

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	02/10/2020 15:26
Date Of Accident	20/09/2020 13:20
Exact Location Of Accident	JAVA ROAD TOWARDS NICOLL HIGHWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ1317K
Insured/Policyholder	
Name Of Registered Owner	HO KENG HOCK
NRIC No	SXXXX608C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97553352
Alternative Phone No	OTHERS-97553352

Vehicle Particulars

Manufacturer	KIA
Model	SPORTAGE-2.0 SUNROOF (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	2100391249
Cover Note Number	

Driver

Name of Driver	HO KENG HOCK
NRIC No	SXXXX608C
Date Of Birth	15/10/1956
Occupation	INDOOR
Date Of Driving Pass	23/12/1977
Driving Experience	42 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97553352
Fax Number	
Contact Number	OTHERS-97553352
Email Address	NOEMAIL

Address	BLK 503 JELAPONG RD #15-362
Postcode	670503
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 - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

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?	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

PLEASE REFER TO THE ABOVE PICTURES & ACCIDENT STATEMENT PROVIDED BY OWNER OF SKQ 1317 K.

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	SHD3072G
Vehicle Make/Model/Colour	HYUNDAI / I40 / BLUE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	SEBASTIAN ZEUS POH
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

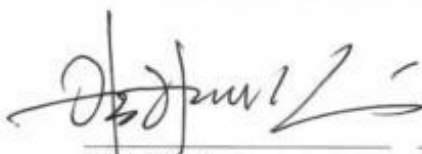
SKETCH PLAN

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. The 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 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) 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:
02/10/2020
15:00

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


Reporting Centre Personnel's Signature
Name: WONG KHONG SEAH, GEORGE
NRIC/FIN No.: G298743X

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer # to the above pictures & accident statement provided by owner of SKQ 1317K

DECLARATION

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


Policyholder's Signature


Date & Time:

2/10/2020
15:00

Driver's Signature

(If driver is not the policyholder)

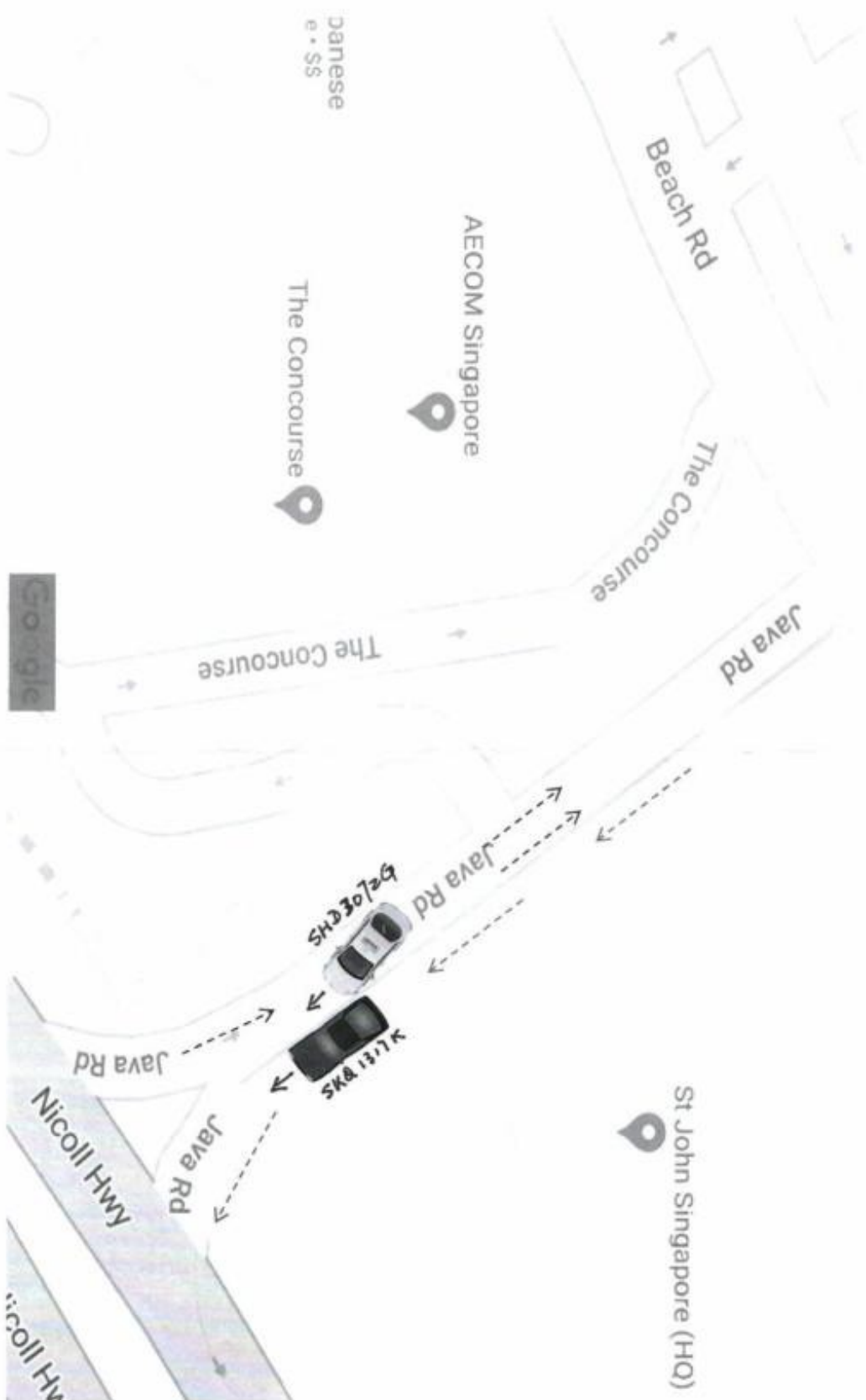
Date & Time:


