

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	15/12/2021 16:06 (SGT)
Date of Accident	14/12/2021 15:05 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Kembangan MRT taxi station
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF1804E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SI SIONG YEW
NRIC No	S6866177C
Email Address	ssy9768@hotmail.com
Mobile Phone No	(Phone) +65-93839349
Alternative Phone No	+65-93839349

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	B180
Variant	BENZ B180 SEDAN STYLE
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	1595

INSURANCE COMPANY

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

DRIVER

Name of Driver	SI SIONG YEW
NRIC No	S6866177C

Date Of Birth	09/07/1968
Occupation	Indoor
Date Of Driving Pass	21/06/2010
Driving experience	11 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93839349
Alt. Phone Number	+65-93839349
Email Address	ssy9768@hotmail.com
Address	3 Woodlands Drive 72
Address complement	#10-05 SINGAPORE
Postcode	738090
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)	1
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

I was trying to pick up a passenger at the Kembangan MRT taxi station on 14/12/21 time 15:05. When I stop my car behind SHD 1642A with a safe distance away

I didn't notice that I was not fully applying the brakes completely

it cause my car to slowly move ahead in a very slow motion. When I realized the car was moving

I quickly stepped on the brake

just right before I stop the car

my left side front corner accidentally "kissed" SHD 1642A right rear side corner. I immediately went down to have a check

there is no damage or dent on my car (SMF1804E) and the taxi (SHD1642A).

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

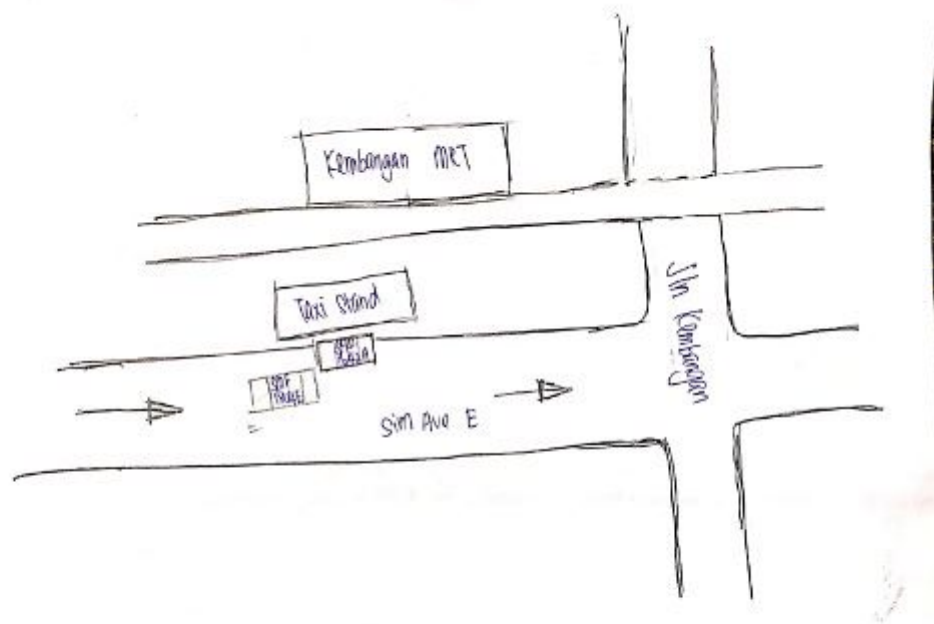


Vehicle Registration Number	SHD1642A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

WITNESS DETAILS

WITNESS 1

Name	SI TONG YUAN
Phone	(Phone) +65-83323672
Email	-



CS 扫描全能王 创建

