

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 Actual 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	11/01/2023 12:40 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	11/10/2021 09:45 (SGT)
Exact Location of Accident	Dunearn Rd, Singapore
Additional Location Information	DUNEARN ROAD TOWARDS NEWTON CIRCUS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR134J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANDREW OHARA
NRIC No	S7477214E
Email Address	ANDREW@EDEAPAW.COM.SG
Mobile Phone No	(Phone) +65-97689678
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	GTR
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	3799

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2100138880-13

DRIVER

Name of Driver	ANDREW OHARA
NRIC No	S7477214E
Date Of Birth	13/04/1974
Occupation	Indoor

Date Of Driving Pass	20/12/1993
Driving experience	27 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97689678
Alt. Phone Number	-
Email Address	ANDREW@EDEAPAW.COM.SG
Address	241 SIXTH AVENUE
Address complement	-
Postcode	275775
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 - Head to Rear
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	Yes
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	PONIRAH BINTI SAN MUHDI
Gender	Female

PASSENGER 2

Name	OLIVER SAMUEL OHARA
Gender	Male

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

REFER TO ATTACHMENT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKW2614P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIM CHONG HOE
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**IMPORTANT NOTICE**

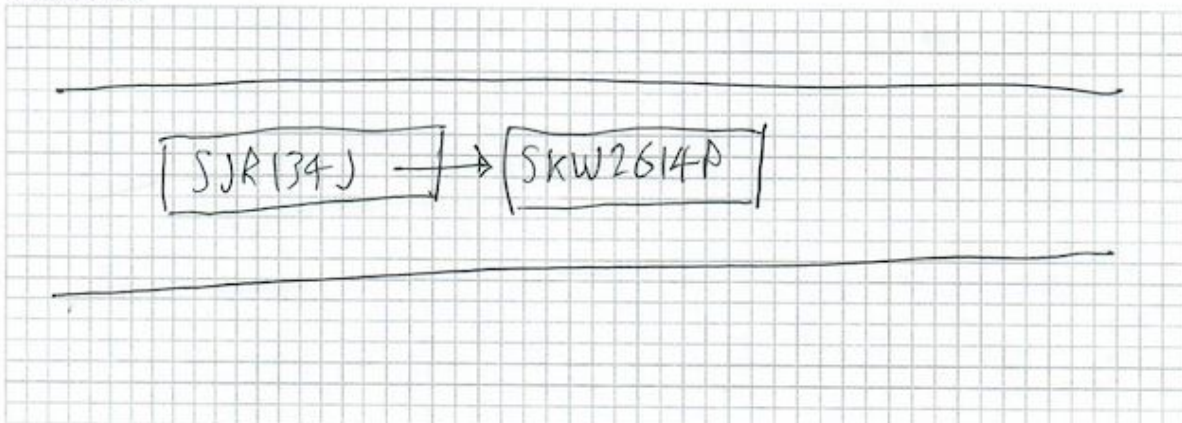
1. Please report **correctly** the details of the accident to speed up the claims process.
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8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, acknowledge, agree and consent that :
(a) My insurer, my workshop and the General 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Anda Shon
11 JAN 2023 @ 11:18H

Policyholder's Signature / Date &
Time

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

[Signature]
Witnessed by Reporting Centre
Personnel

Sketch Plan

Describe Circumstances of the Accident

AS ATTACHED

Declaration

We declare the foregoing particulars are true in every respect.

Anda Shaz

Policyholder's Signature / Date &
Time 11 JAN 2023 @ 11:54

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

[Signature]

Witnessed by Reporting Centre
Personnel

On 11 October 2021, I was driving my domestic help PONIRAH BINTI SAN MUHDI (born 23 August 1979) and my son OLIVER SAMUEL OHARA (born 13 April 2020) from my home to my mother's home.

I was travelling along Dunearn Road towards Newton Circus and I was especially careful as my then infant son was in my vehicle.

Traffic was light and it was a clear sunny morning, and the road was dry.

The vehicle travelling in front of me SKW2614P suddenly braked very hard and came to a complete stop.

I similarly braked very hard, but I was unable to stop in time. My vehicle bumped into the rear of SKW2614P

I activated my hazard lights to warn traffic behind me and I alighted my vehicle. The driver of SKW2614P, LIM CHONG HOE ("LIM") similarly alighted his vehicle

The damage to SKW2614P was minimal, and LIM exchanged particulars with me. LIM also took photos of both vehicles. Unfortunately, I did not have my mobile phone with me at the time.