Reporting Centre Personnel's Signature

Name: WONG KHONG SENG, GEORGE
NRIC/FIN No.: G2987148X



Sketch Plan #3

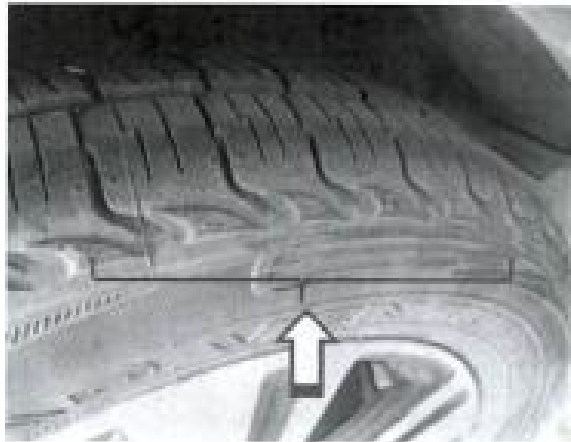


Date of accident: 20.09.2020 at 01:20pm

Location: Along Java Road heading towards Nicoll Highway

Statement: On 20.09.2020 while I was driving my vehicle (Kia Sportage) SKA1317K and heading towards Nicoll Highway, a taxi (Hyundai i40) SHD3072G hit my car. I pulled over to the side of the road and checked the damage of my car and the taxi. There was no physical damage on my car except for the paint marks on my rear right hand side tyre. The taxi had minor abrasion on the front bumper LHS (refer attached photos) and no dent marks was visible.

Accident Photo



Paint marks on the tyre



No physical damage on my car except paint marks on the rear RHS of the tyre. No dents or damages on the tyre and rims.



Particulars of the Taxi Driver.
Sebastian Zeus Poth

The damage was on the LSH bumper taxi - visible black tyre abrasion marks on the bumper. No dents.

Accident Photo

ACCIDENT INVOLVING SKQ1317K
AND SHD3072G

Location: At Java Road
Date: 20/09/2020
Time: ~13:15 hrs

Damage Description:

SHD3072G – LEFT FRONT BUMPER
SKQ1317K – RIGHT REAR TYRE



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

