# **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 20/08/2021 10:24 (SGT) Date of Accident 19/08/2021 07:35 (SGT) Exact Location of Accident Singapore Additional Location Information Below the PIE Bedok Reservior Flyover Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Kia

Vehicle Registration Number SLD8890G

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Tan Ah Kow NRIC No S0035315I Email Address nick96444854@gmail.com Mobile Phone No (Phone) +65-96444854 Alternative Phone No +65-98295315

## VEHICLE PARTICULARS

Manufacturer

Model Forte 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 1591

## **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 2100473580-05 Cover Note Number

# DRIVER

Name of Driver Oi Sihui Gwendolin NRIC No S8335265E

Date Of Birth 11/11/1983 Occupation Indoor Date Of Driving Pass 03/09/2003 Driving experience 17 YEARS AND 11 MONTHS Gender Female Mobile Number (Phone) +65-98180376 Alt. Phone Number Email Address nick96444854@gmail.com Address 253 TAMPINES STREET 21 Address complement Postcode 521253 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Relative Does Driver Own Other Vehicles? Nο 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 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? Nο PASSENGER 1 Name Tan Yuhan Emma Gender Female 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 I gave the signal to change lane for quite some time and was about 1/2 way into the other lane when the car collided into me. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Reasons for not uploading a video of the accident INSD DID NOT PROVIDE VIDEO FOOTAGE Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SKG8308T Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-96673247
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	_
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_









