

# 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 ..... 26/06/2022 19:44 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 26/06/2022 10:32 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Along junction of Ophir road and Beach Road  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMX8637E

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... DAIMLER FLEET MANAGEMENT SINGAPORE PTE. LTD.  
Company Reg No ..... 199803778Z  
Email Address ..... derrick.lee@mercedes-benz.com  
Mobile Phone No ..... (Phone) +65-68498118  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Mercedes  
Model ..... Cla180  
Variant ..... COUPE PROGRESSIVE  
Exact purpose for which vehicle was being used at time of accident ..... Private hire  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1332

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Policy Number / Cover Note Number ..... 999995580

### DRIVER

Name of Driver ..... LIM YONG HWEE  
NRIC No ..... S7507357G  
Date Of Birth ..... 12/03/1975  
Occupation ..... Indoor

Date Of Driving Pass .....	17/06/2002
Driving experience .....	20 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-91115556
Alt. Phone Number .....	-
Email Address .....	lawlyh75@gmail.com
Address .....	83 DEVONSHIRE ROAD
Address complement .....	#17-05
Postcode .....	239864
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 - Change/cross lane
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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	Passenger 1
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 travelling along Ophir Road near the junction of Beach Road. It was a 5 lane road and my vehicle was in the 5th lane. Suddenly, third party vehicle was on the 4th lane swerved into my lane and grazed the front right side of my vehicle. No injuries involved.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMP4266K
Vehicle Manufacturer .....	Honda
Vehicle Model .....	Freed

Vehicle Variant .....	-
Vehicle Colour .....	Blue
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	(Phone) +65-82141216
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

**Describe Circumstances of the Accident**

I was travelling along Ophir Road near the junction of Beach Road. It was a 5 lane road and my vehicle was in the 5th lane. Suddenly, third party vehicle was on the 4th lane swerved into my lane and grazed the front right side of my vehicle. No injuries involved.

**Declaration**

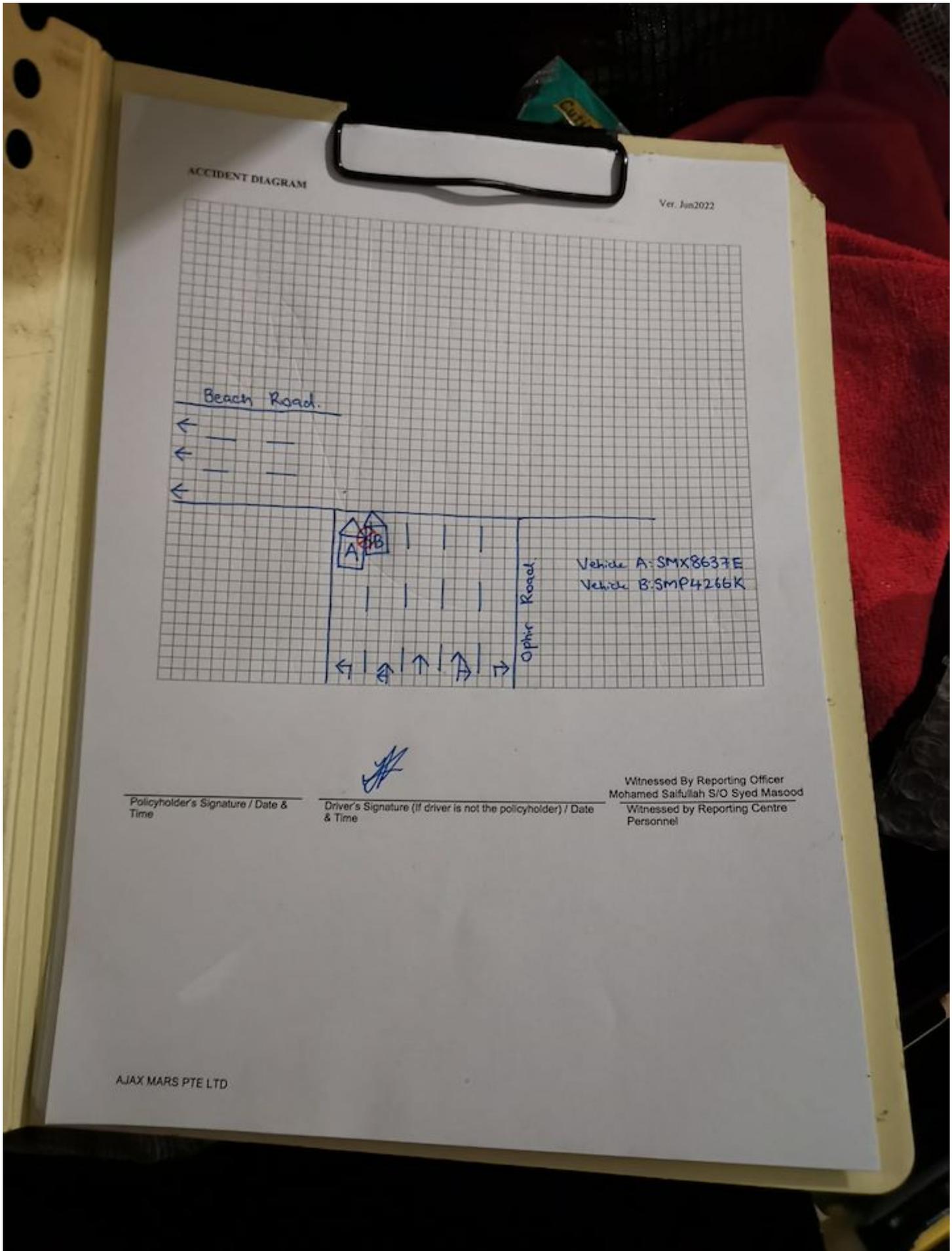
We declare the foregoing particulars are true in every respect.

\_\_\_\_\_  
Policyholder's Signature / Date &  
Time

  
\_\_\_\_\_  
Driver's Signature (If driver is not the policyholder) / Date  
& Time 26 June 2022

\_\_\_\_\_  
Witnessed By Reporting Officer  
Mohamed Saifullah S/O Syed Masood  
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

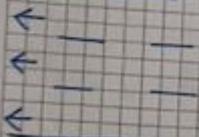




ACCIDENT DIAGRAM

Ver. Jun2022

Beach Road.



Ophir Road.



Vehicle A: SMX8637E  
Vehicle B: SMP4266K

Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer  
Mohamed Saifullah S/O Syed Masood  
Witnessed by Reporting Centre  
Personnel

AJAX MARS PTE LTD



























