SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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 consent to the archiving of this report at the centre and to copies of the report being made available

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	ACCIDENT STATEMENT
Date Of Report	28/09/2020 16:01
Date Of Accident	27/09/2020 19:25
Exact Location Of Accident	MARINE PARADE ROAD NEAR VICTORIA SCHOOL
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SGU6936S
nsured/Policyholder	
Name Of Registered Owner	FARHAN ABBAS RIZVI
NRIC No	S8372441B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81397170
Alternative Phone No	Office-92714535
/ehicle Particulars	
Manufacturer	HONDA
Model	CITY VTEC CVT
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	2070068314
Cover Note Number	
Driver	
Name of Driver	HASNAIN BATOOL
NRIC No	S8980291A
1110 110	

INDOOR

06/04/2015

5 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81397170

Fax Number

Contact Number

EMail Address NOEMAIL

Address 30 TANAH MERAH KECHIL ROAD

EAST MEADOWS TOWER 3B #11-07 SINGAPORE

Postcode 465558
Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

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 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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? NO

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Passenger 1 Name: : Farhan Abbas Rizvi

Gender: : Male

Passenger 2 Name: : Syed Ali Zain

Gender: : Male

Passenger 3 Name: : Syed Irtaza Hasan

Gender: : Male

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

My spouse was driving the car on Marine Parade Road heading towards Bedok South Avenue 1 and as we drove past the traffic light after Victoria School and entered a merging lane a Comfort taxi coming from the left tried to overtake us and swiped my car's left rear door and mud pad and drove past us. The taxi eventually stopped 200 meters from the place of accident with the driver arguing with us despite being at fault. We tried to negotiate but it was unsuccessful so we left the scene. We took the taxi license plate picture but unfortunately due to some camera issues it was not proper.

Attachment(s)

Are accident photos available for attachment?

YES

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

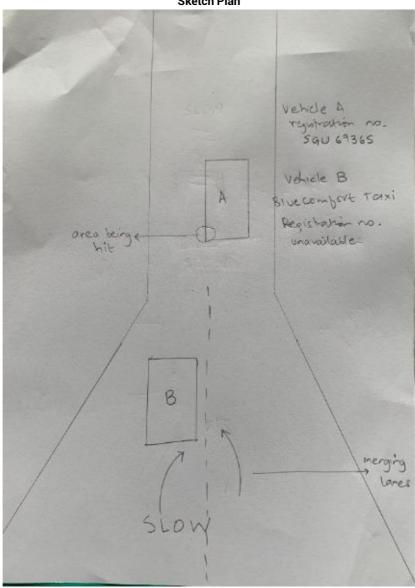
Postcode

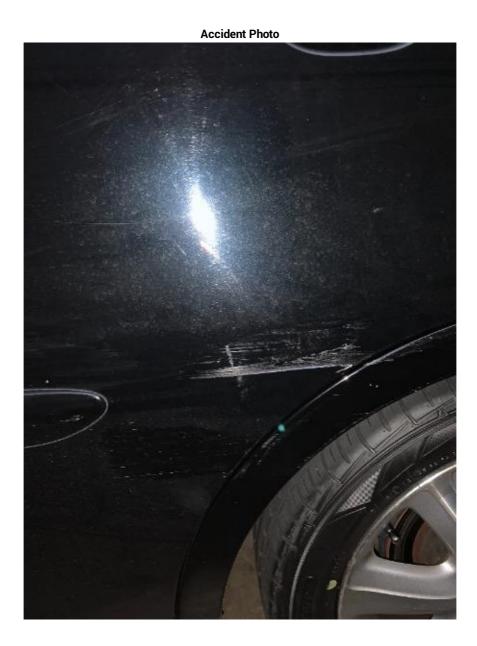
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan









Accident Photo



Driving License



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

EFFECTIVE DATE

Class 3

Ambulances / Motor cars ≤ 3000kg with ≤ 7 passengers, exclusive of the driver / motor tractors or vehicles ≤ 2500kg

06 Apr 2015

NP 428A



Identification Card

