

## 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             | 19/10/2020 08:49       |
| Date Of Accident           | 17/10/2020 15:55       |
| Exact Location Of Accident | PIE TOWARDS PAYA LEBAR |
| Country/State of Loss      | SINGAPORE              |

### DETAILS OF OWN VEHICLE

|                             |                         |
|-----------------------------|-------------------------|
| Vehicle Registration Number | SLC5302M                |
| <b>Insured/Policyholder</b> |                         |
| Name Of Registered Owner    | TAY HAI SONG            |
| NRIC No                     | S1316406A               |
| Email Address               | TAY_SHIYING@HOTMAIL.COM |
| Mobile Phone No             | (LOCAL) +65-93364884    |
| Alternative Phone No        | Others-90308466         |

### Vehicle Particulars

|  |                        |
|--|------------------------|
| Manufacturer   | TOYOTA                 |
| Model  | COROLLA ALTIS 1.6 DUAL |
| 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   | PRIVATE CAR            |

### Insurance Company

|                           |                                      |
|---------------------------|--------------------------------------|
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                        |
| Fleet Policy              | NO                                   |
| Policy Number             | 2100465979-04                        |
| Cover Note Number         |                                      |

### Driver

|                      |                     |
|----------------------|---------------------|
| Name of Driver       | TAY SHI YING        |
| NRIC No              | S9447581C           |
| Date Of Birth        | 19/12/1994          |
| Occupation           | INDOOR              |
| Date Of Driving Pass | 18/08/2014          |
| Driving Experience   | 6 YEARS AND 1 MONTH |

|   |                            |
|---|----------------------------|
| Gender  | MALE                       |
| Mobile Number                                       | (LOCAL) +65-81385957       |
| Fax Number  |                            |
| Contact Number                                      |                            |
| E-Mail Address                                      | TAY_SHIYING@HOTMAIL.COM    |
| Address   | 274B JURONG WEST STREET 25 |
| Postcode  | 642274                     |
| Was driver an employee of the Insured's Company     | NO                         |
| If No, Relationship of the Driver with the Insured  | CHILDREN                   |
| 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?   | NO                                      |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO                                      |
| Number of Passengers (Including Driver)   | 2                                       |
| Passenger 1   | Name: : TAY HUI LIN<br>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

#straightroad Moving straight & Moving straight slc5302m sha6614p WSVC20001635 Accident\_Description The car was stationery on the high way and I stepped on the emergency brake but it did not stop in time and hit the taxi. There was a minor dent to the taxi bumper and the exhaust pipes.

#### 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 | SHA6614P |
| 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



Accident Photo





Driving License

**UBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S9447581C**  
Name: **TAY SHI YING**

Birth Date: **19 Dec 1994**  
Issue Date: **18 Aug 2014**

 002336177H



Driving License

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


|   | EFFECTIVE DATE |
|---|----------------|
| Class 3 Motor Cars= $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of the driver; and other motor vehicles $\leq$ 2500kg | 18 Aug 2014    |

NP 428A

Licence No.: S9447581C

Identification Card

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S9447581C**



Name  
**TAY SHI YING**


**郑诗颖**

Race  
**CHINESE**

Date of birth  
**19-12-1994**

Sex  
**F**

Country of birth  
**SINGAPORE**



Identification Card

4375848



NRIC No. **S9447581C**



Date of issue  
**23-03-2009**



Address  
**APT BLK 274B JURONG WEST STREET 25  
#14-93  
SINGAPORE 642274**

Accident Photo





Accident Photo

