

# 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 .....	10/10/2022 17:00 (SGT)
Reported by .....	Both
Date of Accident .....	07/10/2022 14:33 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	JUNCTION OF HOLLAND ROAD & BELMONT ROAD
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMJ6719P
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TNG TEE JIN
NRIC No .....	S1658519Z
Email Address .....	TNGTJ@YAHOO.COM
Mobile Phone No .....	(Phone) +65-90609512
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Mitsubishi
Model .....	Outlander
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 your vehicle? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	2000

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	1900017709-02

### DRIVER

Name of Driver .....	TNG TEE JIN
NRIC No .....	S1658519Z
Date Of Birth .....	21/05/1964
Occupation .....	Indoor

Date Of Driving Pass .....	22/02/1983
Driving experience .....	39 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90609512
Alt. Phone Number .....	-
Email Address .....	TNGTJ@YAHOO.COM
Address .....	14 UPPER BOON KENG ROAD
Address complement .....	#19-957
Postcode .....	380014
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 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 .....	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

#### REFER ATTACHMENTS.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SGA6188B
Vehicle Manufacturer .....	Audi
Vehicle Model .....	A4
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	CHIA HOCK HWA
Contact Number .....	(Phone) +65-96208260

Address ..... -  
Address complement ..... -  
Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -

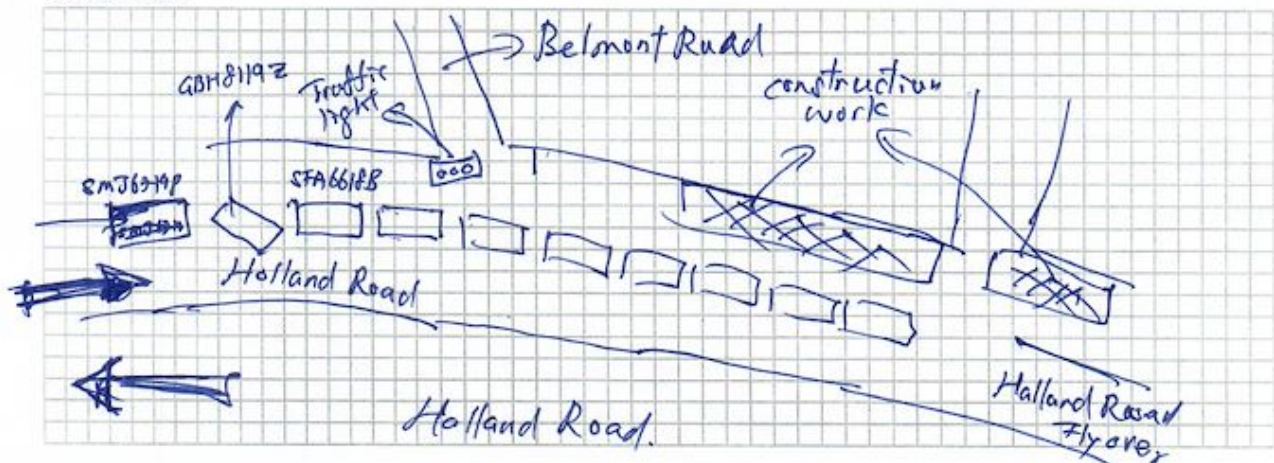
**SKETCH PLAN****IMPORTANT NOTICE**

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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 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.

*[Signature]* 10/10/2022  
2.40pm  
Policyholder's Signature / Date & Time

*[Signature]* 10/10/2022  
2.45pm  
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]* 10/10/22  
Witnessed by Reporting Centre Personnel

**Sketch Plan**



**Describe Circumstances of the Accident**

On the 07-Oct-2022, at 2.33pm, It was a raining day and road is rather slippery, I drove my Mitsubishi Outlander on Holland Road towards Farrer Road. At the junction of Holland Road and Belmont Road, I was on the ~~third~~ middle lane of the 3-lane road and the traffic light was on green and a Toyota van GBH8119Z was in front of my car. An Audi A4 SFA6188B was in front of the GBH8119Z.


Out of sudden, the driver of SFA6188B jammed the brake and stop his car abruptly, and the driver of GBH8119Z swiftly switched to the right lane and drove off. I had little time to respond due to the height of the van blocking my view to the SFA6188B sudden stop! I had responded and jammed brake to stop my car 2-car length away, the car immediately slowed down but due to the slippery road condition, my car eventually in contact with the SFA6188B.


The causes of the sudden stop by SFA6188B was due to the road work on the left lane of Holland Road between Belmont Road and Cornwall Garden, the workers of Contractor's company had failed to place the traffic cones at the stipulated length for vehicle driver to respond and altering to the middle lane. The workers had also not provided any traffic control in the work area and thus causing multiple traffic accidents in the same area. Another traffic accident was happened 5 minutes right after my traffic accident with SFA6188B.

Photos and video of the accident and road work are attached/  
 1. Video of traffic accident between SMJ6319P and SFA6618B  
 2. Photos of rear of SFA6618B to show damage  
 3. Photos of front of SMJ6319P to show damage  
 4. Video and photos of road work showing contractor failed to provide traffic control and caused multiple accidents in the area.

**Declaration**

We declare the foregoing particulars are true in every respect.

X  10/10/2022  
2.45pm  
Policyholder's Signature / Date & Time

X  10/10/2022  
2.40pm  
Driver's Signature (If driver is not the policyholder) / Date & Time

 10/10/22  
Witnessed by Reporting Centre Personnel



























































