

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	28/02/2020 16:18
Date Of Accident	04/01/2020 11:00
Exact Location Of Accident	AT KALLANG ROAD TURNING TO LAVENDER STREET
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV9157B
Insured/Policyholder	
Name Of Registered Owner	ROHIT CHATTERJI
NRIC No	S7064378B
Email Address	ALPANARC@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96681070
Alternative Phone No	Office-87321789

Vehicle Particulars

Manufacturer	LEXUS
Model	NX 200T
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	2100432313-04
Cover Note Number	

Driver

Name of Driver	CHATTERJI ALPANA
NRIC No	S7064378B
Date Of Birth	25/01/1969
Occupation	INDOOR
Date Of Driving Pass	17/10/1997
Driving Experience	22 YEARS AND 2 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-96681070
Fax Number	
Contact Number	
E-Mail Address	ALPANARC@GMAIL.COM
Address	9 RHU CROSS COSTA RHU #13-10 SINGAPORE
Postcode	437436
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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)	2
Passenger 1	Name: : Rajbala Rastogi 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

At the kallang road turning into lavender street the signal turned amber and I put the brake but the motor cycle in front on me slightly to the left stopped faster and my vehicle nudged the motor cycle. Since my vehicle was almost stopping there was no damage to the vehicles.

Attachment(s)

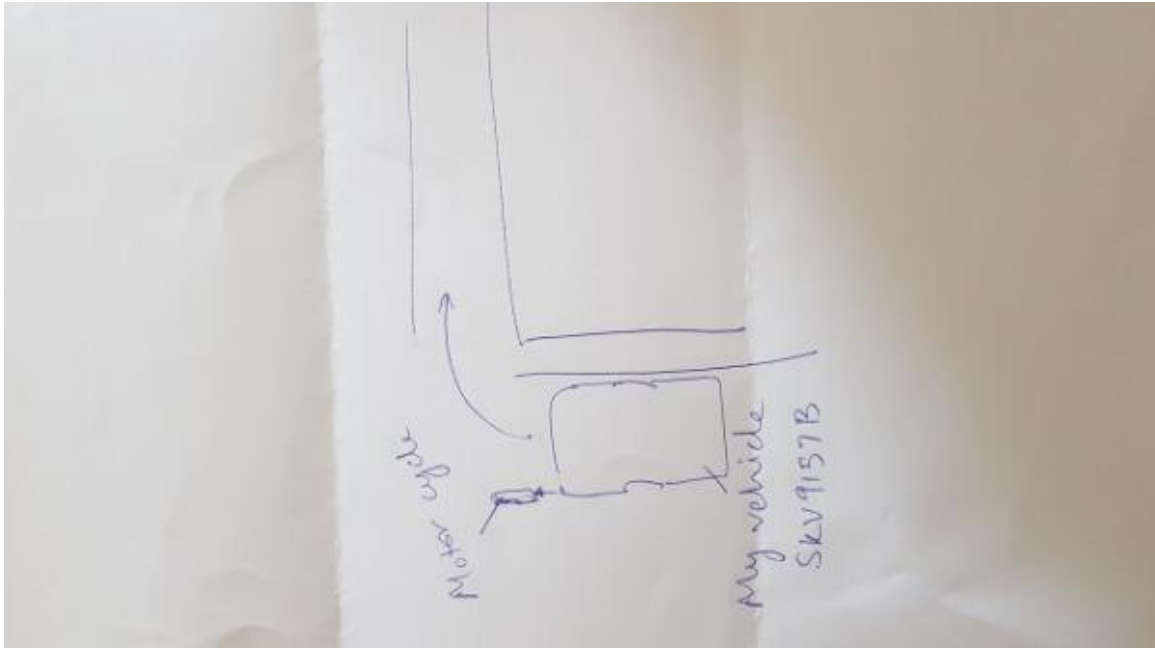
Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number
Vehicle Make/Model/Colour
Details Of Properties

Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan



Driving License



Identification Card



Identification Card



Driving License

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

License Number: **S6967147J**

Name: **CHATTERJI ALPANA**

Birth Date: **25 Jan 1969**

Issue Date: **02 May 2009**

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