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.

 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 13/01/2021 12:16 (SGT) Date of Accident 12/01/2021 11:25 (SGT) Exact Location of Accident Singapore Additional Location Information PIE changi air port to sims ville exit Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLV4562K

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Ramesh Kumar Patro NRIC No. S2730947Z Email Address NOEMAIL@AIG.COM Mobile Phone No (Phone) +65-97826348 Alternative Phone No +65-97766925

VEHICLE PARTICULARS

Manufacturer Subaru Model Forester 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 Cover Note Number

DRIVER

Name of Driver Ramesh Kumar Patro NRIC No S2730947Z Date Of Birth 21/07/1967 Occupation Indoor

Date Of Driving Pass 24/03/2011 Driving experience 9 YEARS AND 10 MONTHS Gender Mobile Number (Phone) +65-97826348 Alt. Phone Number +65-97766925 Email Address NOEMAIL@AIG.COM Address 185 TANJONG RHU ROAD Address complement SANCTUARY GREEN #06-01 SINGAPORE Postcode 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 - Head to Rear Weather Conditions Rainina Road Surface Wet 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? 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

R2000006973 Circumstances Of Accident

There was an accident on main road KPE

our vehicle is on sims way from PIE Changi just to merging onto KPE. so traffic police was clearing to avoid the traffic. the car IN front suddenly applied brake

hence Reela the driver of my car also applied brake

due to wet road

the car came stopped with just touching the braked car ahead with license number GBH6842G

there was drizzling and wet road

which caused to touch his car back with our car name plate. there was no damage to our car. the traffic police came and verified any injury of both the driver

both have confirmed there was no injury due to minor touch. than the traffic police and asked to move to clear the traffic.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No



DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	gbh6842g
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	-
Contact Number	(Phone) +65-81686064
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-















