

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 Submission 04/01/2021 12:25 (SGT)
Date of Accident 01/01/2021 21:20 (SGT)
Exact Location of Accident Singapore
Additional Location Information Near Marine Parade Flyover
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SFY2046C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Ho Tam Wing
NRIC No S2610653B
Email Address BOYINGREN@GMAIL.COM
Mobile Phone No (Phone) +65-96153791
Alternative Phone No +65-90993847

VEHICLE PARTICULARS

Manufacturer Subaru
Model Forester
Variant -
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 - Reporting only
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1800150197-02
Cover Note Number -

DRIVER

Name of Driver Ho Hui Jun
NRIC No S9211484H
Date Of Birth 06/04/1992
Occupation Indoor

Date Of Driving Pass	17/07/2020
Driving experience	6 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90993847
Alt. Phone Number	-
Email Address	NOEMAIL@AIG.COM
Address	416 BEDOK NORTH AVENUE 2
Address complement	LINEAR GREEN @ BEDOK
Postcode	460416
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Tan Leh Yong
Gender	Female

PASSENGER 2

Name	Tan Tian Hao
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

R2000006917 Circumstances Of Accident Vehicle SKE3158C came to a sudden stopped in middle of road infront of E. Coast Park Service Road entrance heading towards Marine Parade Flyover direction thus

I jammed my brake and my vehicle skidded straight resulting my vehicle front left bumper SFY2046C hitting his vehicle bumper SKE3158C. Im travelling to Marine Parade Flyover direction with below 50km/hr after exiting ECP Expressway and 3 cars distances away from SKE3158C. No injuries on passenger and third party passenger including both drivers.

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	SKE3158C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	-
Contact Number	(Phone) +65-97118379
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

Name	Tan Leh Yong
Phone	(Phone) +65-92986083
Email	T_ly8710@hotmail.com

WITNESS 2

Name	Tan Tian Hao
Phone	(Phone) +65-97342062
Email	Tianhaotan@yahoo.com.sg







