

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 18/12/2021 12:29 (SGT)
Date of Accident 18/12/2021 08:00 (SGT)
Exact Location of Accident 101 Bedok North Rd, Singapore 469678
Additional Location Information SPC PETROL
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKF2836E

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO KEE HUAT
NRIC No SXXXX146A
Email Address KEEHUAT.TEO@GMAIL.COM
Mobile Phone No (Phone) +65-96155981
Alternative Phone No +65-96155981

VEHICLE PARTICULARS

Manufacturer Audi
Model Q3
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 7210086538
Cover Note Number -

DRIVER

Name of Driver TEO KEE HUAT
NRIC No SXXXX146A

Date Of Birth	16/06/1969
Occupation	Indoor
Date Of Driving Pass	25/04/1990
Driving experience	31 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96155981
Alt. Phone Number	+65-96155981
Email Address	KEEHUAT.TEO@GMAIL.COM
Address	18 BEDOK RISE
Address complement	#10-54
Postcode	465410
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	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)	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 MAKING A LEFT TURN OUT OF A CAR WASH STATION INTO THE DRYING AREA WHEN VEHICLE CAR PLATE (SLD 8939 B) COLLIDED WITH MY CAR, ENTERING THE SPC PETROL STATION FROM A EXIT ONLY DRIVEWAY.

- WHEN I STARTED TO MOVE OUT OF THE WASHING BAY, I CHECKED THAT THERE WERE NO PEDESTRIAN NOR INCOMING CAR AND I PROCEEDED TO CHECK FOR CAR/ PEDESTRIAN COMING FROM MY LEFT GOING TOWARDS THE EXIT ON MY RIGHT. UPON CONFIRM NO CARS / PEDESTRIAN FROM MY LEFT, I PROCEEDED TO DRIVE FORWARD AND COLLIDED WITH THE OTHER VEHICLE THAT COME IN FROM THE EXIT ONLY DRIVEWAY.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD8939B
Vehicle Manufacturer	Toyota
Vehicle Model	Altezza
Vehicle Variant	-
Vehicle Colour	Gray
Vehicle Category	Private car

Name of Driver	CHNG CHEK SENG
Contact Number	(Phone) +65-90268820
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

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' 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.

(collectively the "Purposes")

(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

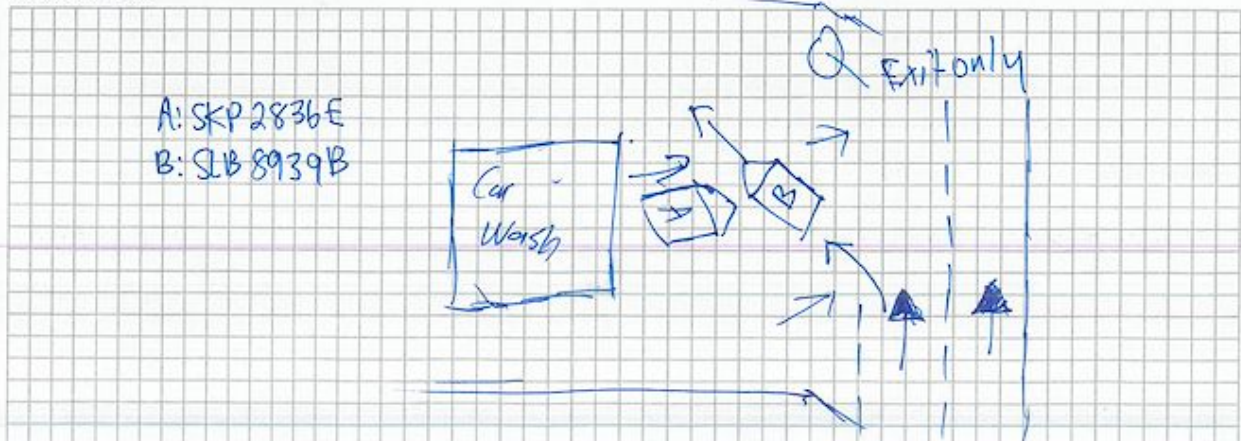
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

[Signature] 18/12/2020
Policyholder's Signature / Date & Time

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

[Signature]
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

- (within a SPC Petrol station)
- I was making a left turn out of a car wash station into the drying area when vehicle (car plate 3LD89378) collided with my car, entering the SPC Petrol station from a "Exit Only" driveway.
 - when I started to move out of the washing bay, I checked that there were no pedestrian nor incoming car and I proceeded to check for cars/pedestrian coming from my left going towards the exit on my right. Upon confirm no cars/pedestrian from my left, I proceeded to drive forward and was collided with the other vehicle that came in from the "exit only" driveway.

Declaration

We declare the foregoing particulars are true in every respect.

 18/12/2021

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel











































