S1267629H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97607789
Alternative Phone No	Office-64567381

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	BENZ C180 SEDAN AVANTGARDE / EXCLUSIVE
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	1900152468
Cover Note Number	

### Driver

Name of Driver	LIM FEOK LOONG
NRIC No	S1267629H
Date Of Birth	17/06/1957
Occupation	INDOOR
Date Of Driving Pass	19/10/1976
Driving Experience	43 YEARS AND 1 MONTH

Gender	MALE
Mobile Number	(LOCAL) +65-97607789
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	250 BISHAN STREET 22 #02-380 SINGAPORE
Postcode	570250
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)	2
Passenger 1	Name: : Lim Soh Keow 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

I was driving along Jalan Stulang Darat towards JB checkpoint on 8th December 2019 at around 8.30pm . There was a massive jam. There were 2 queues . The queue I was following came to a halt but the vehicles on my right started moving. So this vehicle (SLF 9893G) on my right moved and knocked into my right front bumper.

#### Attachment(s)

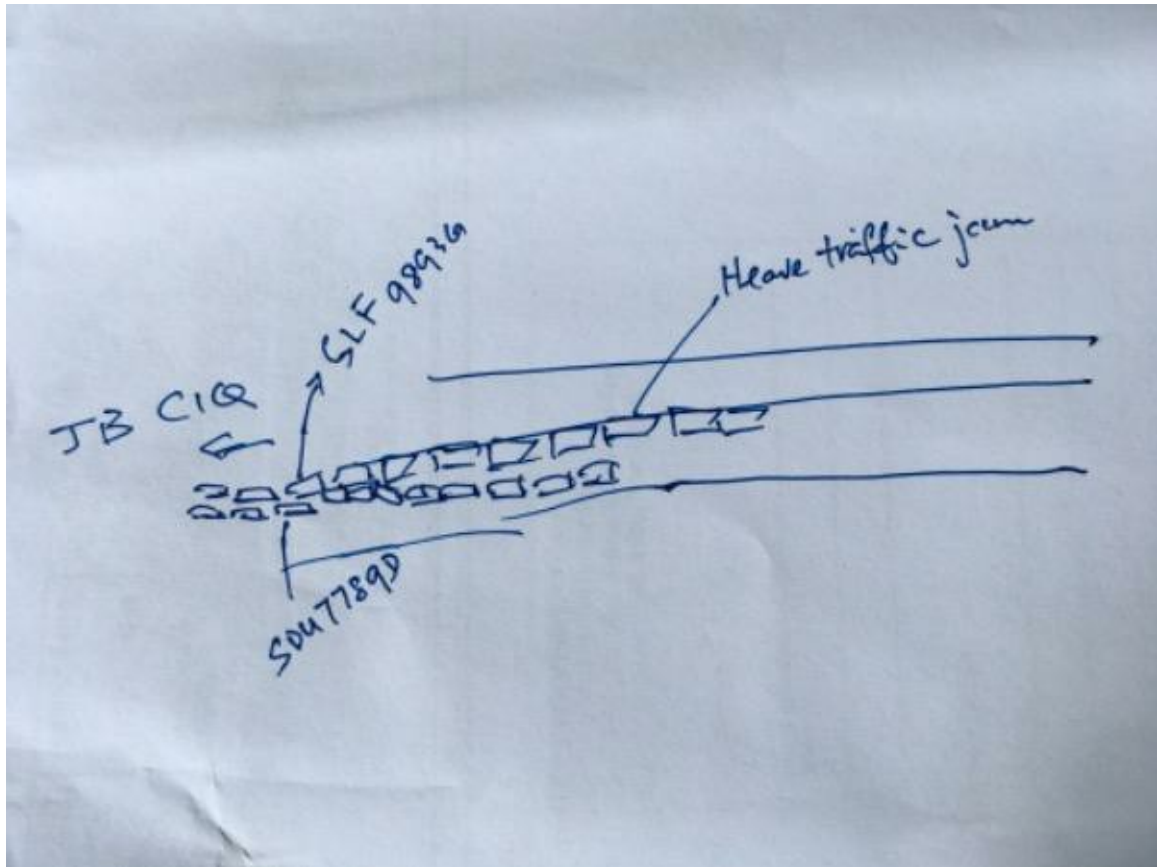
Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLF9893G
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



Identification Card

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S1267629H**



 Name  
**LIM FEOK LOONG**  
**林 福 隆**

 Race  
**CHINESE**

Date of birth  
**17-06-1957**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**



Identification Card



Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S 1267629H**  
Name: **LIM FEOK LOONG**

Birth Date: **17 Jun 1957**  
Issue Date: **19 Aug 2003**



 **000756682A**

Driving License

