# **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 21/09/2022 17:50 (SGT) Reported by Date of Accident 20/09/2022 08:35 (SGT) Exact Location of Accident Singapore Additional Location Information Lornie road towards PIE Tuas Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SJZ8050Y

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner DAIMLER SOUTH EAST ASIA PTE LTD Company Reg No 1XXXXX355E Email Address Thomas.chan@mercedes-benz.com Mobile Phone No (Phone) +65-68498587 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Mercedes Model E300e 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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto CC 1991

**INSURANCE COMPANY** 

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 999996111

DRIVER

Name of Driver **CHAN KAM CHUEN** NRIC No SXXXX441Z Date Of Birth 21/10/1967 Occupation Indoor

Date Of Driving Pass 31/07/1989 Driving experience 33 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-90993500 Alt. Phone Number Email Address Thomas.chan@mercedes-benz.com Address 70 Hougang ave 7 Address complement #05-08 Postcode 538804 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 Collision - Head to Rear Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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? Yes Police Station Name Ang Mo Kio Division Headquarters

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Ang Mo Kio Division Headquarters

(Phone) +65-18002180000

(Fax) +65-64814246

Police Station Address

Folice Station Address

The police Station Address

The police

# CIRCUMSTANCES OF ACCIDENT

CAR ACCIDENT HAPPENED ALONG LORNIE ROAD AT APPROX 0835AM ON 20 SEPT 2022 AT TRAFFIC JUNCTION (RHS MACRITCHIE RESERVIOR) BEFORE MOVING UP TOWARDS DIRECTION OF PIE TUAS. BETWEEN 2 VEHICLES YN4126A AND SJZ8050Y WAS STATIONARY AT TRAFFIC JUNCTION WHEN YN4126A HIT THE REAR OF SJZ8050Y.NO ONE WAS INJURED AND BOTH VEHICLES SUSTAIN NO VISIBLE DAMAGES.WAS AGREED THAT SJZ8050Y WILL BE SENT TO SERVICE CENTRE FOR CHECKS ON NON -VISIBLE DAMAGES. WEATHER CONDITION :HEAVY RAIN . NAME OF DRIVER OF YN44126A: MOHAMMAH SOLEHAN BIN SAMION .LICENCE NUMBERS: T0227498H . VEHICLE FRONT PASSENGER OF YN4126A: LAU CHUNG YAN BERTRAND .LICENSES NOS: S9513738E.

#### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	YN4126A
Vehicle Manufacturer	Isuzu
Vehicle Model	NJR85AUE6W
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Commercial vehicle
Name of Driver	MOHAMMAD SOLEHAN BIN SAMION
NRIC No	TXXXX498H
Contact Number	(Phone) +65-85184350
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

#### SKETCH PLAN

## IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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.
- 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
- (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")

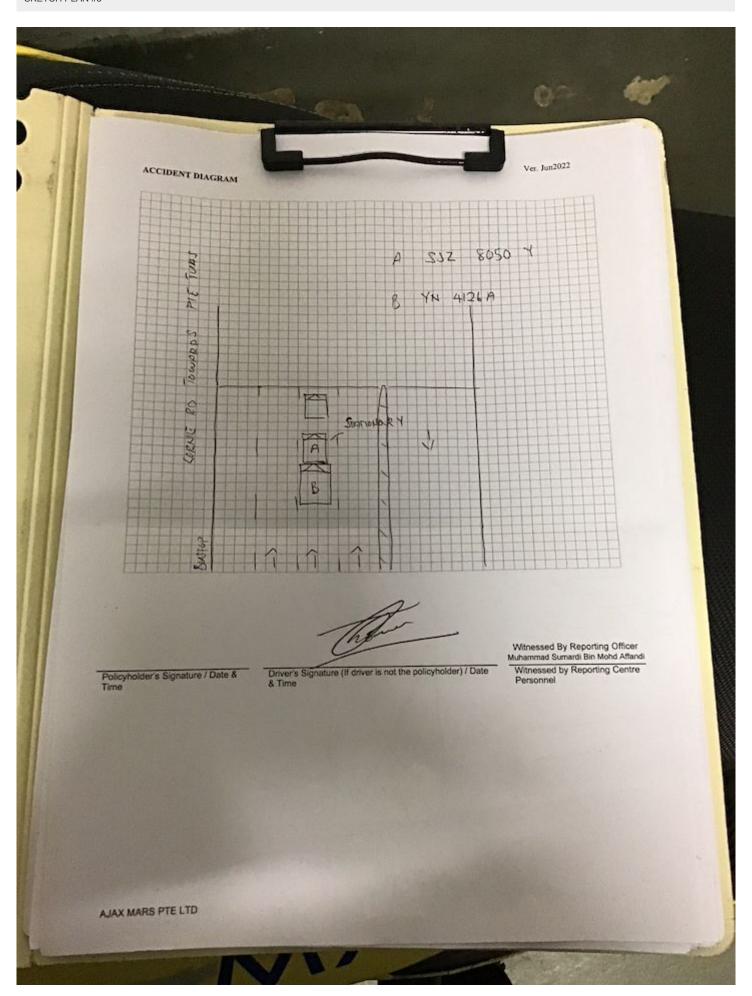
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents. (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

