

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	02/01/2020 15:59
Date Of Accident	31/12/2019 16:30
Exact Location Of Accident	PICKUP POINT AT 111 SOMERSET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGP9J
Insured/Policyholder	
Name Of Registered Owner	PUA SECK GUAN
NRIC No	SXXXX848E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96369068
Alternative Phone No	OTHERS-96561399

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	S400L
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?	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	NO
Policy Number	2100480994-03
Cover Note Number	

Driver

Name of Driver	LEE SENG KEE
NRIC No	SXXXX620B
Date Of Birth	17/04/1965
Occupation	OUTDOOR
Date Of Driving Pass	15/06/1984
Driving Experience	35 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96561399
Fax Number	
Contact Number	HOME-96369068
Email Address	NOEMAIL

Address	BLK 562 HOUGANG STREET 51 #04-452
Postcode	530562
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - OPENING DOOR OF VEHICLE
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)	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 NOTICE OF COMPLIANCE

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	SKP3131X
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)	

Accident Sketch Plan

SKETCH PLAN

Veh A: SGP 9J
Veh B: SKP 3131 X

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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.

** I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

Veh A: SGP 93

Veh B: Skf 3131 X

III Somerset

• Pickup Point

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer Notice of Compliance.

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name: *Robert*
NRIC/FIN No.:

Accident Sketch Plan

CONFIDENTIAL

Annex D

NOTICE OF COMPLIANCE

This is to confirm that Lee Seng Kee, Hp: 93853385 NRIC/FIN:

S1701620B of Blk 562 Hougang Street 51 #04-452, has reported to Police a

Non-injury traffic accident, which occurred at along, Pickup point at 111 Somerset

on 31/12/2019 at 1627hrs involving the following vehicles:

My vehicle: SGP9J

Other Party vehicle: SKP3131X

On 31/12/19 at about 1627hrs my vehicle was stationery at the pickup point of 111 Somerset. Another vehicle (SKP3131X) came and parked beside my vehicle on the left side. The vehicle driver's son came and open his car's door. While opening the car door, the door hit onto my vehicle's rear left taillight. My vehicle's rear left taillight cracked. The driver did not want to come down from his vehicle. I told him that if he move off I would make a police report of hit and run. The driver then only came down from his vehicle. The driver's son then admitted that his car door had hit onto my vehicle while he opened his car door. The driver suggested to me that he would get for me the taillight in discount however I rejected as the taillight is expensive and of good quality. The driver's particulars as follows :

Charles Alexander Monteiro, S2770774B

2 He/She has therefore complied with Sec84 (2) of the Road Traffic Act, Cap 276.

Date: 31/12/2019 Name of Issuing Officer: SGT2 Ramesh

S/D Ref: - Police Post/Unit: Teck Ghee NPP

Teck Ghee NPP
Tel: 321 716 100 800 81 31
S'pore 100224
Tel: 200-450 8999

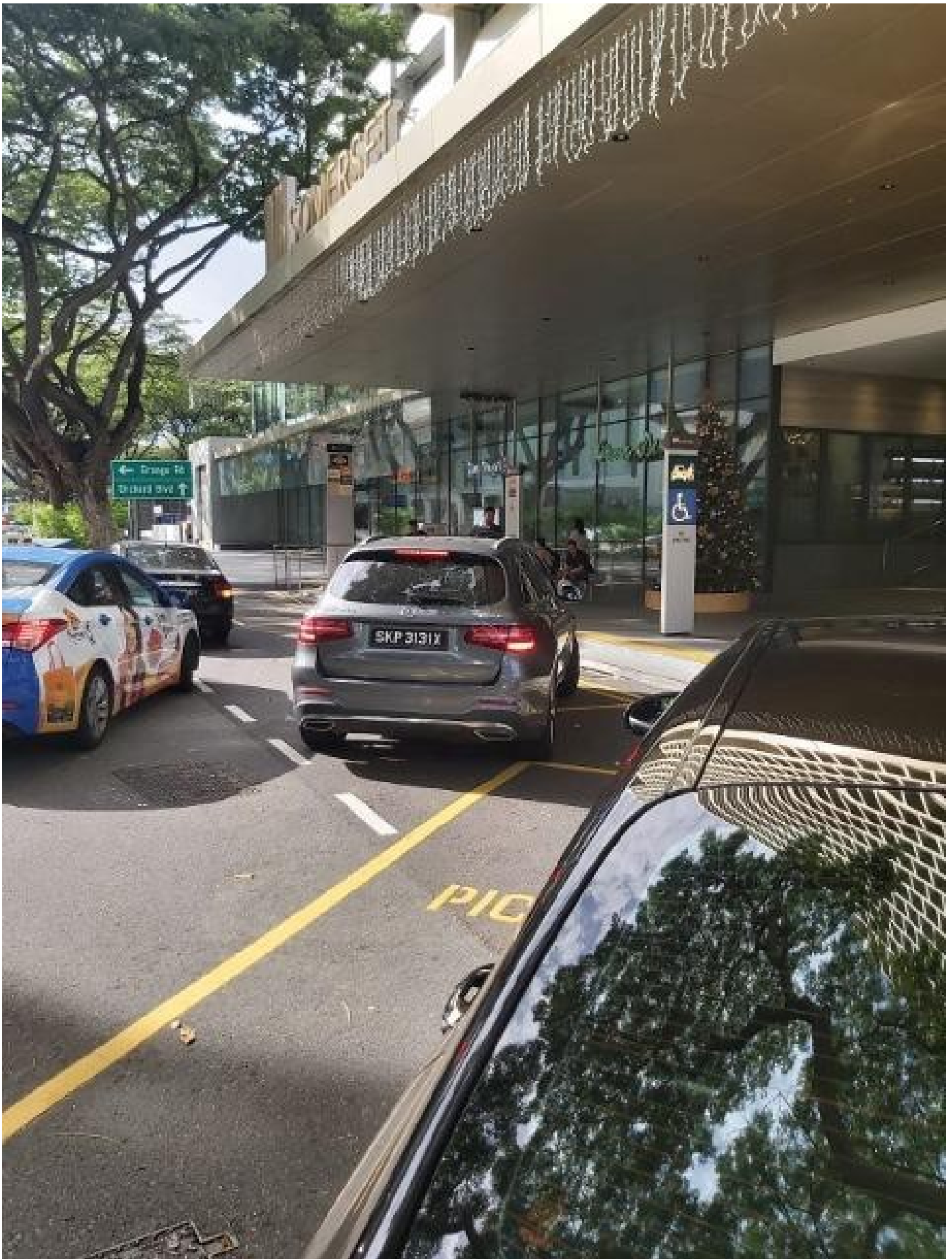
Original - to be issued to informant.
Duplicate - to be retained at police post or unit.

CONFIDENTIAL

Accident Photo



Accident Photo



Accident Photo



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