

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	14/10/2020 17:25
Date Of Accident	14/10/2020 11:55
Exact Location Of Accident	CARPARK REFLEXIONS CLOSE TO CLUBHOUSE LOBBY 33
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH1327E
Insured/Policyholder	
Name Of Registered Owner	MAHMOUD ESMAEILI
NRIC No	SXXXX570E
Email Address	M.ESMAEILI18@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97383034
Alternative Phone No	OTHERS-97383034

Vehicle Particulars

Manufacturer	AUDI
Model	Q5 SPORT 2.0 TFSI QU S TRONIC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	
Cover Note Number	

Driver

Name of Driver	EMARD ESMAEILI KARIN SOFIA
NRIC No	GXXXX855X
Date Of Birth	15/05/1969
Occupation	INDOOR
Date Of Driving Pass	19/01/2015
Driving Experience	5 YEARS AND 8 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81827537
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	52 TAMAN NAKHODA VILLA DELLE ROSE
Postcode	257769
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	COLLISION - CROSS JUNCTION
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?	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)	2
Passenger 1	NAME: : ELVIRA ESMAEILI GENDER: : FEMALE

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

INSIDE THE REFLECTIONS CARPARK. I WAS DRIVING STRAIGHT TOWARDS LOBBY 33 TO DROP OF MY DAUGHTER. ABOUT 50M FROM THERE, THERE IS AN ENTRY/EXIT ON THE RIGHT. I WAS DRIVING SLOW PREPARING TO STOP AND DROP OF MY DAUGHTER WHEN A VEHICLE SUDDENLY, WITH SOME SPEED (AS HE WAS DRIVING UP A SLOPE AND OVER A SPEEDBUMP), APPEARS TO MY RIGHT. THERE IS A STOPLINE FOR THE OTHER VEHICLE SMU 4154 Z MBUT IT DOESN'T STOP SO I SLAM MY BREAKS BUT COULD NOT AVOID COLLIDING WITH HIS FRONT. THE RIGHT ENTRY IS OBSTRUCTED VIEW AS THERE IS A WALL, I COULD NOT SEE THE VEHICLE UNTIL HE WAN OVER THE SPEEDBUMP. I ESTIMATE I WAN DRIVING APPROX 15KM/H AS IT INSIDE A CARPARK. KARIN SOFIA EMARD ESMAEILI G5683855X.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMU4154Z
Vehicle Make/Model/Colour	MERCEDES /BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LOH ZHI PENG
NRIC/Passport Number	SXXXX098C
Contact Number	90033144

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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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:

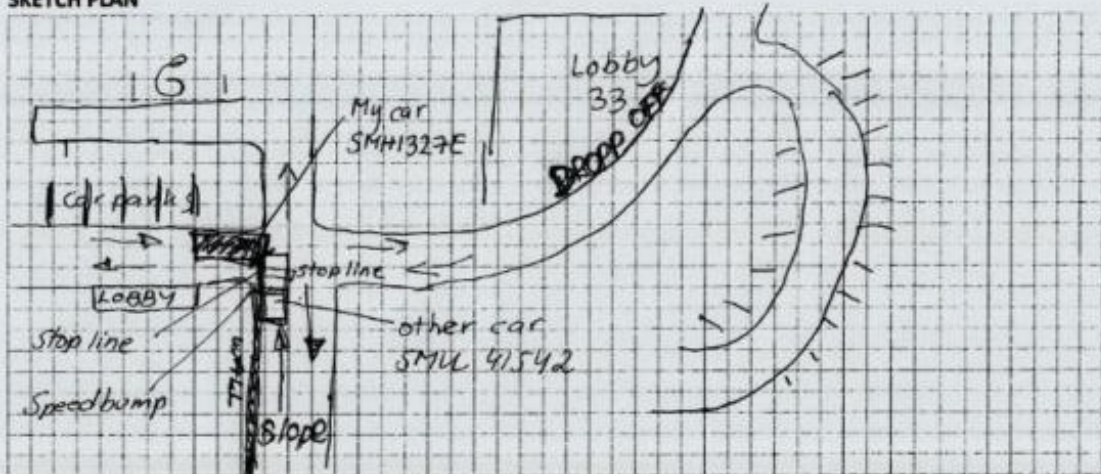
Driver's Signature
(If driver is not the policyholder)
Date & Time: 14/10/2020 @ 16:30