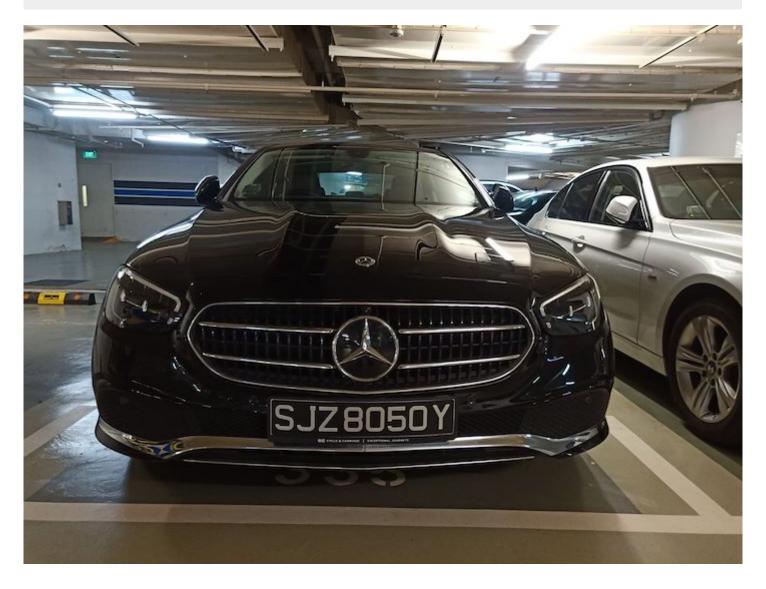
	6	Muhammad Sumardi Bin Mohd Affar
Policyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date	Witnessed by Reporting Centre
Time	& Time	Personnel

