

# 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 .....	23/11/2021 17:06 (SGT)
Date of Accident .....	22/11/2021 23:00 (SGT)
Exact Location of Accident .....	273A Compassvale Link, Singapore 541273
Additional Location Information .....	CARPARK LOT NO 139
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKF4503C
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	GOON WEI LIK
NRIC No .....	SXXXX177D
Email Address .....	g_weilik@hotmail.com
Mobile Phone No .....	(Phone) +65-97987136
Alternative Phone No .....	+65-97987136

### 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 .....	1500

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	2070073871-01
Cover Note Number .....	-

### DRIVER

Name of Driver .....	GOON WEI LIK
NRIC No .....	SXXXX177D

Date Of Birth .....	15/12/1980
Occupation .....	Indoor
Date Of Driving Pass .....	28/11/2000
Driving experience .....	21 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-97987136
Alt. Phone Number .....	+65-97987136
Email Address .....	g_weilik@hotmail.com
Address .....	BLK 273A COMPASSVALE LINK
Address complement .....	#15-192
Postcode .....	541273
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 .....	Collided into Parked Vehicle
Weather Conditions .....	Clear
Road Surface .....	Wet

#### 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) .....	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### 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

On 22 Nov 21 (Mon), 2300H, when I went to my vehicle (SKF4503C), I saw that the front left section of my vehicle was damaged and the impact was so strong that my vehicle had shifted position as well (see attached picture). There was a note on my windscreen informing me to call Mr Kang at 90172043. From my understanding with Mr Kang, he highlighted that his worker drove a van, had lost control on the wet carpark flooring and hence damaged my vehicle. I had notified Mr Kang that my intention was to tow my vehicle to my intended workshop for assessment and repairs, and claims through his car insurance. However, Mr Kang offered to settle this issue privately at his recommended well-known workshop instead. When I request the details of his vehicle or a picture of his damaged vehicle so that I can claim insurance instead, he was not forthcoming and replied to me that he needs to check as it was late already. I fear that his company might have started to repair their vehicle or make the damaged portion on their vehicle less serious than it might be. May I seek your kind assistance to review your gantry footage to see if it is possible to find the vehicle plate number of that suspected vehicle that hit my parked vehicle (SKF4503C) in parking lot 139, of Compassvale Link (SK70), Blk 273A. There were no other details of what time this incident occurred, or if indeed it was a van or a lorry. I do not have any in-car footage as well.

#### 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 .....	GBA6257H
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	-
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**

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8. **Consent under the Personal Data Protection Act (PDPA)**

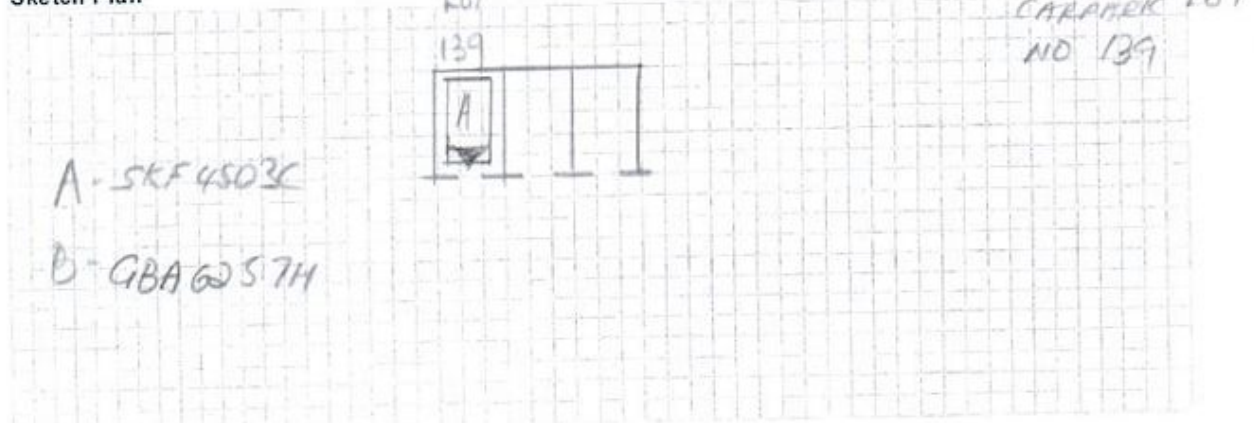
I understand, acknowledge, agree and consent that:

- (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' 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.
- (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.

*[Signature]* 23 NOV 21  
Policyholder's Signature / Date & Time

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

*[Signature]* 23/11/2021  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

P/s refer to the statement.

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre Personnel





