Reporting Centre Personnel's Signature
Name: Raymond Sing Sing Wei
NRIC/FIN No.: 922210X



Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Inside The Reflexions Carpark. I was driving straight towards lobby 33 to drop of my daughter. About 50 m from there there is an entry/exit on the right. I was driving slow preparing to stop and drop of my daughter when a vehicle suddenly, with some speed (as he was driving up a slope and over a speedbump), appears to my right. There is a stopline for the other vehicle SMU 41542 but it doesn't stop so I slam my breaks but could not avoid colliding with his front.

The right entry is obstructed view as there is a wall, I could not see the vehicle until he was over the speedbump. ~~He was~~ I estimate I was driving approx. 15km/h as it is inside a carpark.

Karin Sofia Emard Esmaeili
G5683855X

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Raymond Tey Sing Wei
NRIC/FIN No.: Gxxxxxxx

GAIRMC Sketch Plan Form V2

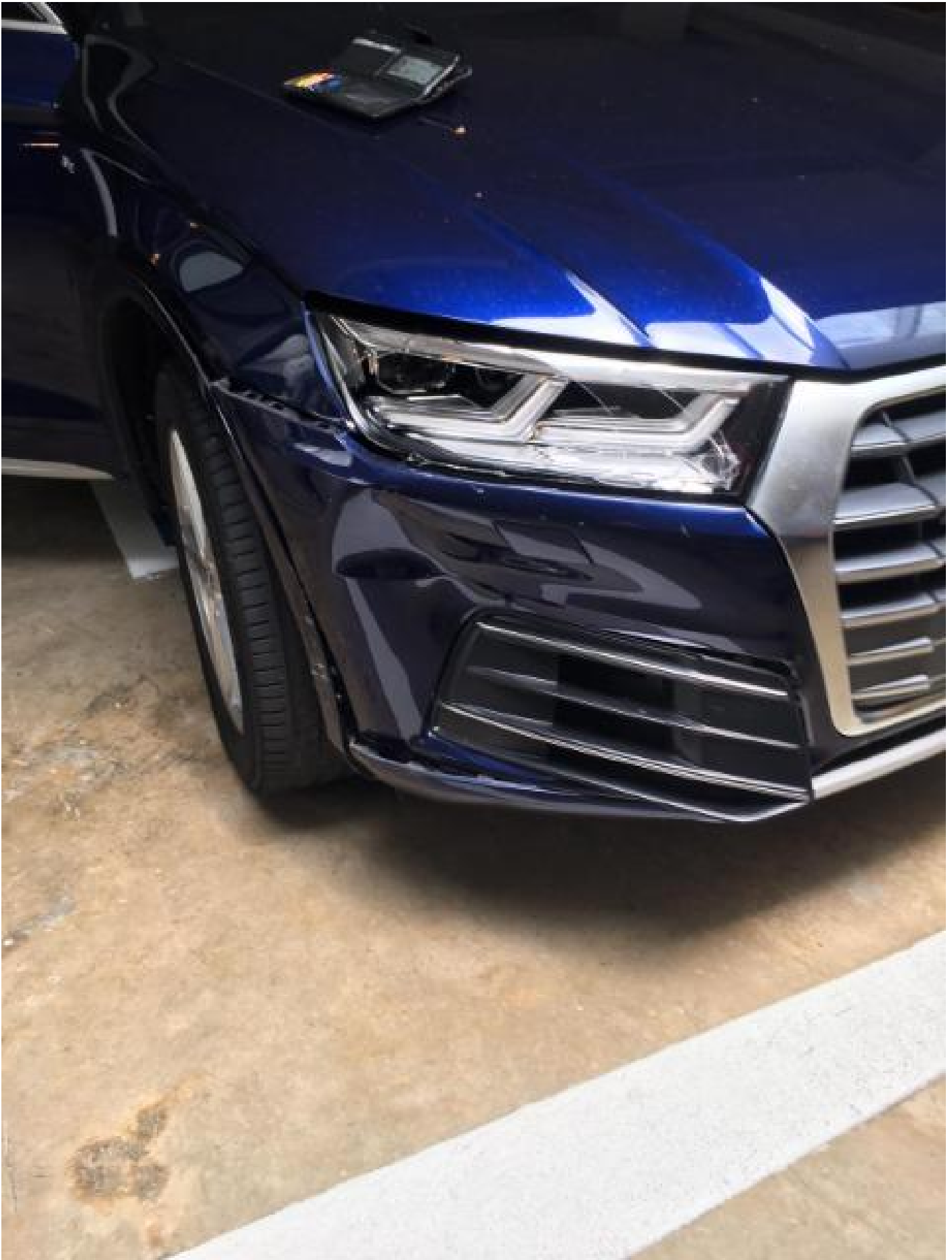
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Accident Photo



