

# 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 Submission ..... 11/11/2020 11:52 (SGT)  
Date of Accident ..... 07/07/2020 14:15 (SGT)  
Exact Location of Accident ..... Outside St Andrew Village towards upper serangoon  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SGS3396E

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... CHENG THIAM MENG (ZHUANG TIANMING)  
NRIC No ..... S7837296F  
Email Address ..... NOEMAIL  
Mobile Phone No ..... (Phone) +65-91278105  
Alternative Phone No ..... (Phone) +91278105

### VEHICLE PARTICULARS

Manufacturer ..... Mazda  
Model ..... 6 2.5 SKYACTIV  
Variant ..... -  
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 - Reporting only  
Vehicle Category ..... Private car

### INSURANCE COMPANY

Name of Insurance Company ..... AIG  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 2100475708-04  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... CHENG THIAM MENG (ZHUANG TIANMING)  
NRIC No ..... S7837296F  
Date Of Birth ..... 01/12/1978  
Occupation ..... Indoor

Date Of Driving Pass .....	06/01/2007
Driving experience .....	13 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91278105
Alt. Phone Number .....	(Phone) +-91278105
Email Address .....	NOEMAIL
Address .....	139B Lorong 1A Toa Payoh #18-60 SINGAPORE
Address complement .....	-
Postcode .....	312139
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver 1 .....	-
Insurance Company of Other Vehicle Owned by Driver 1 .....	-
Vehicle Registration Number of Other Vehicle Owned by Driver 2 .....	-
Insurance Company of Other Vehicle Owned by Driver 2 .....	-
Vehicle Registration Number of Other Vehicle Owned by Driver 3 .....	-
Insurance Company of Other Vehicle Owned by Driver 3 .....	-

#### 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 the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	No
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#straightroad Moving straight & Moving straight SGS3396E SJG1808A WSVC20001711 Accident\_Description Towards upper serangoon. There was a red light which all cars stopped including mine. In front of me was the white car which was stationary. I was in deep thoughts and upon seeing cars beside me moving off

I slightly pressed on accelerator without realising the car in front of mine had not moved off. There was a slight bang and minor damages to the rear of the 3rd party car.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	-
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJG1808A
Vehicle Manufacturer .....	-

Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Private car  
Name of Driver ..... -  
Contact Number ..... -  
Address ..... -  
Address complement ..... -  
Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -



**IMPORTANT NOTE:** Please submit the completed Addendum form to the **MAIS** Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: MSYC00001057 Vehicle Registration No: S 85 239 E  
 Name (surname - first): SHARIF TAJIB BIN SHARIF NRIC/Identification No: S 9332246 F  
 (\*Vehicle Driver / Vehicle Owner) (Please declare as appropriate)  
 Address: 16, 10th St, #10-01, Lebak, Tempeh, Singapore 320109  
 Contact (Tel): - Mobile No: 91378103  
 Email Address: shariftajib@vsn.net  
 Date of Accident: 07/12/20 Time of Accident: 08:00 AM  
 Place of Accident: Car park, St Andrew Village  
 Insurance Company: AIQ

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

I have made a report today (07/12/20) & stated that I wanted to make a claim for the accident. However, it was a mistake as I thought the claim was by SPRL only against me. I don't want to claim for my damages to my car. The report which I filed online is for the purpose of reporting only. I have added a copy of the location of accident for reference.



Reporting Centre Personnel's Signature  
 Name: \_\_\_\_\_  
 NRIC/FIN No.: \_\_\_\_\_  
 Date: 07/12/2020









**IMPORTANT NOTE:** Please submit the completed Addendum form to the **same** Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**


**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: MSYC00001057 Vehicle Registration No: S 85 339 E  
 Name (surname - first): CHIAI TAN SENG NRIC/Ident/Passport No: S 933246 F  
 (\*Vehicle Driver / Vehicle Owner / \*) Please declare as appropriate  
 Address: 26, 10th St Fl 4, Lebak Terengganu Singapore 320109  
 Contact (Tel): - Mobile No: 91327105  
 Email Address: chiayangtaneng@ yahoo.com  
 Date of Accident: 07/12/20 Time of Accident: 08:00 AM  
 Place of Accident: Car park, St Andrew Village  
 Insurance Company: AIQ

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

I have made a report today (07/12/20) & stated that I witness to what is shown for the accident. However, it was a mistake as I thought the car was by SP driving against me. I don't witness them for any damage to my car. The report which I filed online is for the purpose of reporting only. I have added a map of the location of accident for reference.

Policyholder / Driver's Signature:   
 Date: 07/12/2020

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

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
 6 Bayview Drive #02-01 Singapore 109618  
 Tel: 651 024 0073 Fax: 651 024 0074  
 Email: [records@gia.com.sg](mailto:records@gia.com.sg) Website: [www.gia.com.sg](http://www.gia.com.sg)  
 1000 MAHADEVAI STREET, #02-01, MAHADEVAI CENTRE

**GENERAL INSURANCE RECORDS MANAGEMENT CENTRE**

**IMPORTANT NOTE:** Please submit the completed Addendum form to the **MAIS** Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No.: W5YCB061057 Vehicle Registration No.: S 85 3399 E  
 Name (surname - first): CHIAI TAN SENG NRIC/Passport No.: S 9332466 F  
 (\*Vehicle Owner / Vehicle Owner's Representative) Please declare as appropriate  
 Address: 16, 10th St Fl 4, Lebak Terengganu Singapore 320109  
 Contact (Tel): - Mobile No.: 91327103  
 Email Address: chiangtaneng@ yahoo.com  
 Date of Accident: 07/12/20 Time of Accident: 08:00 hrs  
 Place of Accident: Car park, St Andrew Village  
 Insurance Company: AIQ

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**  
 I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:  
I have made a report today (07/12/20) & stated that I wanted to make a claim for the accident. However, it was a mistake as I thought the claim was by SPRL only against me. I don't want to claim for my damages to my car. The report which I filed online is for the purpose of reporting only. I have added a copy of the location of accident for reference.

Reporting Centre Personnel's Signature  
 Name: \_\_\_\_\_  
 NRIC/PIN No.: \_\_\_\_\_  
 Date: \_\_\_\_\_

Policyholder / Driver's Signature  
 Date: 07/12/2020