

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 11/02/2022 18:24 (SGT)
Date of Accident 11/02/2022 07:12 (SGT)
Exact Location of Accident Kampong Bahru Rd, Singapore
Additional Location Information ALONG NEIL ROAD TOWARDS KG BAHRU RD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMJ9986P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN MEI LI (CHEN MEILI)@SARAH MICHELLE TAN
NRIC No SXXXX826C
Email Address MAHMOODA71@GMAIL.COM
Mobile Phone No (Phone) +65-96790115
Alternative Phone No (Home) +65-69252420

VEHICLE PARTICULARS

Manufacturer Audi
Model A4
Variant A4 SEDAN 2.0 TFSI
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 2000

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1900080993-02
Cover Note Number -

DRIVER

Name of Driver MAHMOOD BIN AHMAD AMIN
NRIC No SXXXX214E

Date Of Birth	11/07/1971
Occupation	Indoor
Date Of Driving Pass	07/02/1996
Driving experience	26 YEARS
Gender	Male
Mobile Number	(Phone) +65-88781171
Alt. Phone Number	-
Email Address	MAHMOODA71@GMAIL.COM
Address	BLK 1B CANTONMENT RD
Address complement	#33-23
Postcode	085201
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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 - Major/Minor Rd
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	TAN MEI LI
Gender	Female

PASSENGER 2

Name	MYSHA ISABELLA
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

WHEN I REACH AND STOPPED AT EXTREME LEFT LANE NEXT TO WHITE CAR PLATE NO : SMA 3003 M ALONG NEIL ROAD TOWARDS KG BAHRU ROAD. WHEN ROAD IS CLEAR, WHITE CAR PLATE NO : SMA 3003 M TURN LEFT INTO MY LANE. IT CAUSED MY CAR RIGHT CORNER DAMAGED. THE WHITE CAR PLAT ENO : SMA 3003 M STOPPED AND WE EXCHANGED PARTICULAR AND WILL REPORT TO RESPECTIVE INSURANCE.

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	SMA3003M
Vehicle Manufacturer	Toyota
Vehicle Model	Rav4
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	KOH KHENG SIANG
NRIC No	SXXXX963D
Contact Number	(Phone) +65-91252848
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

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.

 11/02/2022
1443 hrs

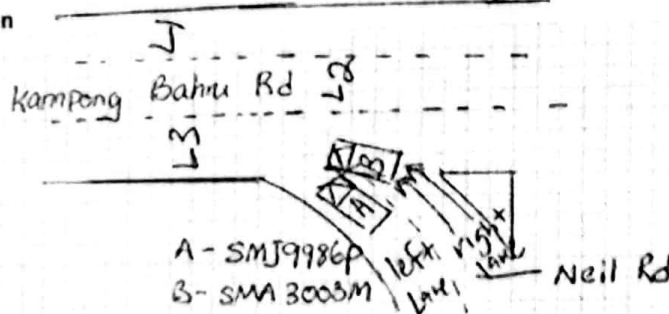
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



Sketch Plan




Describe Circumstances of the Accident

When I reach and stopped at extreme left lane next to white car plate no: SMH 3003 M along Neil Road towards K9 Bahru Rd. When road is clear, white car plate no: SMH 3003 M turn left into my lane. It caused my car right corner damaged. The white car plate no: SMH 3003 M stopped and we exchanged particulars and will report to respective insurance.

Declaration

We declare the foregoing particulars are true in every respect.

 11/02/2022
14:43hrs

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel