Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 24/06/2020 10:21

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 truthful and accurate 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

foresaid.	
	ACCIDENT STATEMENT
Date Of Report	23/06/2020 17:35
Date Of Accident	24/05/2020 17:20
Exact Location Of Accident	MAUD ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKM289K
Insured/Policyholder	
Name Of Registered Owner	LIM SOOK CHERN
NRIC No	S1465449F
Email Address	KEITHWONG289@GMAIL.COM
Mobile Phone No	(LOCAL) +65-93836345
Alternative Phone No	Office-91474483
Vehicle Particulars	
Manufacturer	AUDI
Model	A1 SPORTBACK 1.0 TFSI S TRONIC
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	1900107166
Cover Note Number	
Driver	
Name of Driver	WONG KIE MING
AIDIO N	S1425407B
NRIC No	314234076

INDOOR

18/01/1982

38 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93836345

Fax Number

Contact Number

EMail Address KEITHWONG289@GMAIL.COM

Address #03-504, 7 PANDAN VALLEY, POINCIANA TOWER

Postcode 597631 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 SKG1360L

Vehicle

AIG Asia Pacific Insurance Pte. Ltd.

Insurance Company of Driver's Own Vehicle AIG A

General Information of the Accident

Type Of Accident COLLIDED INTO PARKED 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?

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

NO

Number of Passengers (Including Driver)

2

Passenger 1 Name: : Irene Lim Sook Chern

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

Blue Car SKM289K White Car SJG6134C Hit parked car while trying to exit parallel parking lot.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJG6134C

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)

Sketch Plan





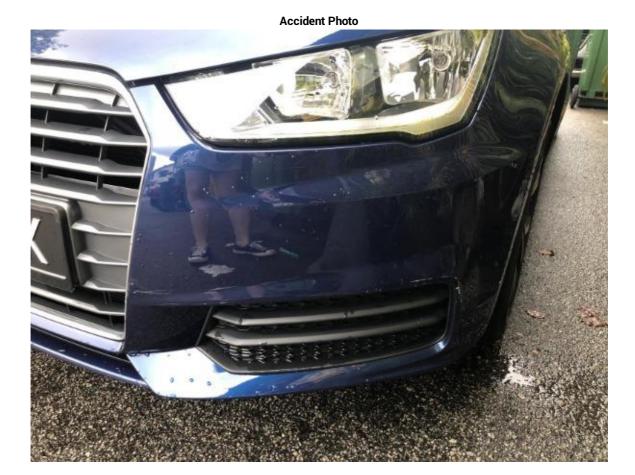


Accident Photo















Identification Card



