

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 19/10/2021 09:53 (SGT)
Date of Accident 18/10/2021 17:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information R2000007978 Exact Location of Accident Turning in left at Y-Junction from Punggol Field into Punggol Road (near Prive Condo)

Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMA9089B

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Deepak S/O Gulabrai Sawlani
NRIC No S7319233A
Email Address dgsawlani@outlook.com
Mobile Phone No (Phone) +65-91596350
Alternative Phone No +65-91596350

VEHICLE PARTICULARS

Manufacturer Nissan
Model Qashqai
Variant Qashqai 1.2 DIG-Turbo
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 1197

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1800072978-03
Cover Note Number -

DRIVER

Name of Driver	Deepak S/O Gulabrai Sawlani
NRIC No	S7319233A
Date Of Birth	27/05/1973
Occupation	Indoor
Date Of Driving Pass	01/07/2010
Driving experience	11 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91596350
Alt. Phone Number	+65-91596350
Email Address	dgsawlani@outlook.com
Address	293 PUNGGOL CENTRAL
Address complement	#03-439 SINGAPORE
Postcode	-
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Jiya Sawlani Govindani
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

R2000007978 Circumstances Of Accident Car A was stationary waiting to turn into Punggol Road. Car B was stationary waiting behind Car A and waiting for Car A to move. Road along Punggol Road was clear. Car B driver was under the impression that Car A had moved ahead already. Car B driver checked blind spot and released brake to allow Car B to move forward. Car B driver realized Car A had not moved and applied brake but unable to avoid collision from behind. Both cars later moved away from the Y junction and exchanged particulars and took photos. Car A driver was able to open the booth normally. Car A had small scratches to its car bumper. Car B license plate had a bend

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	SMZ6526U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	(Phone) +65-88554484
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-











