

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 15/03/2021 11:46 (SGT)
Date of Accident 13/03/2021 20:11 (SGT)
Exact Location of Accident North Bridge Rd & Arab St, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKC754L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Tiwari Uma kant
NRIC No S7363340J
Email Address NOEMAIL@AIG.COM
Mobile Phone No (Phone) +65-97374143
Alternative Phone No +65-91503175

VEHICLE PARTICULARS

Manufacturer Mercedes
Model C180k
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 2070147480
Cover Note Number -

DRIVER

Name of Driver Tiwari Uma kant
NRIC No S7363340J
Date Of Birth 10/02/1973
Occupation Indoor

Date Of Driving Pass	26/10/2007
Driving experience	13 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97374143
Alt. Phone Number	+65-91503175
Email Address	NOEMAIL@AIG.COM
Address	Blk 429 Choa Chu Kang Avenue 4
Address complement	#08-409 SINGAPORE
Postcode	680429
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	Collision - Change/cross lane
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?	No
Number of Passengers (Including Driver)	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I am private car hire driver and was on the job to pick up the passenger. After tuning left on north bridge road from Arab street the side extreme left vehicle speed up without seeing the car on right and our both vehicle were scratch only. My vehicle scratch is very minor and negligible. Other party claim more but it is scratch right side near light. No other damage to any other vehicle and also no injury to anyone.

ATTACHMENT(S)

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









