

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	18/01/2021 09:40 (SGT)
Date of Accident	15/01/2021 12:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CARPARK AT 83:MACPHERSON LANE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR2305J
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	PAN SHASHA
Passport No/FIN	GXXXX779Q
Email Address	alexandreshasha888@gmail.com
Mobile Phone No	(Phone) +65-92336934
Alternative Phone No	+65-92336934

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	Gla180
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	Axa
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	-

DRIVER

Name of Driver	CHENG WENLONG
NRIC No	SXXXX839E
Date Of Birth	11/01/1988
Occupation	Indoor

Date Of Driving Pass	13/05/2015
Driving experience	5 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88770771
Alt. Phone Number	-
Email Address	alexandreshasha888@gmail.com
Address	640 WOODLANDS RING ROAD #04-11 SPORE 730640
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN/POLICE REPORT

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	YN8301J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
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)	-