Accident Photo



Accident Photo



Accident Photo



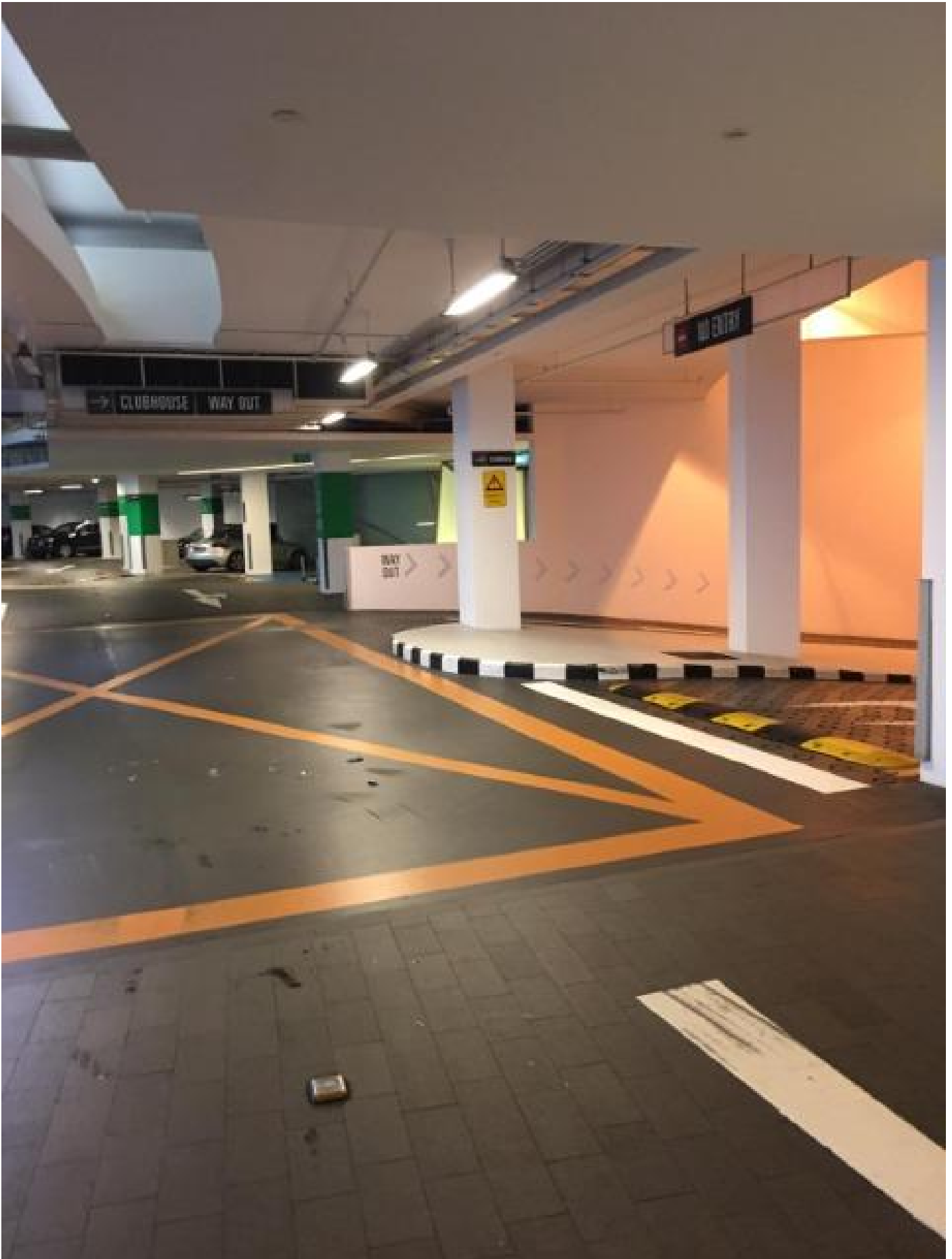
Accident Photo



