

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	14/07/2020 10:39
Date Of Accident	09/07/2020 12:00
Exact Location Of Accident	FIDELIO ST IN FRONT OF OPERA ESTATE PRIMARY SCHOOL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR7189G
Insured/Policyholder	
Name Of Registered Owner	BIZLINK RENT A CAR PTE LTD
Co Reg No	200402911Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-96907548

Vehicle Particulars

Manufacturer	MAZDA
Model	6
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	100881190
Cover Note Number	

Driver

Name of Driver	SHAUN ROMUALD GOMEZ
NRIC No	S8110059D
Date Of Birth	03/04/1981
Occupation	INDOOR
Date Of Driving Pass	14/07/2010
Driving Experience	9 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-93889864
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	21 TOSCA TERRACE
Postcode	455415
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

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

I WAS DRIVING STRAIGHT ALONG FIDELIO ST IN FRONT OF OPERA ESTATE PRIMARY SCHOOL. THERE WAS AN ILLGALLY PARKED VEHICLE IN FORNT OF ME AND THE ROAD WAS NARROW. I CHECKED FOR ONCOMING TRAFFIC BEFORE I OVERTAKE THE PARKED VEHICLES. I HAVE TO OVERTAKE AS THE VEHICLE PARKED ILLEGALLY WRRE BLOCKING MY PATH OF TRAVEL. WHILE OVERTAKING, I SAW FROM THE OPPOSITE DIRECTION THERE WAS ONCOMING TRAFFIC WHICH WAS STRETCHED IN A ROW. I DECIDED TO SLOWLY INCH BACK TO MY LANE TO AVOID COLLISION. AS I WAS SLOWING BEING SANDWICHED BETWEEN THE ONCOMING TRAFFIC AND THE VEHICLES PARK ILLEGALLY. I HEARD AN IMPACT AT THE LEFT HAND SIDE MIRROR. I STOPPED MY VEHICLE AND LIGHTED KNOWING VERY WELL THAT ONLY MY LEFT MIRROR WAS IMPACTED AS THERE WAS STILL A GAP BETWEEN MY CAR AND THE VEHICLE. AFTER CHECKING, THERE WAS NO VISIBLE DAMAGES ON VEHICLE C. DRIVER C DROVE AWAY AND LEFT THE SCENE. VEHICLE B HOWEVER CLAIM THAT THERE WAS DAMAGES ON THE FRONT RIGHT HAND FENDER PROTECTOR WHICH IS OLD DAMAGE AND NOT TALLY WITH MY COLLISION. THERE IS VERY EVIDENT AS BOTH OWNER AND MYSELF CONFIRM NO DAMAGES EXCEPT THE MIRROR BEING SWUNG IN AND INDEED THERE WAS A GAP BETWEEN BOTH VEHICLES. I WISH TO STA THAT THERE WERE NO VISIBLE DAMAGES ON MY VEHICLE AND BOTH OF US EXCHANGED PARTICULARS AND TOOK PICTURES AND LEFT THE SCENE.

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	SMT1806B
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE C
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

SKETCH PLAN

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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) of:
 - (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
- (c) 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.
- (d) 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 Signature
Date & Time:

