# **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 21/07/2021 10:04 (SGT) Date of Accident 19/07/2021 16:45 (SGT) Exact Location of Accident Singapore Additional Location Information Great World City Parking Lot Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

+65-98389082

Hyundai

Vehicle Registration Number SKS7490S

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Oh Seok Min Passport No/FIN M60771289 Email Address scott.s.oh@gmail.com Mobile Phone No (Phone) +65-98389082 Alternative Phone No

## VEHICLE PARTICULARS

Manufacturer

Model Santa fe 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 2359

## **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2100410531-06 Cover Note Number

# DRIVER

Name of Driver LIM EUN ME Passport No/FIN G5422160L

Date Of Birth Occupation Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	11/02/1984 Indoor 29/09/2014 6 YEARS AND 10 MONTHS Female (Phone) +65-98389082 - NOEMAIL@AIG.COM 10 Leedon Heights Leedon Residence #04-11 SINGAPORE - No Spouse No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface  OTHER INFORMATION	Side Swipe Clear Dry
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged?  Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  PASSENGER 1	No 2 No - No 2 No
Name Gender	JESUNG OH Male
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Was notice of intended Prosecution given? If yes, against whom?	No No
CIRCUMSTANCES OF ACCIDENT	
R2000007695 Circumstances Of Accident Policy owner's car (SKS7490S) was parked next to the other party's car (SLN7013). While driving out of the parking spot and turning left the left rear fender of SKS7490S scratched the right front bumper of SLN7013B.	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?	Yes No No









