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 25/06/2021 09:45 (SGT) Date of Accident 24/06/2021 20:15 (SGT) Exact Location of Accident Singapore Additional Location Information Junction of Carpmael Road and Marshall Lane Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SI X2898U

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHANG MAN PHING JENNY NRIC No S7332157C Email Address woofie008@yahoo.com.sq Mobile Phone No (Phone) +65-97463343 Alternative Phone No +65-82020011

VEHICLE PARTICULARS

Manufacturer

LandRover Model Range rover 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 1999

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 1800027037-03 Cover Note Number

DRIVER

Name of Driver CHANG MAN PHING JENNY NRIC No S7332157C

Date Of Birth 13/08/1973 Occupation Indoor Date Of Driving Pass 24/07/2002 Driving experience 18 YEARS AND 11 MONTHS Gender Female Mobile Number (Phone) +65-97463343 Alt. Phone Number +65-82020011 Email Address woofie008@yahoo.com.sg Address 16 PULASAN ROAD Address complement THE SERENNIA #02-04 SINGAPORE Postcode 424382 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 - Cross Junction Weather Conditions Raining 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 vehicle 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT

It was a rainy night. I was driving straight along Marshall Lane. The taxi was driving straight along Carpmael Road from my right. I collided into the left side of the taxi and we both came to a stop. We moved our vehicles to the side of the road. He came out and was clutching his left shoulder. I asked if he was ok and if I should call ambulance but he said no need

he just needs to rest a while so he sat in his open boot for a while. After a few minutes

he was fine and got up to inspect his vehicle. He said he would go and see a doctor later. He said his car was ok to drive but the side air bag had opened so he did not know if he could drive with it. So he called a tow truck and also his friend to come and get him. He said the tow truck driver told him to report to police but when he called the police

they said it was not necessary since there was no ambulance. We exchanged details and took photos of damage to both vehicles. After his friend came at about 9pm

I left the scene.

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	SHC5682M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	(Phone) +65-96781453
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-









