### 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

	ACCIDENT STATEMENT
Date Of Report	21/09/2020 15:06
Date Of Accident	19/09/2020 13:15
Exact Location Of Accident	PIE TOWARDS TUAS, NEAR PAYA LEVAR EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SLP671L
nsured/Policyholder	
Name Of Registered Owner	LAM FU HANG
NRIC No	S8514508H
Email Address	LAMFUHENG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81022922
Alternative Phone No	Office-81022922
/ehicle Particulars	
Manufacturer	MAZDA
Model	3 1.5 SKYACTIV
exact Purpose for which vehicle was being used at ime of accident	
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	PRIVATE CAR
nsurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
ype Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100509731-03
Cover Note Number	
Driver	
Name of Driver	LAM FU HANG
NRIC No	S8514508H
Date Of Birth	09/05/1985

**INDOOR** 

20/11/2006

13 YEARS AND 9 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81022922

Fax Number

Address

Contact Number OFFICE-81022922

EMail Address LAMFUHENG@GMAIL.COM

327A ANCHORVALE ROAD

#14-336 SINGAPORE

Postcode 541327
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

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#### **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

2

NO

NO

Was any body injured in the Accident? NO

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) 1

### **Details of Police Action**

Was the accident reported to the police?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

#straightroad Moving straight & Accident\_Description As we went upslope after the Paya Lebar exit. The vehicle in front braked right after the top. I did not stop in time and collided to its rear.

#### Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: INSD DID NOT PROVIDE VIDEO

Was there any audio recorded? NO

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SHB8938L

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category TAXI

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**



### **Accident Photo**



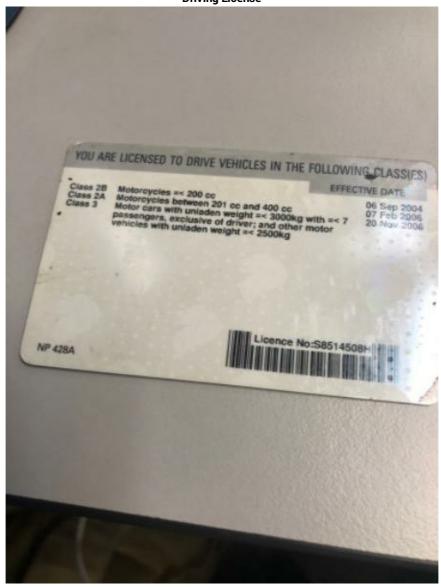
### **Accident Photo**

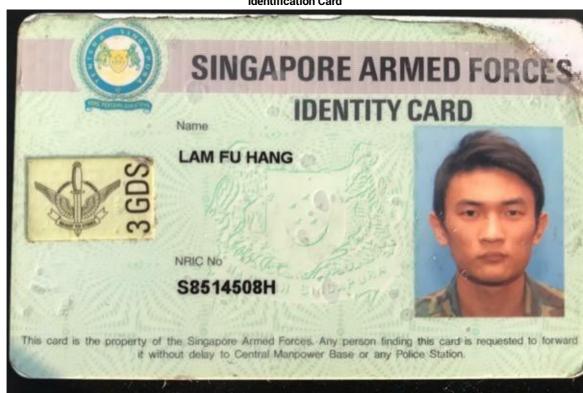


## **Driving License**



# **Driving License**





### **Identification Card**

