

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	01/10/2020 17:45
Date Of Accident	30/09/2020 17:20
Exact Location Of Accident	CLEMENTI AVENUE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GV8319E

Insured/Policyholder

Name Of Registered Owner GERMAFLUX PTE LTD
Co Reg No 200619483W
Email Address PETERPHUA@GERMAFLUX.COM.SG
Mobile Phone No (LOCAL) +65-97676865
Alternative Phone No Office-97676865

Vehicle Particulars

Manufacturer TOYOTA
Model DYNA 150 1.7 TON [LORRY]
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? NO
If No, Please state action to be taken REPORTING ONLY
Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage COMPREHENSIVE
Fleet Policy NO
Policy Number 2070084933
Cover Note Number

Driver

Name of Driver TAN LAI CHENG
NRIC No S7164899J
Date Of Birth 11/10/1971
Occupation INDOOR
Date Of Driving Pass 31/03/2006
Driving Experience 14 YEARS AND 6 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98621143
Fax Number	
Contact Number	
E-Mail Address	PETERPHUA@GERMAFLUX.COM.SG
Address	166 WOODLANDS STREET 13 #01-543
Postcode	730166
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	2
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.	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

WSVC20001542 Accident_Description While driving along Clementi Ave 2 vehicle SKD2226B in front of me suddenly stop to turn right I step on my brake and steer my vehicle GV8319E to the left. My vehicle bang onto the rear left of SKD2226B.

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	SKD2226B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	

Contact Number
Address

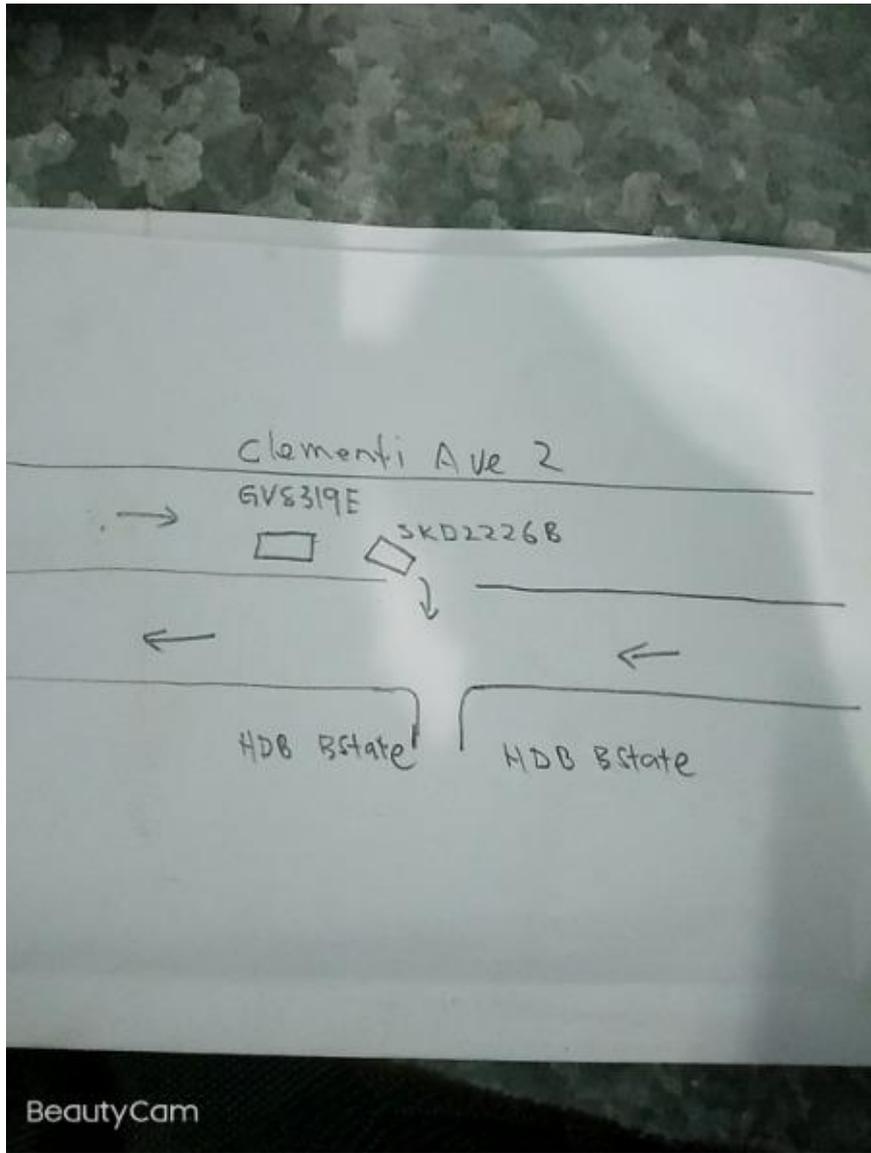
Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan



Accident Photo



Accident Photo



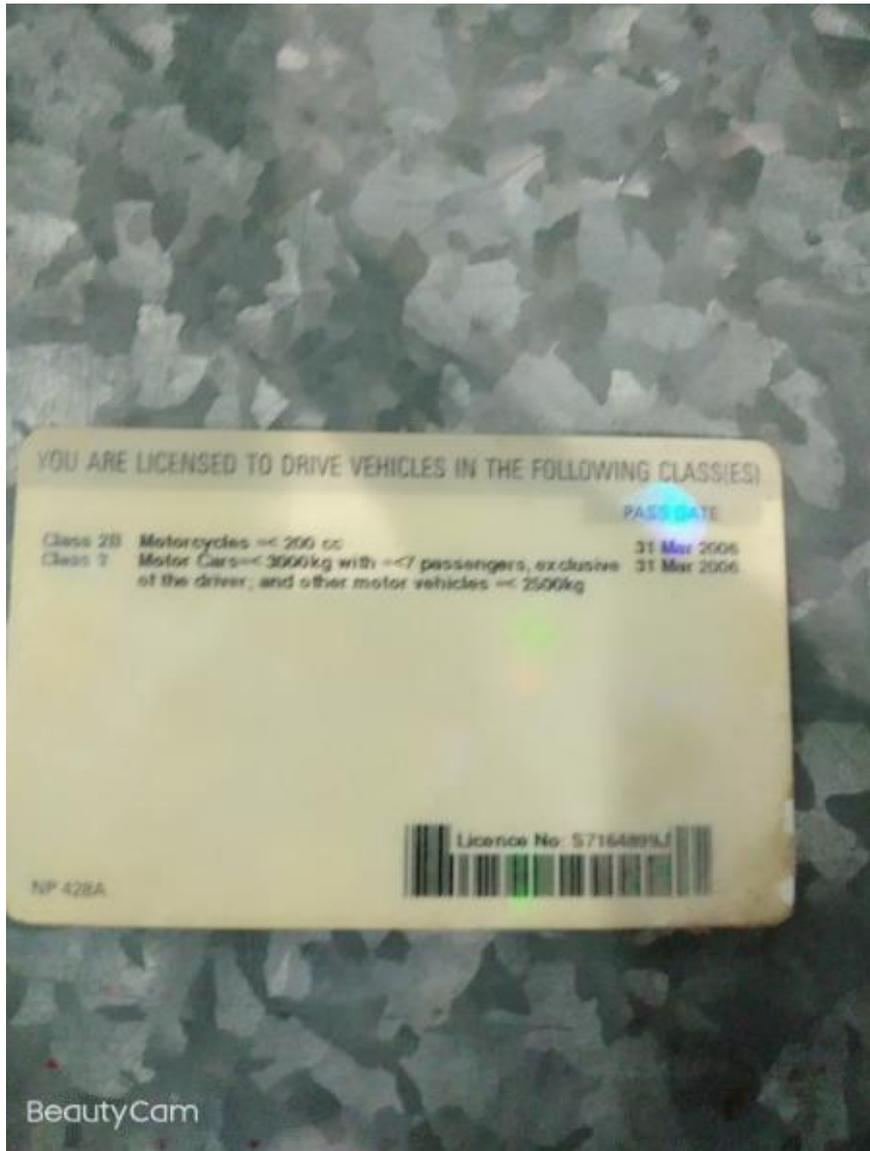
Accident Photo



Driving License



Driving License



Identification Card



Identification Card



87924E2



NRIC No. S7164899J

Nationality
MALAYSIAN
Date of issue
28-07-2006

Address
APT BLK 166 WOODLANDS STREET 13 #01-543
SINGAPORE 730166

NRIC No: S7164899J

Date: 24/08/2008

No: 6048296

BeautyCam