14/7/20

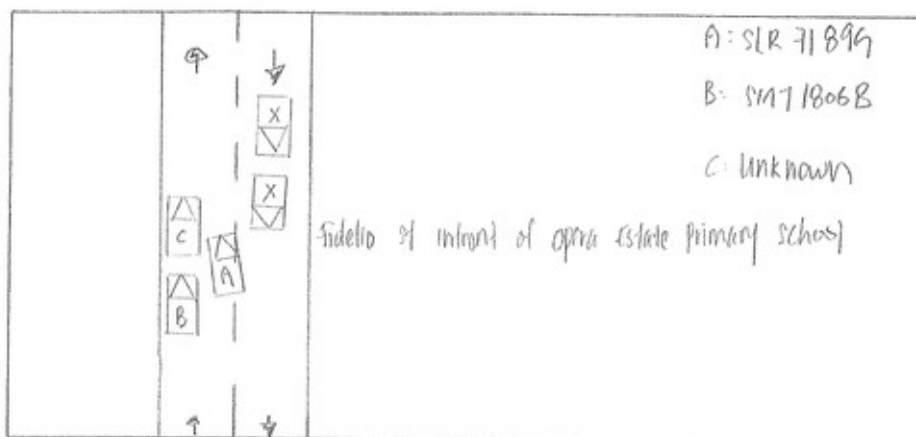
ANBAY SketchPlanForm_v3

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

NEW HONG TEE

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving straight along Fidelio St in front of Opera Estate Primary School. There was an illegally parked vehicle in front of me and the road was narrow. I checked for oncoming traffic before I overtake the parked vehicle. I had to overtake as the vehicle parked illegally were blocking my path of travel. While overtaking, I saw from the opposite direction there was oncoming traffic which was stretched in a row. I decided to slowly inch back to my lane to avoid collision. As I was inching slowly being sandwiched between the oncoming traffic and the vehicles parked illegally, I heard an impact at the left hand side mirror. I stopped my vehicle and lighted knowing very well that only my left mirror was impacted as there was still a gap between my car and the vehicle.
After checking there was no visible damages on vehicle "C", driver C drove away and left the scene. Vehicle "B" however claimed that there was damages on the front right hand fender protector which is old damage and not tally with my collision. This is very evident as both owner and myself confirm no damages on my vehicle EXCEPT the mirror being swung in and indeed that there was a gap between both vehicles.
I wish to state that there were no visible damages on my vehicle and both of us exchanged particulars and took pictures and left the scene.

DECLARATION

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

14/7/20

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8110059D**



SHAUN ROMUALD GOMEZ

Race

INDIAN

Date of birth

03-04-1981

Sex

M

S8110059D

Country of birth

SINGAPORE

Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no:

SLR 71899

Date of Accident:

07/09/20

3709372



NRIC No.

S8110059D



Date of issue

12-04-2005

Address

**21 TOSCA TERRACE
SINGAPORE 455415**

Driving License

REPUBLIC

DRIVING LICENCE



Licence Number: **S8110059D**

Name:

SHAUN ROMUALD GOMEZ

Birth Date: **03 Apr 1981**

Issue Date: **14 Jul 2010**



Usage for Insurance Motor Accident Reporting
and Claims Purposes Only

Vehicle no:

SLR 7099

Date of Accident:

09/09/20

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE



Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

14 Jul 2010

NP 472A



COVER NOTE

Cover Note No. 100881190		Date: 13 Jul 2020	
The following risk described in the Schedule is hereby HELD COVERED in the terms of the applicable Company's policy issued to the Policyholder			
Schedule			
Policyholder	BIZLINK RENT-A-CAR PTE LTD		
Age Condition	N/A	Registration No	SLR7189G
Policy Type	COMPREHENSIVE COMMERCIAL MOTOR	Make/Model	Mazda 6 2.0
Effective Date	01 Jul 2020	CC/Tonnage	1998.00
Expiry Date	30 Jun 2021	Engine No	PE20689425
Hire Purchase Company	HONG LEONG FINANCE LTD	Chassis No	JM6GL1071H0117622
		Year of Registration	2017
<p>This policy is subject to driver's age condition. The policy will indemnify the insured or any authorised driver only if he/she meets the age condition. Please refer to policy terms and conditions.</p> <p>Usage of vehicle only for the following purposes:</p> <ol style="list-style-type: none"> 1. Use only for social, domestic and pleasure purposes and for the Policyholder's business. 2. Use in connection with the Policyholder's business. Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business and use for social, domestic or pleasure purposes. <p>Please note that acceptance of the risk is subject to our final acceptance and terms and conditions applicable to the policy. Should you require any change to the insurance, please contact us immediately. Otherwise, any change will not be covered under the policy.</p> <p>The Company may cancel this cover by notice in writing and the insurance will be terminated and a proportionate part of the annual premium for the insurance will be charged for the time the Company has been on risk.</p>			
<p>MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)</p> <p>MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960</p> <p>ROAD TRANSPORT ACT, 1987 (MALAYSIA)</p> <p>MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)</p>			
CERTIFICATE OF INSURANCE			
I / We hereby certify that this cover note is issued in accordance with the provisions of the Motor Vehicles (Third- Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).			

Issued in Singapore

AIG Asia Pacific Insurance PTE. LTD.

IMPORTANT NOTICE
 THIS COVER NOTE IS VALID
 FOR 60 DAYS FROM THE FIRST
 DAY OF THE POLICY PERIOD.



 AUTHORIZED REPRESENTATIVE

SSPIUS

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