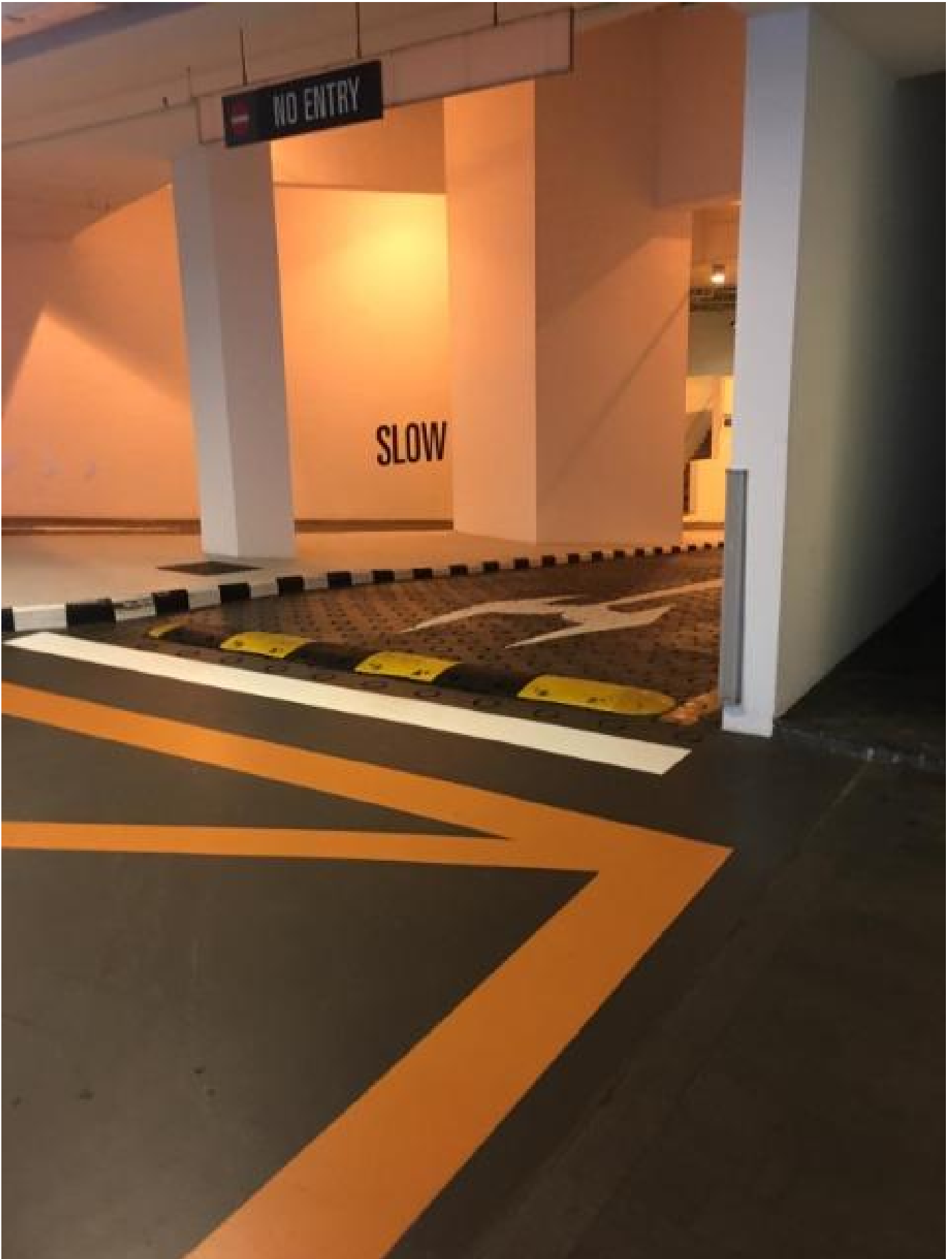
Accident Photo



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