SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> 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 conse aforesaid. | ent to the archiving of this report at the centre and to copies of the report being made available |
|---|--|
| | ACCIDENT STATEMENT |
| Date Of Report | 01/07/2020 15:28 |
| Date Of Accident | 01/07/2020 11:40 |
| Exact Location Of Accident | SINARAN DRIVE |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SLL5471K |
| Insured/Policyholder | |
| Name Of Registered Owner | ANG KOK BENG KELVIN |
| NRIC No | S7510372G |
| Email Address | KELVINANGKB@ROCKETMAIL.COM |
| Mobile Phone No | (LOCAL) +65-96617701 |
| Alternative Phone No | Others-96617701 |
| Vehicle Particulars | |
| Manufacturer | NISSAN |
| Model | QASHQAI-1.2 (A) |
| 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? | YES |
| If No, Please state action to be taken | |
| 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 | 2100502729-03 |
| Cover Note Number | |
| Driver | |
| Name of Driver | ANG KOK BENG KELVIN |
| NRIC No | S7510372G |
| | |

Date Of Birth 14/04/1975

Occupation **INDOOR Date Of Driving Pass** 22/04/1994

Driving Experience 26 YEARS AND 2 MONTHS Gender **MALE**

Mobile Number (LOCAL) +65-96617701

Fax Number

Contact Number OTHERS-96617701

EMail Address KELVINANGKB@ROCKETMAIL.COM

Address BLK 23 TERRASSE LANE #04-13

Postcode 544775

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 **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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 : TANG NGWEE SNG Name:

2

NO

NO

NO

2

NO

NO

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

SEE ATTACHED SKETCH PLAN

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

PC6207B

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

Name of Driver **ABDUL AZIZ** NRIC/Passport Number Contact Number

92348115

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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:

- 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
- (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 fraudregulators, law enforcement and government agencies as reasonably required for the purposes stated of the PTE LTD

(ii) for complying with requirements under any regulations, laws or court orders 17 Toa Payoh Lorong 8 Tel: 4783801)

Singapore 319254 Tel: 6352 9755 Fax: 6356 4922

Policyholder's Signature

Date & Time: Of Jul 2070

3.12pm,

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name: Alshah NRIC/FIN No.: \$16608>>/2

| ETCH PLAN | | |
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| | SINARAN DRIVE | 2 |
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| | PC62078 | CHOUCHEN |
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| | | TAM CHONG MOTOR SALES PIE LTD |
| | | TAN CHONG MOTOR SALES PTE LTD |
| | | 17 Toa Payoh Lorong 8 Singapore 319254 |
| | | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257-6#56 Fax: 6356 4922 |
| CLARATION | ulars are true in every respect | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257-6#56 Fax: 6356 4922 |
| CLARATION | ulars are true in every respect. | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257 0#56 Fax: 6356 4922 |
| CLARATION | ulars are true in every respect. | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257-6#56 Fax: 6356 4922 |
| CLARATION //e declare the foregoing partic | | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257-6#56 Fax: 6356 4922 |
| CLARATION /e declare the foregoing partic | Driver's Signature | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6357-6#56 Fax: 6356 4922 AM Reporting Centre Personnel's Signature |
| CLARATION /e declare the foregoing partic | | 17 Toa Payoh Lorong 8 Singapore 319254 Tel: 6257-6#56 Fax: 6356 4922 |

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$7510372G





ANG KOK BENG KELVIN

Race
CHINESE
Date of birth Sex
14-04-1975 M
Country of birth
SINGAPORE









PASS DATE

Class 3

Motor Cars=< 3000kg with =<7 passengers, exclusive 22 Apr 199 of the driver; and other motor vehicles =< 2500kg

Ucence Ho: \$7510372G

NP 428A









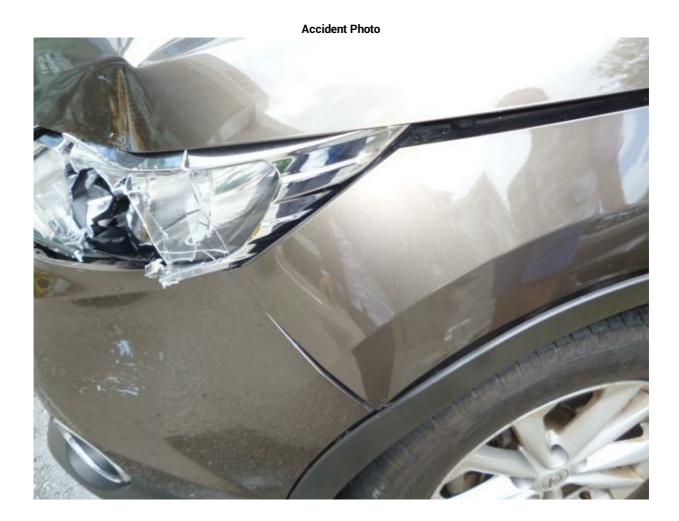
Accident Photo









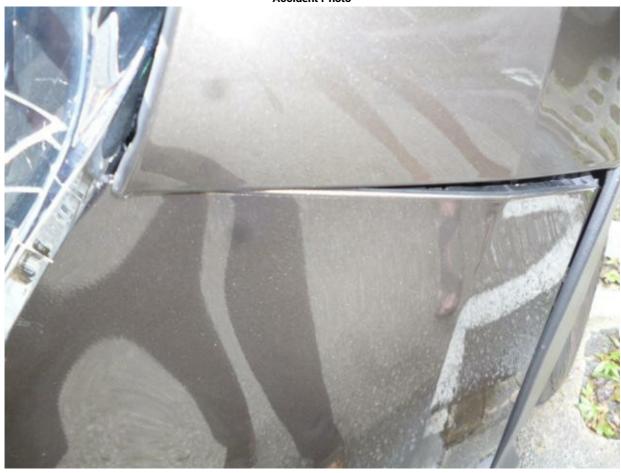
















Accident Photo









Accident Photo

