

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 Actual 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 05/07/2022 12:58 (SGT)
Reported by Driver
Date of Accident 03/07/2022 18:00 (SGT)
Exact Location of Accident 204A Pasir Ris Street 21, Singapore 511204
Additional Location Information MSCP
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC3480X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HONG SEH MOTORS PTE LTD
Company Reg No 1XXXXX320D
Email Address kenlow@hongseh.com.sg
Mobile Phone No (Phone) +65-88780004
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Lexus
Model Es250
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? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Auto
CC 2494

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 7990000073/1220001005

DRIVER

Name of Driver KHOO SOO HUAT
NRIC No SXXXX460C
Date Of Birth 29/09/1975
Occupation Indoor

Date Of Driving Pass	23/02/2001
Driving experience	21 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88780004
Alt. Phone Number	-
Email Address	khoo2909@gmail.com
Address	BLK 209 PASIR RIS STREET 21 #04-342
Address complement	-
Postcode	510209
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	Hit and run / Vandalism / Damaged whilst parked
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)	0
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	-

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

PLEASE REFER TO SKETCH PLAN

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL8270D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MUHAMMAD FIRDAUS
NRIC No	SXXXX594A

Contact Number	(Phone) +65-87004624
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.
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.



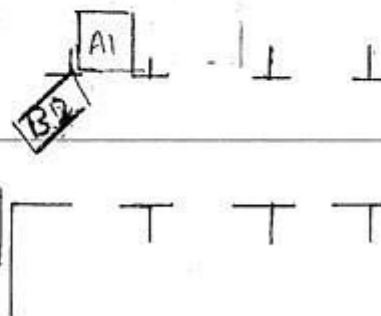
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel (Name as in Nric/ID card)

[Signature] 20/09/2022



A - SNC 348DX

B - SLL 82700

204A Pasir Ris ST21
5511204

Describe Circumstances of the Accident

On 02/07/2022 around noon I parked my vehicle 'A' (SNL3470X) at a designated parking lot and went home, for the rest of the day I was home and only until the next day 03/07/22 I went to the carpark to get my car, I realized that my vehicle (SNL3470X) was badly damaged, I then found a note at the windscreen noticing that vehicle 'B' (SNL 88100) has misjudged his turn and collided onto my parked vehicle, vehicle 'B' driver has provided me with a police report stating that is his fault that all.

Declaration

We declare the foregoing particulars are true in every respect.



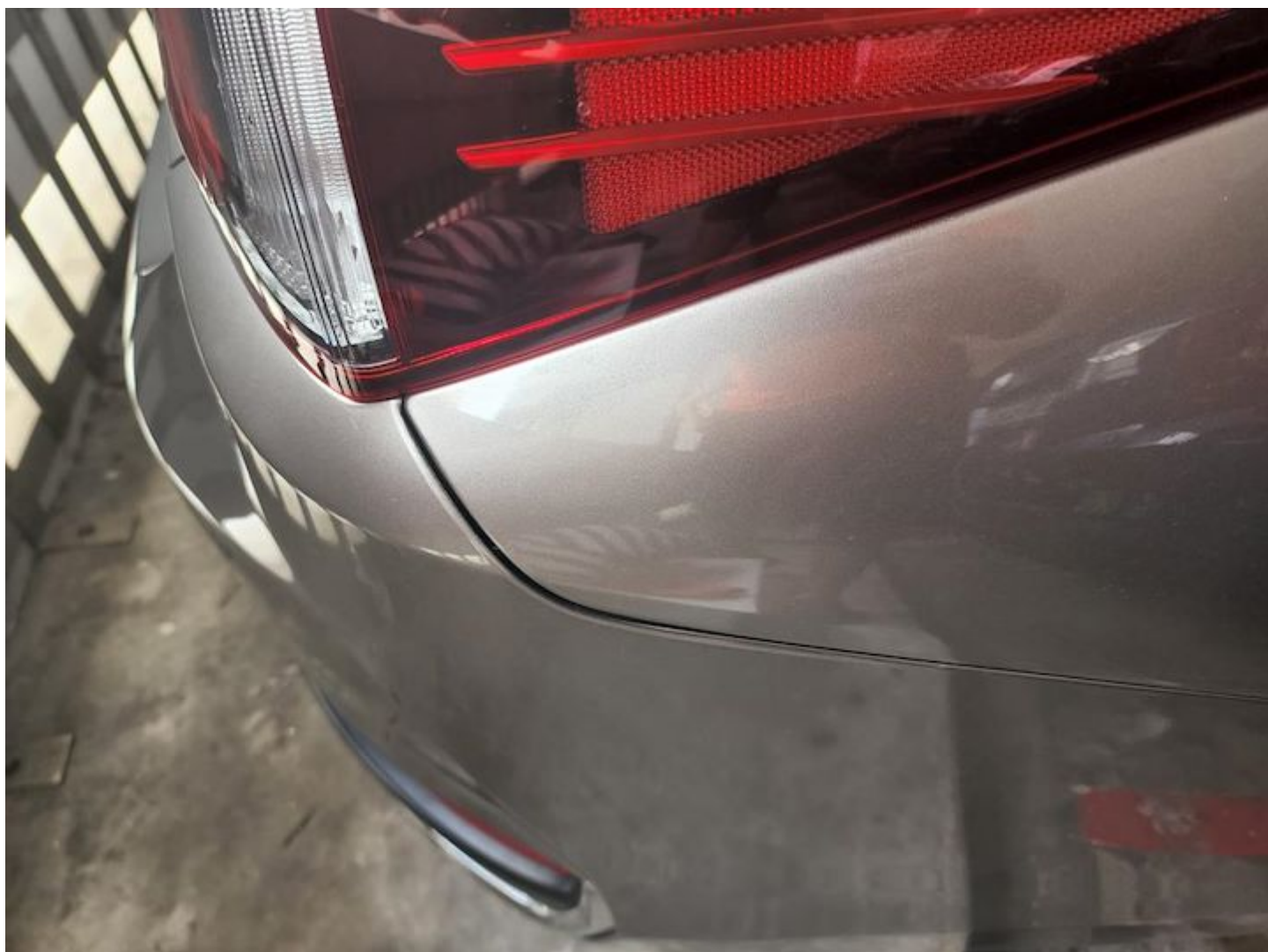
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel





















IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN082274003 Vehicle Registration No: SNC 3480X
 Name (as shown in NRIC): Hong Seh Motors Pte Ltd NRIC/FIN/Passport No: 198203320D
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: 10 Fourth Lake Yang Road Singapore (629109)
 Contact (Tel): 9724 5211 Mobile No.: _____
 Email Address: kenlow@hongseh.com.sg
 Date of Accident: 05/07/22 Time of Accident: 1800
 Place of Accident: 204A Pasir Ris Street 21 5511204
 Insurance Company: AIG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

- ① * amend third party carplate to SLL8270D, as advised by third party.
- ② * replace new skidpad



Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Ken Low
NRIC/FIN No.: 198203320D
Date: 20/09/2022