

## 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 .....	18/08/2021 13:02 (SGT)
Date of Accident .....	17/08/2021 20:10 (SGT)
Exact Location of Accident .....	53 Ang Mo Kio Ave 3, Singapore 569933
Additional Location Information .....	Ang Mo Kio Hub basement carpark
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKV3445J
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	Chua Thiam Kim
NRIC No .....	S1764830F
Email Address .....	echua179@yahoo.com.sg
Mobile Phone No .....	(Phone) +65-86612120
Alternative Phone No .....	+65-86612120

#### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	Sylphy
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 .....	1598

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	1900153913-01
Cover Note Number .....	-

#### DRIVER

Name of Driver .....	Chua Thiam Kim
NRIC No .....	S1764830F

Date Of Birth .....	03/02/1966
Occupation .....	Outdoor
Date Of Driving Pass .....	09/03/1987
Driving experience .....	34 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-86612120
Alt. Phone Number .....	+65-86612120
Email Address .....	echua179@yahoo.com.sg
Address .....	628 Upper Thomson Road #03-48
Address complement .....	-
Postcode .....	787131
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 .....	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
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) .....	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	Tiong Geok Bee
Gender .....	Female

#### PASSENGER 2

Name .....	Chua Zhi Wei
Gender .....	Female

#### PASSENGER 3

Name .....	Chua Zhi Ning
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

Please refer to sketch plan

#### 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 .....	SMF7222U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Tong Pau Eng Anna
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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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.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that :




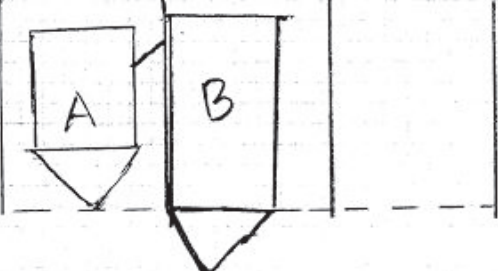
(a) My insurer , my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

<p style="text-align: center;"></p> <p>Policyholder's Signature / Date &amp; Time <b>18 AUG 2021</b></p>	<p style="text-align: center;"></p> <p>Driver's Signature (If driver is not the policyholder) / Date &amp; Time</p>	<p style="text-align: center;"></p> <p>Witnessed by Reporting Centre Personnel <b>Angie Soh</b></p>
<p><b>Sketch Plan</b>      <b>AMK HUB BASEMENT CAR PARK</b></p> <div style="text-align: center; border: 1px solid black; width: 300px; margin: 0 auto; padding: 10px;">  </div>		

**Describe Circumstances of the Accident**

On 12/8/2021 at about 810pm. I was at Ang Mo Kio Hup Basement Car Park, I and my family buy something and back to my car. (SKU3445). There was a car B (SMF722U) beside to me on my left. My daughter was on left rear, open the door to put her thing. The vehicle B start engine and move out car park lot without notice my car and hit into my rear left door. My car was stationary at that time. I got video capture the accident before & after.

**Declaration**

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time  
18 AUG 2021



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



Witnessed by Reporting Centre Personnel  
Angie Soh