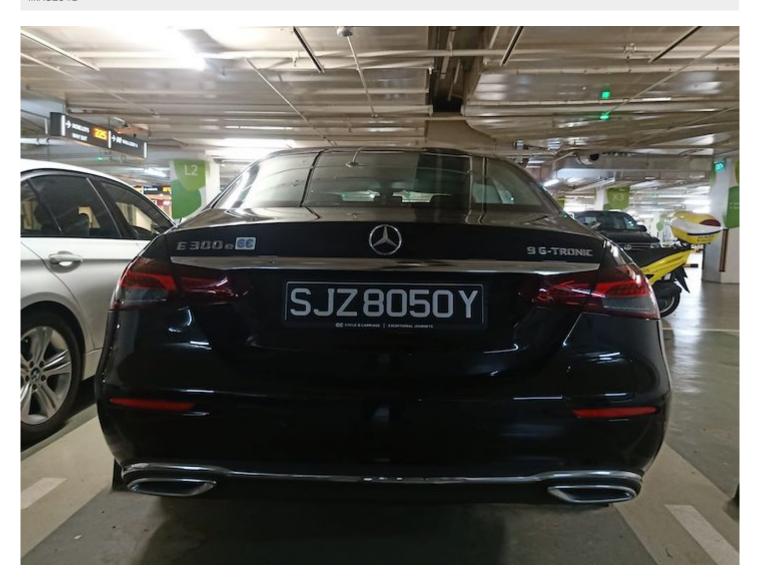
## Sketch Plan

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1							
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Refer as police report (F/20220920/7077)		
eclaration		
We declare the foregoing particula	rs are true in every respect.	
	- Comment	Witnessed By Reporting Officer Muhammad Sumardi Bin Mohd Affa
olicyholder's Signature / Date &	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel































1 of 2

Report No. F/20220920/7077

## POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784

Tel No:1800-2180000

Vide Re	port No.		Station Diary No.
Address			·
70 HOUGANG AVENUE 7 #05-08 SINGAPORE 53880			
Contact No. Home/Office: Mobile: 90993500			
Email Address Thomas.chan@Mercedes-benz.com			
Sex	Age	Date of Birth	Race
Male 54 21/10/1967 Chinese		Chinese	
Language English			
Location Of Incident 70 HOUGANG AVENUE 7 #05-08 SINGAPORE 538804			
	Address 70 HOU Contact Home/O Email Ad Thomas Sex Male Languag English Location	70 HOUGANG AVE Contact No. Home/Office:  Email Address Thomas.chan@Me Sex Age Male 54 Language English Location Of Inciden	Address 70 HOUGANG AVENUE 7 #05-08 SI Contact No. Home/Office: Mobile: 90993500 Email Address Thomas.chan@Mercedes-benz.com Sex Age Date of Birth Male 54 21/10/1967 Language English Location Of Incident

#### Brief details.

Car Accident happened along Lornie road at approx 0835am on 20 Sept 2022 at traffic junction (RHS Macritchie reservior) before moving up towards direction of PIE Tuas.

Between 2 vehicles YN4126A and SJZ8050Y was stationary at traffic junction when YN4126A hit the rear of SJZ8050Y.

No one was injured and both vehicles sustain no visible damages.

Was agreed that SJZ8050Y will be sent to service centre for checks on non-visible damages.

Weather condition: heavy rain.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2022 18:37
Officer In-Charge Of Case:	Classification Of Case:





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20220920/7077

Name of Driver of YN4126A: Mohammah Solehan Bin Samion

Licence numbers: T0227498H

Vehicle front passenger of YN4126A: Lau Chung Yan Bertrand

Licence nos.: S9513738E

Victim	<b>Y</b>				
Person Name	Name CHAN KAM CHUEN				
ID Type	NRIC NO	ID No	S1809441Z		
Gender	Male	Age	54		
Race	Chinese	Language	English		
Occupation	Sales manager	Address	70 HOUGANG AVENUE 7 #05		
			08 SINGAPORE 538804		
Mobile No	90993500	Is Informant A	Yes		
		Victim?			
2					
Person Name	CHAN KAM CHUEN (In:	formant)			

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2022 18:37
Officer In-Charge Of Case:	Classification Of Case:



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

	ADDENI	DUM
A)	PARTICULARS OF PERSON MAKING THE AMENDMEN	TS:
	Original Report No: SA1D229K000B-01	Vehicle Registration No: SJZ8050Y
	Name (as shown in NRIC):	NRIC/FIN/Passport No:
	(*Vehicle Driver/Vehicle Owner) (*) Please delete as	appropriate
	Address:	Singapore (
	Contact (Tel):	Mobile No.:
	Email Address:	_
	Date of Accident: 20/09/2022	Time of Accident:
	Place of Accident: Lornie road towards PIE Tuas	
	AIG Asia Pacific Insurance Pte. Ltd.	
	1.AMEND ROAD SURFACE	
3		
	Policyholder / Driver's Signature Date:	Reporting Centre Personnel's Signature Name: SUGANYA NRIC/FIN No.: Date: 22002022

GIARMC Addendum Form