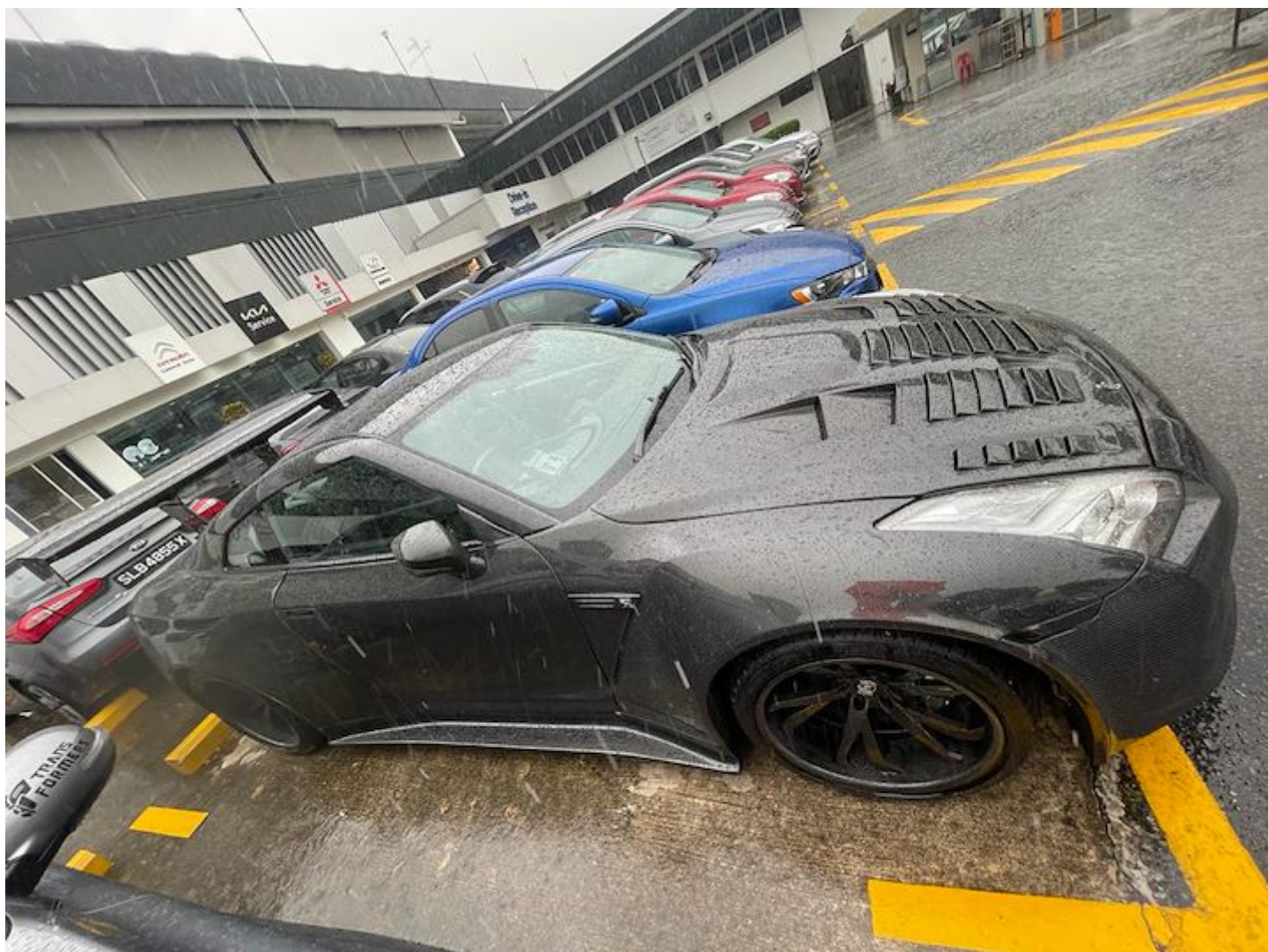
I asked LIM why he braked so hard and he said that he thought there was an obstacle in front of him. LIM said that he would contact me to resolve the matter as there was minimal damage to his vehicle, and I highlighted that he had no reason to jam his brakes.

Following the accident, I was contacted by a workshop purportedly acting for LIM. I requested that they forward me an itemized list with costs of the repairs to SKW2614P, and that LIM contact me as I had misplaced his contact particulars. I did not hear from that workshop again, and I never heard from LIM.

I have since been given to understand from your representative that LIM is claiming for his personal injuries purportedly sustained in the accident. I recall that LIM did not appear to have been hurt at the time. My domestic help similarly recalls that LIM was not hurt. The impact was light and the damage was minimal, and my infant son did not even react adversely like cry.



















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

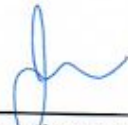
Original Report No: SC1X231B0001-01 Vehicle Registration No: SJR 134J
 Name (as shown in NRIC): Andrew Ohara NRIC/FIN/Passport No: 214E
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 9768 9678
 Email Address: _____
 Date of Accident: 11/10/2021 Time of Accident: 9:45
 Place of Accident: Dunearn Road Towards Newton Circus
 Insurance Company: Alfa

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

Addendum On 'Date of Accident'

Policyholder / Driver's Signature
 Date:


 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 Date: 22/03/2023