

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	20/12/2021 15:18 (SGT)
Date of Accident	18/12/2021 15:15 (SGT)
Exact Location of Accident	Near 94 Guillemard Rd, Singapore 399717
Additional Location Information	GUILLEMARD ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGH7637S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUA SWEE BOON (CAI RUIWEN)
NRIC No	SXXXX888C
Email Address	CRW_LUCIFER@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-94306852
Alternative Phone No	+65-94306852

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1395

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1700063199-04
Cover Note Number	-

DRIVER

Name of Driver	CHUA SWEE BOON (CAI RUIWEN)
NRIC No	SXXXX888C

Date Of Birth	23/08/1977
Occupation	Indoor
Date Of Driving Pass	15/05/2006
Driving experience	15 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94306852
Alt. Phone Number	+65-94306852
Email Address	CRW_LUCIFER@YAHOO.COM.SG
Address	BLK 609 ANG MO KIO AVE 4
Address complement	#10-1169
Postcode	560609
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PECK JAN JIAT DAMON
Gender	Male

PASSENGER 2

Name	PNG HIANG HOON
Gender	Female

PASSENGER 3

Name	YEO JIA CHENG KAYDEN
Gender	Male

PASSENGER 4

Name	AMBERLY PECK
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

I WAS DRIVING DOWN GUILLEMARD ROAD TOWARDS NICOLL HIGHWAY ON 2ND LANE. IN FRONT WAS A LARGE VEHICLE (STATIONARY) IN THE LANE WAITING TO MAKE A RIGHT TURN TOWARDS GEYLANG LOR 20. SUDDENLY, A WHITE AUDI A3 APPEAR IN FRONT OF THE LARGE VEHICLE TO MAKE A RIGHT TURN INTO GUILLEMARD CRESCENT. ME AND THE AUDI A3 LINE OF SIGHT WAS TOTALLY BLOCKED BY THE LARGE VEHICLE. WHEN THE AUDI A3 APPEAR IN FRONT OF ME, DISTANCE IS ONLY ABOUT TWO CAR LENGTH AWAY AND WE IMPACTED ONE SECOND LATER. THE FRONT OF MY CAR IMPACTED INTO THE AUDI A3 LEFT REAR DOOR / WHEEL. THE IMPACT PUSHED THE AUDI A3 90 DEGREE ANTI-CLOCKWISE AND CAME TO A STOP FACING THE OPPOSITE TRAFFIC. DUE TO THIS ACCIDENT, MY CAR PASSENGER CONSISTING OF TWO ADULTS AND TWO CHILDREN GOT VARIOUS DEGREE OF SKIN ABRUSHES AND BRUSHES BUT DO NOT REQUIRE MEDICAL ATTENTION TO DATE OF FILLING THIS REPORT. MY DASHBOARD DECORATION CONSISTS OF 4 SWAROVSKI CRYSTAL FIJURIES WERE ALSO BROKEN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	CAMERA MEMORY CARD TAKEN BY POLICE. VIDEO TO BE SUBMITTED LATER ONCE GOTTEN BACK FROM POLICE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SML3007U
Vehicle Manufacturer	Audi
Vehicle Model	A3
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	KOH HUAY LENG
NRIC No	SXXXXX535I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	4

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN

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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.

Policyholder's Signature / Date & Time
[Signature]
 20 Dec 2021
 0955hr.

Driver's Signature (If driver is not the policyholder) / Date & Time
 N.A.
 Witnessed by Reporting Centre Personnel
[Signature]

Sketch Plan
 Legend:
 A = policy holder SGH7637
 B = Third Party SML3007U
 C = Large Vehicle

Describe Circumstances of the Accident

I was driving down Guilford Road towards Nicoll Highway on 2nd lane.

In front was a large vehicle (stationary) in the 1st lane waiting to make a right turn towards Legay W 20.

Suddenly, a white Audi A3 appear in front of the large vehicle to make a right turn into Guilford Crescent.

Me and the Audi A3 line of sight was totally blocked by the large vehicle.

When the Audi A3 appears in front of me, distance is only about two car length away and we impacted one second later.

The front of my car impacted into the Audi A3 left rear door/wheel.

The impact pushed the Audi A3 90° anti-clockwise and came to a stop facing the opposite traffic.

Due to this accident, my car passenger consisting of two adults and two children got various degrees of skin abrasion and bruises but do not require medical attention to date of filing this report.

My dashboard decoration consists of 4 swastika symbols figurines were also broken.

CMSTAN

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]
20 Dec 2021
1025hr.

Policyholder's Signature / Date & Time

N.A.

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

[Signature]

Witnessed by Reporting Centre Personnel



































































