

## 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 Report             | 27/07/2020 11:45                           |
| Date Of Accident           | 25/07/2020 10:35                           |
| Exact Location Of Accident | 218 BEDOK NORTH STREET 1, SINGAPORE 460218 |
| Country/State of Loss      | SINGAPORE                                  |

### DETAILS OF OWN VEHICLE

|                             |                              |
|-----------------------------|------------------------------|
| Vehicle Registration Number | SJD277D                      |
| <b>Insured/Policyholder</b> |                              |
| Name Of Registered Owner    | ROSALIE S ITIS MRS ARAVINDAN |
| NRIC No                     | S6978124A                    |
| Email Address               | ARAJUN29@YAHOO.COM.SG        |
| Mobile Phone No             | (LOCAL) +65-97328843         |
| Alternative Phone No        | Office-91190437              |

### Vehicle Particulars

|  |                       |
|--|-----------------------|
| Manufacturer   | AUDI                  |
| Model  | A3 SPORTBACK 1.8 TFSI |
| 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                    |
| If No, Please state action to be taken                                       | REPORTING ONLY        |
| Vehicle Category   | PRIVATE CAR           |

### Insurance Company

|                           |                                      |
|---------------------------|--------------------------------------|
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                        |
| Fleet Policy              | NO                                   |
| Policy Number             | 2100260845-09                        |
| Cover Note Number         |                                      |

### Driver

|                      |                      |
|----------------------|----------------------|
| Name of Driver       | ARAJUN ARAVINDAN     |
| NRIC No              | S9938839J            |
| Date Of Birth        | 29/11/1999           |
| Occupation           | OUTDOOR              |
| Date Of Driving Pass | 15/07/2018           |
| Driving Experience   | 2 YEARS AND 0 MONTHS |

|   |                          |
|---|--------------------------|
| Gender  | MALE                     |
| Mobile Number                                       | (LOCAL) +65-91190437     |
| Fax Number  |                          |
| Contact Number                                      |                          |
| E-Mail Address                                      | ARAJUN29@YAHOO.COM.SG    |
| Address   | 161 BEDOK SOUTH AVENUE 3 |
| Postcode  | 460161                   |
| Was driver an employee of the Insured's Company     | NO                       |
| If No, Relationship of the Driver with the Insured  | CHILDREN                 |
| Vehicle Registration Number of Driver's Own Vehicle | -                        |
|   | -                        |
| Insurance Company of Driver's Own Vehicle           | -                        |
|   | -                        |
|   | -                        |

#### General Information of the Accident

|                    |            |
|--------------------|------------|
| Type Of Accident   | SIDE SWIPE |
| Weather Conditions | CLEAR      |
| Road Surface       | DRY        |

#### Other Information

|   |    |
|---|----|
| Was any foreign vehicle involved in this accident?  | NO |
| Number of vehicles (including own vehicle) involved in the accident                         | 2  |
| Was any body injured in the Accident?   | NO |
| Was any injured conveyed to hospital by ambulance?  |    |
| Was any other material or property damaged?   | NO |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver)   | 1  |

#### Details of Police Action

|   |    |
|---|----|
| Was the accident reported to the police?  | NO |
| If Yes, Please state which Police Station |    |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom?                     |    |

#### Circumstances of Accident

WSVC20001163 Accident\_Description Accident occurred at block 218 bedok north street 1 carpark. I signalled to reverse into my parking lot. As i was reversing and turning into the lot the taxi driver drove by my side and did not wait for me to finish parking. As i was reversing i heard a bump and i immediately stopped the car. Both of us pulled over to check the damages. We exchanged phone numbers and took pictures of the vehicles. The taxi had a scrape on the front left door and a dent on the rear left door. However my car only had a few minor scratches under the right front headlights. The taxi driver claimed that both damages that his car had incurred was because of me. I strongly disagree as it is impossible for his car to have those damages and for my car to have just a few minor scratches. He then asked me to pay for the damages. I did not do that as i believe it was not my error as i had already signalled and was already in the midst of parking and reversing. It was his impatience of not letting me complete my parking which led to this incident. He then told me he was gonna file a report and likewise i am doing so. The taxi was a silver hyundai with the registration plate of SHD1379K.

#### 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 | SHD1379K |
|-----------------------------|----------|

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

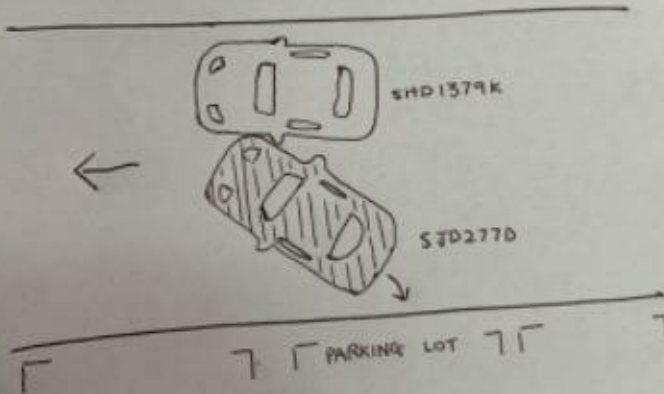
Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan

▨ - ME (REVERSING INTO LOT)

□ - OTHER DRIVER (DRIVING STRAIGHT)



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Driving License



## Driving License



Identification Card



# Identification Card



Other



Car Accident Taxi 10:35  
25 July



message



call



video



mail

phone

9109 7550