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 <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.

ACCIDENT STATEMENT
30/03/2020 18:18
28/03/2020 13:30
ALONG TRAS STREET
SINGAPORE
DETAILS OF OWN VEHICLE
SJV8946J
YAP TEIK YUNG DANIEL
SXXXX918E
HUITAY@SINGNET.COM.SG
(LOCAL) +65-98800829
OTHERS-98800829
MERCEDES-BENZ
E250
CAR WAS PARKED
NO
THIRD PARTY
PRIVATE CAR
AIG ASIA PACIFIC INSURANCE PTE. LTD.
COMPREHENSIVE
NO
2070009945

Name of Driver YAP TEIK YUNG DANIEL

NRIC No SXXXX918E

Date Of Birth 20/07/1973

Occupation INDOOR

Date Of Driving Pass 27/07/1998

Driving Experience 21 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98800829

Fax Number

Contact Number OTHERS-98800829

EMail Address HUITAY@SINGNET.COM.SG

Address BLK 73 TELOK BLANGAH HEIGHTS

#15-313

Postcode 100073

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 HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

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 NO

ambulance?

YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

0

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO ATTACHMENT

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 SMP413P

Vehicle Make/Model/Colour TOYOTA HARRIER

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver GEO LIN JIE
NRIC/Passport Number SXXXX146J
Contact Number 94314713

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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Accident Sketch Plan

SKETCH PLAN

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- 7. By the lodgment 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.
- 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)
 - (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
- 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.
- 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.

Policyholder's Sig

er's Signature

Date & Time:

(If driver is not the policyholder)

Date & Time:

NRIC/FIN N

Accident Sketch Plan

	Mone Tras 8	RAHT
B SWINGSWI	31089461 A	3) SMP 413P
	A	A) SJV 89465
SCRIBE CIRCUMSTANCES OF T		
CLARATION Ve declare the foregoing particulars	are true in every respect.	
Der - 30/3/20		30/03/2020

ATTACHMENT

On the 28 Mar 2020 at 1.30pm, I was standing on the curb beside my stationary vehicle along Tras Street.

A lady driving vehicle SMP413D pulled up alongside on the right side and in front of my car. She then began reversing haphazardly and w/o looking reversed her car into mine. The rear right of her vehicle collided with the front right of my car. I could see my car jerk back from the impact. I shouted out for her to stop.

The lady moved her vehicle forward and stopped but still at an angle. She alighted and admitted liability immediately. She further admitted she had been on the phone! (I have a video recording of her admitting she was on the phone while she was reversing). If I had been standing in front of my vehicle instead of just beside it, my life would have been seriously endangered.

an zolozbow Rost, WAHAB

NRIC: \$7325918F

Contact: 98800829

















