Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 29/01/2020 10:46

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/01/2020 16:31
Date Of Accident	25/01/2020 11:50
Exact Location Of Accident	QUEENSWAY, BEFORE MARGARET DRIVE JUST AFTER MCDONA
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKV1669T
Insured/Policyholder	
Name Of Registered Owner	DULCIE CHAN SOK FERN (DULCIE CHEN SHUFEN)
Work Permit No	S7248980B
Email Address	JEFFREYMCH@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91093603
Alternative Phone No	Office-91093603
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-TURBO
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	2100427585-04
Cover Note Number	
Driver	
Name of Driver	EUGENE CHAN CHEAH HUAT
NRIC No	S7606853D
Date Of Birth	05/03/1976

INDOOR

06/01/2003

17 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91093603

Fax Number

Contact Number

EMail Address JEFFREYMCH@GMAIL.COM

Address 193 JALAN LOYANG BESAR, #04-04

Postcode 506928
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

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

NO

NO

NO

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.

Number of Passengers (Including Driver) 2

Passenger 1 Name: : dulcie
Gender: : Female

Details of Police Action

Was the accident reported to the police?

If Yes,Please state which Police Station

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

#straightroad Moving out from Stationary position & Moving straight SKV1669T SHC4474D WSVC20000247

Accident_Description SKV1669T was moving on the left most lane on Queensway approaching Margaret Drive turn. SHC4474D turned out of the minor road from McDonald's Queensway suddenly when my car was approaching. I sounded the horn loudly and press the brake to slow the car down. SHC4474D stopped the car suddenly and I tried to stop my car from colliding into his. But it hit SHC4474D on the bumper and dented it. Driver came out and said I was in the wrong and said his taxi company will make a claim for repairs. We took done each others' particulars pictures of NRIC and accident.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons: INSD DID NOT PROVIDE VIDEO FOOTAGE

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC4474D

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

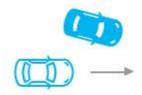
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

TAXI

Sketch Plan



Accident Photo





Identification Card



Identification Card

