

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	19/12/2019 16:01
Date Of Accident	18/12/2019 12:15
Exact Location Of Accident	CTE TOWARDS SLE (CHIN SWEE ROAD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
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Vehicle Registration Number	GBH307A
Insured/Policyholder	
Name Of Registered Owner	CENTRAL MASTER IMPORT & EXPORT PTE LTD
Co Reg No	198004292H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91114411
Alternative Phone No	Office-90096125

Vehicle Particulars	
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Manufacturer	NISSAN
Model	NV350 PANEL VAN
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	COMMERCIAL VEHICLE

Insurance Company	
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Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800154782-01
Cover Note Number	

Driver	
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Name of Driver	ONG SEAH KUANG
NRIC No	S7861497H
Date Of Birth	23/09/1978
Occupation	INDOOR
Date Of Driving Pass	27/02/2006
Driving Experience	13 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-90096125
Fax Number	
Contact Number	
EEmail Address	CENMAS99@GMAIL.COM
Address	BLK 357B ADMIRALTY DRIVE #07-138
Postcode	752357
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	COLLISION - HEAD TO REAR
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

Our driver was turning left from main road to enter CTE. Vehicle in front GBJ200M did an emergency break suddenly. Our driver was not able to stop in time and collided on the back of the vehicle.

Attachment(s)

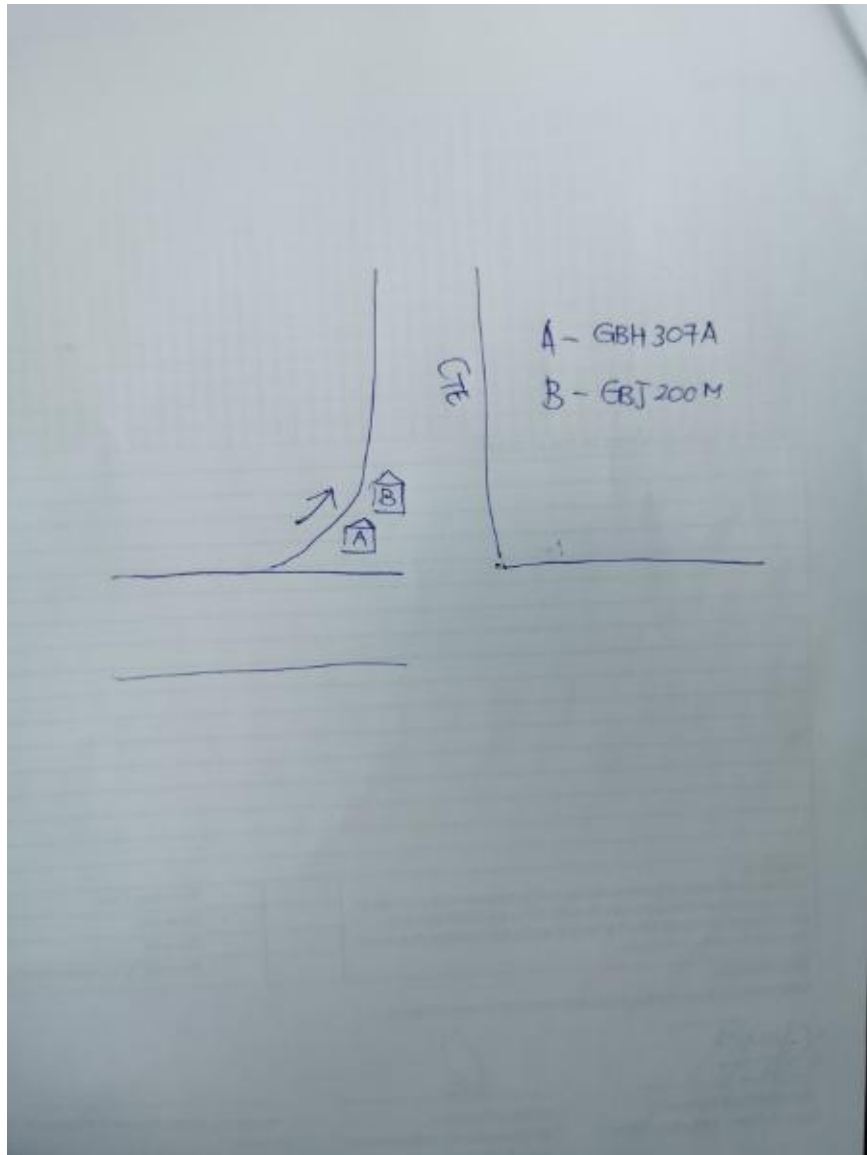
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO NOT SUBMITTED
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ200M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7861497H



Name



ONG SEAH KUANG

王 森 泉

Race

CHINESE

Date of birth

23-09-1978

Sex

M

S7861497H



Country/Place of birth

MALAYSIA

Identification Card

5225265



NRIC No. S7861497H

Date of issue
01-10-2013

Address

APT BLK 357B ADMIRALTY DRIVE
#07-138
SINGAPORE 752357

Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **S7861497H**
Name:
ONG SEAH KUANG

Birth Date: **23 Sep 1978**
Issue Date: **26 Jan 2011**



 001932690J

Driving License

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B	Motorcycles =< 200 cc	27 Feb 2006
Class 3	Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	27 Feb 2006



Licence No: S7861497H

NP 428A