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 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.

- 4. The issue and acceptance of this is form by instrained 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 27/01/2021 17:35 (SGT) Date of Accident 26/01/2021 21:00 (SGT) Exact Location of Accident 1 Elias Green, Singapore 519959 Additional Location Information RESIDENCE CARPARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLC2244S**

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CENDANA CARMELO CODERES NRIC No. SXXXX550D Email Address MEL.CENDANA@GMAIL.COM Mobile Phone No (Phone) +65-96322764 Alternative Phone No (Home) +65-68102179

VEHICLE PARTICULARS

Manufacturer Audi Model A4 Variant Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to

your vehicle? No - Claiming third party Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company AIG Type of Coverage Comprehensive Fleet Policy Policy Number 1900248258-01 Cover Note Number

DRIVER

Name of Driver CENDANA CARMELO CODERES NRIC No SXXXX550D Date Of Birth 03/02/1973 Occupation Indoor

Date Of Driving Pass 24/06/2008 Driving experience 12 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-96322764 Alt. Phone Number (Home) +65-68102179 Email Address MEL.CENDANA@GMAIL.COM Address 11 ELIAS GREEN Address complement #05-05 Postcode 519964 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο 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

MY CAR WAS PARKED AT THE RESIDENT CARPARK. AS I WAS JOGGING WITH MY WIFE AT ABOUT 9PM OF 20TH JANUARY 2021, WE SAW A SCRATCH AT THE LEFT SIDE OF THE REAR BUMPER OF MY CAR.

I TOOK PICTURES OF MY CAR AND THE CAR PARKED BEHIND (SLQ9901J) AND THE CORRESPONDING DAMAGES CAUSED.

WE REPORTED THE INCIDENT TO THE CONDO GUARD AND WAS ADVISED TO INFORM THE MANAGEMENT OFFCICE THE FOLLOWING DAY TO GET THE DETAILS OF THE OWNER OF VEHICLE NO. SLQ9901J.

AT 9AM ON THE 27TH OF JANUARY I INFORMED THE CONDO MANAGEMENT OF THE INCIDENT AND THEY TOLD ME TO WAIT UNTIL THEY GET THE CLEARANCE FROM THE OWNER OF SLQ9901J TO GIVE THE CONTACT INFO.

UPON RECEIVING THE OWNER DETAILS FROM THE MANAGEMENT OFFICE (MR. ATUL KAUL, +65 9827 6111) I WAS INSTRUCTED TO CALL HIM TO ASK FOR THE REST OF THE DETAILS NAD TO DISCUSS THE MATTER DIRECTLY.

I CALLED MR. ATUL AND DISCUSSED THE INCIDENT AND ASKED FOR HIS NRIC NUMBER FOR USE IN THE 3RD PARTY CLAIM. MR KAUL AGREED AND WHATSAPP ME HIS NRIC NUMBER AND ASKED FOR THE PHOTOS OF THE DAMAGE TO MY CAR, WHICH I HAVE PROVIDED VIA WHATSAPP.

AFTERWARDS, MR ATUL ASKED ME TO SEND HIM THE ESTIMATED COSTS ONCE READY. (MSG VIA WHATSAPP)

ATTACHMENT(S)	
Was there any video captured by Car Camera?	Yes No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ9901J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



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