

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	10/06/2021 11:29 (SGT)
Date of Accident	09/06/2021 16:24 (SGT)
Exact Location of Accident	Tampines Ave 5, Singapore
Additional Location Information	ALONG TAMPINES AVE 5 NEAR DARUL GHUFRAN MOSQUE BUS STOP
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL4000T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN LEE CHWEE, PRISCILLA
NRIC No	S1598703J
Email Address	DAMANTAN199770@GMAIL.COM
Mobile Phone No	(Phone) +65-96754357
Alternative Phone No	(Home) +65-62435340

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A3
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	999

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	-
Cover Note Number	1900149117

DRIVER

Name of Driver	TAN YI HSIEN DAMIAN
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NRIC No	S9736126F
Date Of Birth	10/10/1997
Occupation	Indoor
Date Of Driving Pass	27/11/1963
Driving experience	57 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92353265
Alt. Phone Number	-
Email Address	DAMIANTAN199770@GMAIL.COM
Address	400 UPPER CHANGI ROAD
Address complement	-
Postcode	486927
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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

AT AROUND 1624HRS ON TAMPINES AVE 5, PARALLEL TO AND ON THE SAME SIDE AS DARUL GHUFRAN MOSQUE BUS STOP, THERE WAS A SILVER TAXI (SHB8310Y, HP:81835901)WHO MADE A STOP WHILE IT WAS A GREEN LIGHT TO ALLOW A BUS TO ENTER THE BUS BAY. I BRAKED BEHIND HIM AND CAME TO A COMPLETE STOP. THEN, A CAR REAR ENDED MY CAR (WINSON LIM, SLV2973X, HP:81576327) AND CAUSED MY CAR TO LURCH FORWARD SLIGHTLY GRAZING THE TAXI INFRONT. THERE WERE MINOR SCRATCHES TO THE TAXI INFRONT AND DAMAGE TO MY CAR'S BACK.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLV2973X
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHB8310Y
Vehicle Manufacturer	Hyundai
Vehicle Model	I30
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

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.

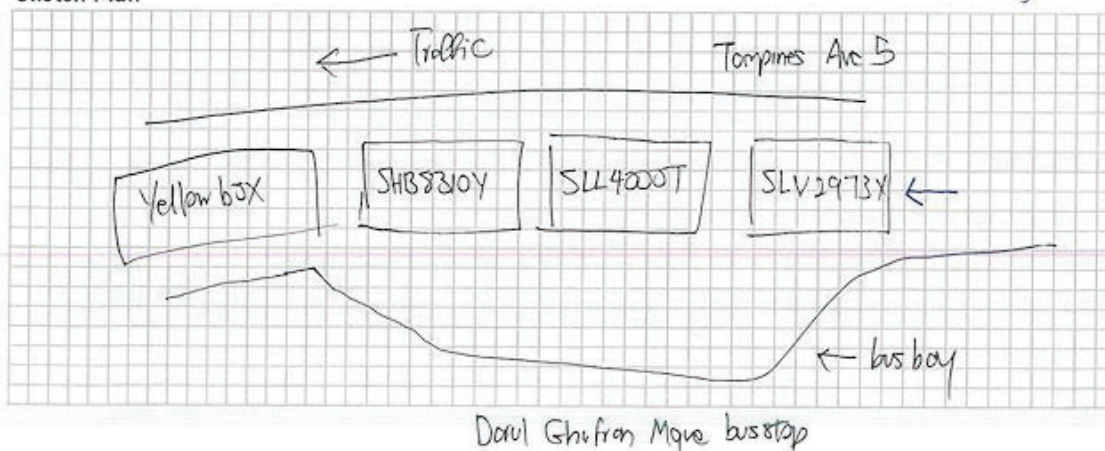
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



Sketch Plan



Describe Circumstances of the Accident

At around 1624hrs on Tampines Ave 5, parallel to and on the same side as Darul Ghufuran Mosque bus stop, there was a silver taxi (SHB 8310 Y, HP: 8183 5901) who made a stop while it was green light to allow a bus to exit the bus bay. I braked behind him and came to a complete stop/direct a complete stop. Then, a car rear-ended my car (Winston Lim, SLV 2973 X, HP: 8157 6327) and caused my car to lurch forward, slightly grazing the taxi in front. There were minor scratches to the taxi in front and damage to my car's back.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel



[Signature]

12/6/21 0933

Tony Fong