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 witholding 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.

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 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 08/09/2022 13:00 (SGT) Reported by Date of Accident 07/09/2022 11:30 (SGT) Exact Location of Accident Singapore Additional Location Information Bedok Reservoir Road Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBH5249B**

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) +65-81268670 Alternative Phone No

Private hire

VEHICLE PARTICULARS

Manufacturer Mercedes Model Variant 114 CDI PANEL VAN LONG AT ABS 5DR Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto

CC

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 999995730

DRIVER

Name of Driver MOHAMMAD SOFIAN BIN SUHAIMI NRIC No S9109389H Date Of Birth 19/02/1991 Occupation Outdoor



Date Of Driving Pass 07/10/2014 Driving experience 7 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-81117834 Alt. Phone Number Email Address derrick.lee@mercedes-benz.com Address HDB Bedok, 121 Bedok North Road 460121 Address complement Postcode 460121 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Was anybody injured in the Accident? Yes 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? Nο Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT I GBH5249B was driving along Bedok Reservoir Road on the right lane to make a right turn into the carpark of Blk 740 Bedok Reservoir Road with my right signal indicator on. While I was slowing down my vehicle towards stationary position, Suddenly I heard a loud screeching sound and a few seconds later I felt a hard impact coming from my rear vehicle and discover that my vehicle was hit by the 3rd party SHD4872H. It's involved 3 vehicles in total, I managed to take some photos and exchange particulars with both parties. No injuries was involved at the scene and there was traffic police and ambulance that assist us on the scene. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration NumberSHD4872HVehicle ManufacturerHyundaiVehicle ModelAe ioniqVehicle Variant-Vehicle ColourBlue



Vehicle Category Taxi Name of Driver TAN TENG HOCK NRIC No S7310933G Contact Number (Phone) +65-97776299 Address Address complement Postcode Insurance Company Name Nature Of Damage Na Details of property damaged in accident Na No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number WC4727Y Vehicle Manufacturer Man Vehicle Model Tgs Vehicle Variant Vehicle Colour White Vehicle Category Commercial vehicle KARUPPAIYAN RAJENDRAN Name of Driver Passport No/FIN G8105327N Contact Number (Phone) +65-87750463 Address Address complement Postcode Insurance Company Name Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained	-
Injuries Sustained Injured person in which vehicle?	- GBH5249B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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' 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

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(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.

		Witnessed By Reporting Officer Muhammad Sumardi Bin Mohd Affandi		
Policyholder's Signature / Date & Time	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel		
Sketch Plan				
REFER TO ATTACHE	ED ACCIDENT DIAGRAM			

Describe Circumstances of the Accident

bescribe offential arces of the Accident	
I GBH5249B was driving along Bedok Reservoir Road on the right lane to make a right turn into the carpark of Blk 740 Bedok Reservoir Road with my right signal indicator on. While I was slowing down my vehicle towards stationary position, Suddenly I heard a loud screeching sound and a few seconds later I felt a hard impact coming from my rear vehicle and discover that my vehicle was hit by the 3rd party SHD4872H. It's involved 3 vehicles in total, I managed to take some photos and exchange particulars with both parties. No injuries was involved at the scene and there was traffic police and ambulance that assist us on the scene.	

Declaration

I/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 Officer Muhammad Sumardi Bin Mohd Affandi

Witnessed by Reporting Centre Personnel









































