

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	29/08/2022 16:34 (SGT)
Reported by	Driver
Date of Accident	27/08/2022 14:45 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	EXIT SLIP ROAD TO PIE (KPE TUNNEL)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS8783S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MANMINDER SINGH
NRIC No	SXXXX641A
Email Address	MANMINDERSINGH@SEMBMARINE.COM
Mobile Phone No	(Phone) +65-96730511
Alternative Phone No	+65-96706271

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q3
Variant	1.4 TFSI S-TRONIC
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	1395

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070037029

DRIVER

Name of Driver	AVNEESH KAUR
NRIC No	SXXXX400D
Date Of Birth	21/09/1980
Occupation	Indoor

Date Of Driving Pass	07/08/2009
Driving experience	13 YEARS
Gender	Female
Mobile Number	(Phone) +65-90219284
Alt. Phone Number	-
Email Address	AVNEESH@KAUR.COM
Address	99 ROSEWOOD DRIVE
Address complement	#04-150
Postcode	737797
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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

I WAS DRIVING WITHIN THE SPEED LIMIT WANTING TO FILTER LEFT TO EXIT THE TUNNEL. MY INTENDED LANE WAS THE ONE LABELLED (PIE/TUAS). JUST AS I WAS ABOUT TO FILTER, THE CAR INFRONT OF ME STOPPED SUDDENLY. I PRESSED HARD ON MY BRAKES AND WAS ABLE TO STOP IN TIME WITHOUT HITTING THE CAR INFRONT OF ME.

THE MPV BEHIND ME HIT ME AND THEN FROM MY REAR VIEW MIRROR, I SAW THE 3RD CAR COLLIDE WITH THE CAR BEHIND ME. AT THIS TIME, THE CAR INFRONT OF ME HAD MOVED AND I DROVE SLOWLY TO THE SIDE (LEFT) OF THE TUNNEL BEFORE ALIGHTING.

MYSELF AND THE OTHER 2 DRIVERS EXCHANGED CONTACT INFOR AND TOOK OUR RESPECTIVE PICTURES BEFORE LEAVING THE ACCIDENT SITE.

THE MPV BEHIND ME HAD A CHILD AS A PASSENGER AND SHE LOOKED SHAKEN AND WAS CRYING.

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	SCZ103P
Vehicle Manufacturer	Nissan
Vehicle Model	Serena
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	PEH SHING WOEI
Contact Number	(Phone) +65-90080882
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKJ9907S
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	CHONG CHIN EE (ZHANG JINGYI)
Contact Number	(Phone) +65-91053071
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLANIMPORTANT NOTICE

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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' law yers/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 yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

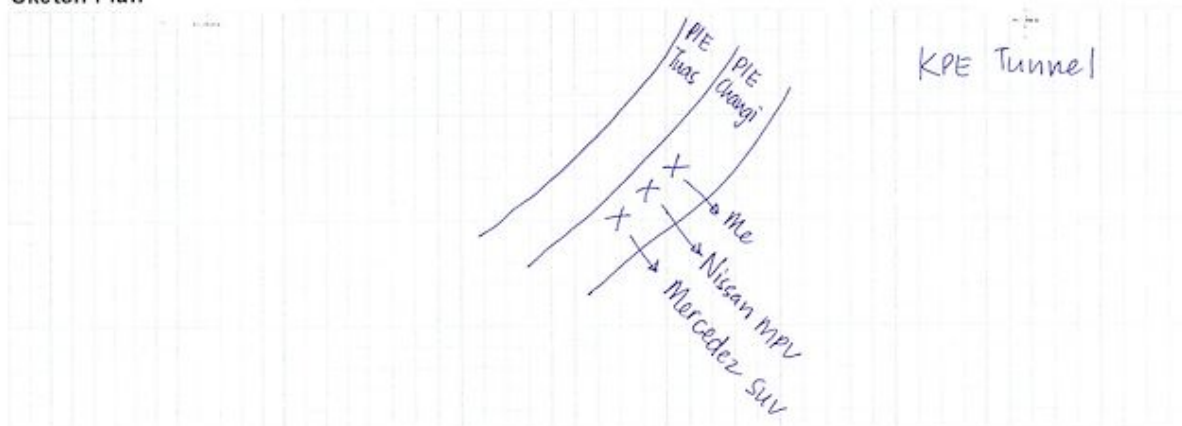
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



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

I was driving within the speed limit wanting to filter left to exit the tunnel. My intended lane was the one labelled (PIE/TuAS). Just as I was about to filter, the car in front of me stopped suddenly. I pressed hard on my brakes and was able to stop in time without hitting the car in front of me.

The MPV behind me hit me and then from my rearview ~~mirror~~ mirror, I saw the 3rd car collide with the car behind me. At this time, the car in front of me had moved and I ~~drove~~ drove slowly to the side (left) of the tunnel before alighting.

Myself and the other 2 drivers exchanged contact info and took our respective pictures before leaving the accident site.

~~The~~ The ~~MPV~~ MPV behind me had a child as a passenger and she looked shaken and was crying.

Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Ameesh Kumar 29/8/2022 3:44pm
Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

























































