SS2X228M000U / SME MOTOR PTE LTD ENTRY DATE & TIME: 22/08/2022 17:48 (SGT) SUBMITTED BY: Chia Pei Ying VERSION: 1 (22/08/2022 17:48 (SGT))



SINGAPORE ACCIDENT STATEMENT

Please report <u>correctly</u> the details of the accident to speed up the claims process.
 This Form must be <u>completed by the Policyholder and/or the Actual Driver</u>
 Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

policy hability.
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 22/08/2022 17:48 (SGT) Reported by Both Date of Accident 20/08/2022 15:00 (SGT) **Exact Location of Accident** 23 Tampines Ave 8, Singapore 529598 Additional Location Information CARPARK Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

No - Claiming third party

SND1926K Vehicle Registration Number

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CAI MEIMEI NRIC No S2595336C MEI@BRIGHTLINK.COM.SG **Email Address** (Phone) +65-90099798 Mobile Phone No

VEHICLE PARTICULARS

Alternative Phone No.

Manufacturer Toyota ALTIS Model Variant Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Private car Auto Transmission CC 1600

INSURANCE COMPANY

AIG Asia Pacific Insurance Pte. Ltd. Name of Insurance Company 7210149965 Policy Number / Cover Note Number

DRIVER

CALMEIMEI Name of Driver S2595336C NRIC No 10/10/1967 Date Of Birth Indoor Occupation

Date Of Driving Pass 18/08/2003 Driving experience 19 YEARS Gender Female Mobile Number (Phone) +65-90099798 Alt. Phone Number Email Address MEI@BRIGHTLINK.COM.SG Address 7 TAMPINES AVE 8 #06-11 Address complement Postcode 529597 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions 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) 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 I PARKED MY VEHICLE AT MSCP. WHEN I RETURNED TO TAKE MY CAR, I FOUND A NOTE THAT VEHICLE B ACCIDENTALLY COLLIDED ONTO MY FRONT RIGHT PORTION. ATTACHMENT(S)

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

No

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

Name of Driver

SKR3091S

Private car

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Contact Number	-
Address	
Address complement	
Postcode	-
Insurance Company Name	-
Nature Of Damage	
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

- 1 Hease report correctly the deals of the accident to speed up the claims process
- I has Form must be completed by the Policyholder and/or the Authorised Driver.
- 3. Mornation provided must be as truthful and a courage as possible. Any wiful misrepreservation of withholding of material facts may allow insurance companies to regulate policy liability.
- 4. The issue and acceptance of the Form by insurance companies is not an admission of policy fel lity on the part of the insurance companies.
- 5 Any lalse reporting may be referred to the Police for investigation
- The report will be forwarded by the incurors of the GIA Reenros Management Centre established by the General Insurance Association
- Snakbore (GA) for archiving and that copies of the report will for a fee be made available upon application by interested parties.
- 2. 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.
- 3. Coasent under the Personal Data Protection Act (PDPA)
- 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 callectively referred to as the "Insurers"), the Insurers law yers/law times, the Monetary Authority of Singapore and any relevant covernment agency/authority (such as the police), for the purposets) of
- I processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to ne claims.
- i) investigiting the accident and/or my claims;
- is) carrying out and/or dealing with my instructions or responding to any enquiries by that
- v) administering my claims (including the making of correspondence, statements, invoices, reports or notices to me, which could involve states are of correspondence as the external cover of envelopee/make solveyes), and/or
- if complying with applicable law in administering, processing, handling and/or dealing with my claims.
- commodvely the "Purposes")
- 1) of Insurer(s) who have insured vehicle(s) inv-lived in this accident and the insurers' knyvyors/law firms, may/are permitted to collect, se, disclave and/or process my Personal Information for one or more of the above Purposes; and
- my Personal Information may/com be disclosed by any of the Insurers and/or GIA to their third party service providers or agents
 aduling their law yers/law firms), which may be ofted outside of Singapore, for one or more of the above Purposes.

Policyholche's Signature I Date &

Driver's Signature (if or ver is not the policyholder) / Date & Timo

Witnessed by Reporting Centre Personnel

Bketon Plan

A - SAD1916K

8 - SKR30915

T TAB T T

Se toffue (days)

		1.5			-	
I parted my	ASTRON OF	two life -	car park.	Mines	I return	to take me
dir. I found o	- 10 - Ch. A.					
All L. Teatrice Co.	note state	Hart	VEHICLE B	14-15	sca denth	1 collicted
An man first						
into my front v	ight portion.		******			
					-	
						-
						-
			-			

			-			
		-				
		-				
						-
					_	
			-			
					•••	
la ation						
de clare the foregoing particu	fars are true in every	respect.				
		0				
(a) al		Fral				
a Care		WI				

Hello, this is your neighbour. I wan we were inserting on better territs BUT

I actidentially scholared your can as I was extring the corporation

Please cointact one @ 1012 3247 or my uncle @ 9450 4117.

My Dad is anweathy not in Styll please contact any uncle regarding the report works. Once again, I'm REALLY REALLY somy that I bear sovataned your car & for all the inconvenience consed.