

## 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 .....	17/10/2022 11:54 (SGT)
Reported by .....	Both
Date of Accident .....	15/10/2022 12:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	Side Road parking along Martin Place and Muthuraman Chetty Road. Parking Ref Number M0085
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKT5985P
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	Seow Kiat Huat
NRIC No .....	S1304019B
Email Address .....	seowkiathuat@yahoo.com.sg
Mobile Phone No .....	(Phone) +65-97564415
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Corolla
Variant .....	COROLLA ALTIS 1.6
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 .....	1598

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7220037511

#### DRIVER

Name of Driver .....	SEOW JUN HSIEN, LINCOLN
NRIC No .....	S9536854I
Date Of Birth .....	09/10/1995

Occupation .....	Indoor
Date Of Driving Pass .....	09/02/2017
Driving experience .....	5 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97564415
Alt. Phone Number .....	-
Email Address .....	NOEMAIL@AIG.COM
Address .....	80 Corporation Rise
Address complement .....	-
Postcode .....	-
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 .....	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

R2000009311      Circumstances Of Accident      The accident occurred at the parking lots along Martin Place / Muthuraman Chetty Road (Parking Lot Ref: M0085). I was performing a parallel parking sequence

and while reversing into the lot

the left side of my car came into contact with the right corner of the other party's car. I immediately stopped the car and manoeuvred away from the other party's car and resumed parking into the lot. After packing

I came out to check on the other party's car and found that the contact resulted in a scratch at the right rear bumper. There were no other damages to the rest of his car upon closer inspection.

#### 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 .....	SKF3337Y
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	(Phone) +65-83333953
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-











