

## 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	25/03/2021 11:26 (SGT)
Date of Accident	24/03/2021 19:35 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	AYE TOWARDS TUAS 8.2KM
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SKP2563P

#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	WONG HOCK HUA
NRIC No	SXXXX635G
Email Address	WONG_HOCK_HUA@PUB.GOV.SG
Mobile Phone No	(Phone) +65-93982236
Alternative Phone No	+65-91136108

#### VEHICLE PARTICULARS

Manufacturer	Kia
Model	Forte
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1591

#### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100384074-06
Cover Note Number	-

#### DRIVER

Name of Driver	WONG JUN WEI
NRIC No	SXXXX626G

Date of Birth	26/04/1994
Occupation	Outdoor
Date of Driving Pass	21/07/2014
Driving experience	6 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91136108
Alt. Phone Number	-
Email Address	WONG.JW13@GMAIL.COM
Address	BLK 818 WOODLANDS ST 82 #05-409
Address complement	-
Postcode	730818
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	Clear
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)	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

#### REFER TO ATTACHMENT

##### 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

Vehicle Registration Number	SHC1238P
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Taxi
Name of Driver	HO TUCK ONN
Contact Number	(Phone) +65-96204712
Address	-
Address complement	-

Code	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-



## SKETCH PLAN

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#### 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that :

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

(i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(ii) investigating the accident and/or my claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

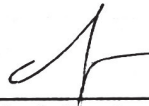
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.


(collectively the "Purposes")

(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

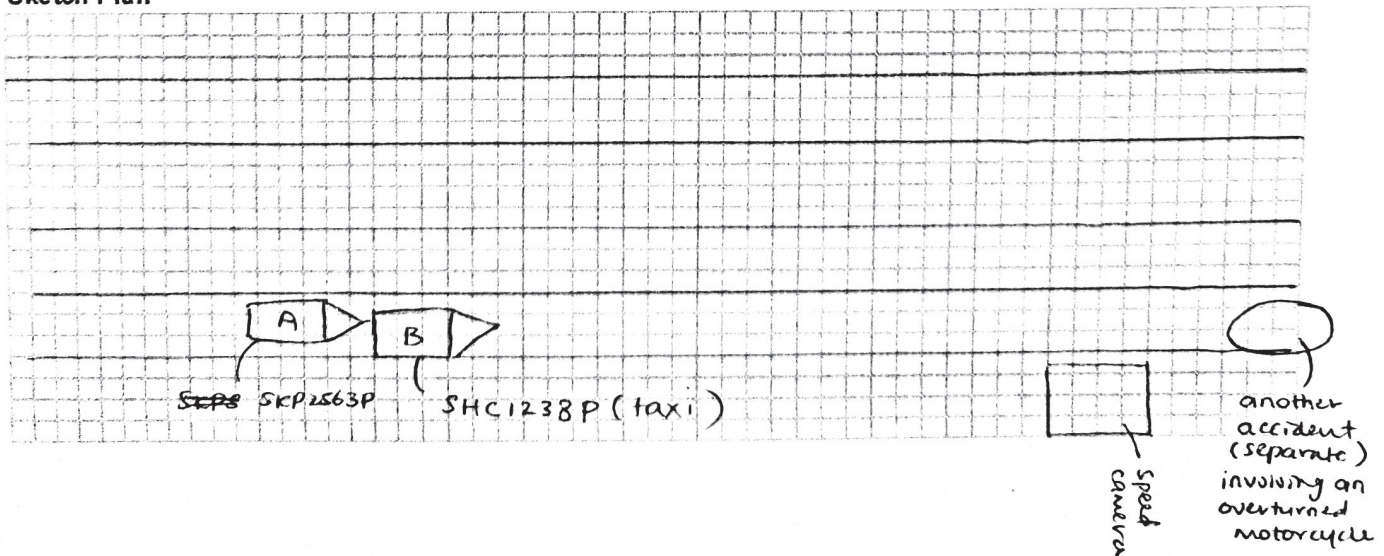
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 25/3/21 0925  
Policyholder's Signature / Date & Time

 25/03/2021 0925  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

### Sketch Plan



### Describe Circumstances of the Accident

On 24 March 2021, at around 1935hrs, I was driving along AYE towards Tuas, approaching Clementi Road exit, at the first lane of the expressway. I was driving at the prescribed speed limit under 90km/h. In front of my car was a blue-coloured taxi SHC 1238P. On other lanes 2, 3, 4, there were heavy traffic.

As the taxi came to an abrupt stop, possibly due to the fact that an accident occurred at some distance in front of his vehicle (after the speed camera). At that material time, I think that there was also another vehicle in front of the taxi which came to a stop. I stepped on my brake hard but was unable to stop in time. I pressed on my horn, which sounded for almost a second, before my car collided into the rear of the taxi (SHC 1238P). At that time, the road surface was wet as the rain had just stopped. I switched on my hazard light and exited the car to check on the taxi in front.


Both of us were not injured and we exchanged particulars.


Damages to taxi SHC 1238P - Dented right rear corner of the bumper and a dislodged metal plate close to the exhaust pipe.


Damages to my vehicle SEP 2563P - severely dented engine cover, damaged LED front light (left), cracked screen on headlight (left), front metal frame broken, interior engine component damaged, air con filter damaged. car plate missing (front)

### Declaration

We declare the foregoing particulars are true in every respect.

 24/3/21 0940  
Policyholder's Signature / Date & Time

 24/25/3/2021 0940  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel