# Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 08/10/2020 16:56

## 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
Oct. Of Daniel	
Date Of Report	07/10/2020 11:11
Date Of Accident	19/09/2020 14:50
Exact Location Of Accident	SYED ALWO ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
/ehicle Registration Number	SGL322A
nsured/Policyholder	
Name Of Registered Owner	CHAN MEI SIM (ZENG MEIXIN)
NRIC No	SXXXX431A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96638010
Alternative Phone No	Others-94891876
Vehicle Particulars	
Manufacturer	LAND ROVER
Model	DISCOVERY SPORT 2.0 R-DYNAMIC SE
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.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2070029930
Cover Note Number	
Driver	
Name of Driver	CHAN MEI SIM (ZENG MEIXIN)
NRIC No	SXXXX431A
Date Of Birth	26/06/1977

**INDOOR** 

13/10/1998

21 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-96638010

Fax Number

Contact Number OTHERS-94891876

EMail Address NOEMAIL

Address 25 AKYAB ROAD

PAVILION 11 #27-07 SINGAPORE

Postcode 309979
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 NO COLLISION

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? YES

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? YES

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

soliciting/oriering accident claims assistance

NO

Number of Passengers (Including Driver) 1

## **Details of Police Action**

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] TRAFFIC POLICE

Was notice of intended Prosecution given? YES

If Yes, against whom? CHAN MEI SIM

## **Circumstances of Accident**

#uturn Uturning & Description I was driving along Syed Alwi road at around 2.50pm. I was making a 3 point turn to enable me to park in the correct direction in a space on the opposite side of the road. As i was about to complete my turn into the road and before crossing the central road marker a bike traveling very quickly lost control of his vehicle and fell off his bike in front of my car. At no point was there any contact between my car and his bike and my car has no signs of any collision. The driver had a few scratches and i called for an ambulance to arrive. The driver was conscious and also told the traffic police that my car did not hit him.

## Attachment(s)

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

Remarks/ Reasons: INSD DID NOT PROVIDE AUDIO / VDEO

Was there any audio recorded? NO

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

Vehicle Registration Number

FBE892S

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

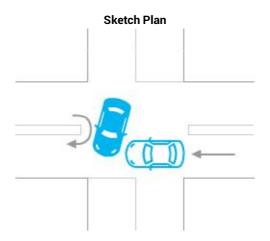
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

MOTORCYCLE

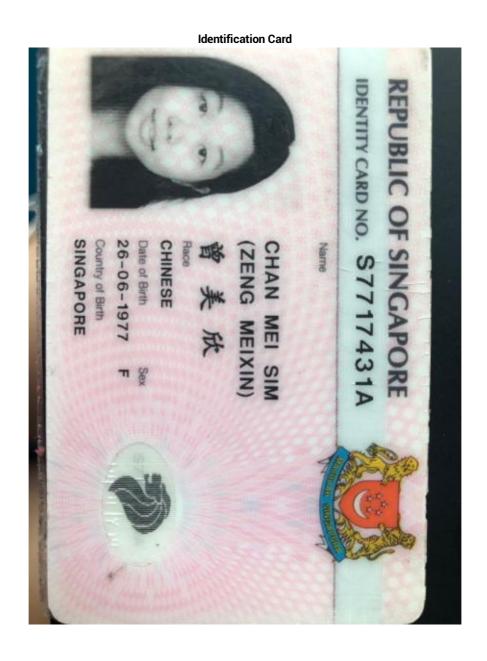


**Driving License** 

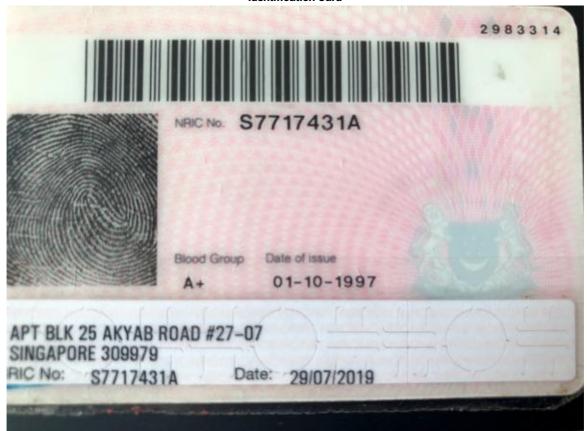


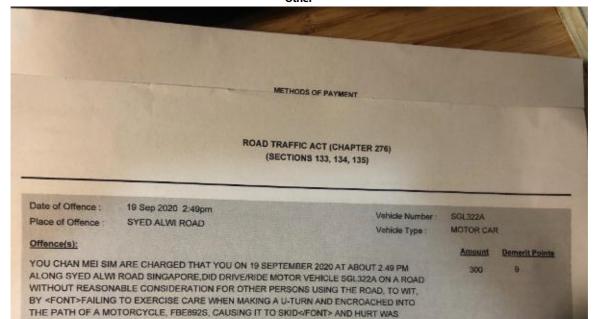
**Driving License** 





**Identification Card** 





CAUSED TO ONE <FONT>RIDER OF FBE892S, NAMELY, LIN ZIQING, M/34</FONT>BY SUCH DRIVING, YOU HAVE THEREBY COMMITTED AN OFFENCE UNDER SECTION 85(1)(b) OF THE

ROAD TRAFFIC ACT, CHAPTER 276.