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.

- 4. The issue and acceptance of this is form by instrained 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 27/05/2021 09:50 (SGT) Date of Accident 26/05/2021 13:05 (SGT) Exact Location of Accident Singapore Additional Location Information Ang Mo Kio Ave 5 Singapore (near Block 609) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKS4240S

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Md Shakhawet Hossain NRIC No S2736781Z noemail@aig.com Email Address Mobile Phone No (Phone) +65-97290652 Alternative Phone No +65-67299648

VEHICLE PARTICULARS

Manufacturer Nissan Model Teana 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 Transmission Auto CC 1997

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Nο Policy Number 2100409143-06 Cover Note Number

DRIVER

Name of Driver Md Shakhawet Hossain NRIC No S27367817 Date Of Birth 07/01/1964 Occupation Indoor Date Of Driving Pass 23/12/2009 Driving experience 11 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-97290652 Alt. Phone Number +65-67299648 Email Address noemail@aig.com Address 481 Yio Chu Kang Road Address complement #10-06 SINGAPORE Postcode 787056 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 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? 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

Own vehicle (A) was overtaking a vehicle (B) moving very slowly near a 'T' junction at Ang Mo Kio Ave 5. When the Own Vehicle was on the right side

just 2-3 fleet behind the other vehicle

the vehicle (B) suddenly made a sharp turn to the right to enter the connecting lane of the T junction. The other vehicle did not give any kind of signal before turning. The Own Vehicle driver immediately applied brake

however due to very close proximity contact between the two vehicles could not be avoided. Own vehicle sustained damage to its left head light and the adjacent area. The other vehicle sustained damage to its right side front door area. (pictures attached). There was no passenger on any of the the vehicles. None suffered any kind of injury. Both the drivers stopped their vehicles and came out to exchange information. Own vehicle called AIG to inform.

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	GBK569U
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)	_







