

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	20/08/2022 09:17 (SGT)
Reported by	Both
Date of Accident	19/08/2022 13:50 (SGT)
Exact Location of Accident	Bedok S Rd, Singapore
Additional Location Information	BEDOK SOUTH ROAD (CARPARK)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV9108U
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	CHAN SONG KIA
NRIC No	SXXXX796F
Email Address	MIKE9455@HOTMAIL.COM
Mobile Phone No	(Phone) +65-94557555
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
Variant	SPORTBACK 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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070149801

DRIVER

Name of Driver	CHAN SONG KIA
NRIC No	SXXXX796F
Date Of Birth	14/10/1962
Occupation	Indoor

Date Of Driving Pass	08/04/1980
Driving experience	42 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94557555
Alt. Phone Number	-
Email Address	MIKE9455@HOTMAIL.COM
Address	BLK 163 BEDOK SOUTH ROAD
Address complement	#09-434
Postcode	460163
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 on collision
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
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

ON THE 19 NOV 22, I WAS ABOUT DRIVIN GOUT FROM MY CARPARK LOT, AS THERE WAS ALOT OF VEHICLE QUEUING TO LEAVE THE CARPARK, I WAITED FOR AWHILE. THEN I SAW THAT THE VEHICLE WAS STILL NOT INFRONT OF MY LOT. I WAVE TO HER TO GIVE WAY, SHE LOOK AT ME, STOPPED AND TURNED THEN I THOUGHT SHE ACKNOWLEDGE MY GESTURE AND I MOVE FORWARD AS I PROCEED SHE ALSO PROCEED TO MOVE AND HIT ON THE FRONT RIGHT SIDE OF MY VEHICLE.

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	SFD1801G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Private car
Name of Driver	-
Contact Number	-
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' law firms/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' law firms/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 law firms/law firms) which may be sited outside of Singapore, for one or more of the above Purposes.



19-08-2022

Policyholder's Signature / Date & Time

Sketch Plan



19-08-2022

5:11 PM

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



Witnessed by Reporting Centre Personnel

Tan Fung

Please refer to the video footage

Describe Circumstances of the Accident

On the 19 November 2022, I WAS ABOUT DRIVING OUT FROM MY CARPARK LOT, AS THERE WAS A LOT OF VEHICLE QUEUING TO LEAVE THE CARPARK, I WAITED FOR A WHILE. THEN I SAW THAT THE VEHICLE WAS STILL NOT IN FRONT OF MY LOT I WAVE TO HER TO GIVE WAY, SHE LOOK AT ME & ~~DO~~ ~~MOVE BEFORE~~ STOPPED & THEN I THOUGHT SHE ACKNOWLEDGE MY GESTURE & I MOVE FORWARD, AS I PROCEED SHE ~~PRO~~ ALSO PROCEED TO MOVE & HIT ON THE FRONT RIGHT SIDE OF MY VEHICLE

Declaration

We declare the foregoing particulars are true in every respect

Policyholder's Signature / Date & Time: 19-08-22

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

Witnessed by Reporting Centre
Personnel *Tony Keany*