

# 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 ..... 06/10/2022 16:00 (SGT)  
Reported by ..... Both  
Date of Accident ..... 05/10/2022 16:15 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Catholic High School Primary  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMY9046Z

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LEE MARY MAGDALEN  
NRIC No ..... S0119433Z  
Email Address ..... NOEMAIL@AIG.COM  
Mobile Phone No ..... (Phone) +65-96335485  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... Cerato  
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? ..... No - Reporting only  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1591

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Policy Number / Cover Note Number ..... 7210027067

### DRIVER

Name of Driver ..... LEE KUAN JIE, SAMUEL  
NRIC No ..... S9438914C  
Date Of Birth ..... 15/10/1994  
Occupation ..... Indoor

Date Of Driving Pass .....	24/08/2013
Driving experience .....	9 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81280615
Alt. Phone Number .....	-
Email Address .....	NOEMAIL@AIG.COM
Address .....	359 YISHUN RING ROAD #09-1700
Address complement .....	-
Postcode .....	-
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Relative
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 .....	Collided into Parked Vehicle
Weather Conditions .....	Clear
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) .....	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

R2000009285    Circumstances Of Accident    White car (SMD6446H) was parked. Blue car (SMY9046Z) was parked in front of the White car in parallel parking lots. Blue car reversed into White car while attempting to get out of the parking lot. Blue car rear collided with white car front.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	VIDEO NOT PROVIDED

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMD6446H
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	(Phone) +65-98629654
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-









