

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 14:33 (SGT)
Reported by	Both
Date of Accident	15/10/2022 11:20 (SGT)
Exact Location of Accident	Tampines Ave 7, Singapore
Additional Location Information	ALONG TAMPINES AVE 7 TOWARDS TAMPINES AVE 2
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP4035K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AHMAD BIN ABUBAKAR BAGHARIB
NRIC No	S0079855Z
Email Address	BAKAR@PACIFICSINGAPORE.COM
Mobile Phone No	(Phone) +65-94875870
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	E200
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?	No - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1991

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220088299

DRIVER

Name of Driver	AHMAD BIN ABUBAKAR BAGHARIB
NRIC No	S0079855Z
Date Of Birth	23/05/1952
Occupation	Indoor

Date Of Driving Pass	07/05/1979
Driving experience	43 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94875870
Alt. Phone Number	-
Email Address	BAKAR@PACIFICSINGAPORE.COM
Address	BLK 922 TAMPINES STREET 91 #02-213
Address complement	-
Postcode	520922
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	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

REFER TO ATTACHMENT

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	SLR8987M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEE LEONG HWEE
Contact Number	-

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

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' lawyers/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
(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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

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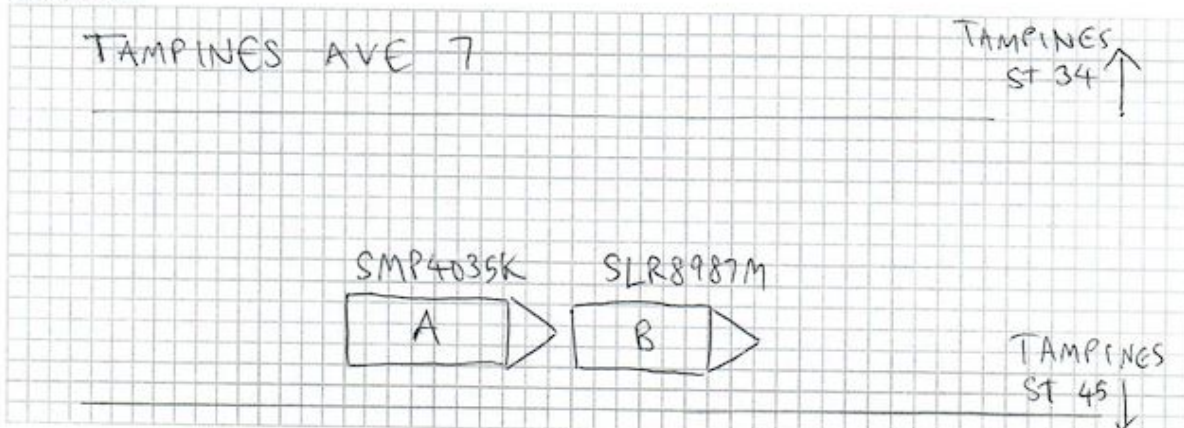
Policyholder's Signature / Date & Time

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Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan



Please refer to the printed report attached.

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre
Personnel

16th Oct 2022

On Saturday, 15th October 2022, at 11.20pm, I was driving my vehicle (SMP4035K) along Tampines Ave 7 towards Tampines Ave 2. There was light traffic and the road conditions were normal. There were no other passengers in my vehicle.

As I approached the junction between Tampines Ave 7 and Tampines St 34/Tampines St 45, the traffic light was red so I slowed down and came to a complete stop. I stopped behind another vehicle (SLR8987M) that was also stationary.

When I noticed that the light turned green, I proceeded to start moving forward. The vehicle in front of me started moving forward as well. However, I moved slightly faster than the vehicle in front. So, the front end of my vehicle came into slight contact with the rear end of the vehicle in front.

Upon feeling this slight contact, both myself and the other driver LEE LEONG HWEE (LI LIANGHUI), S7535653F, exited our vehicles to assess the situation and exchange particulars. We observed no visible damage on the front end of my vehicle. We observed a small gap due to slight misalignment on the right side of his car boot.

We then drove off once we agreed that it was safe to do so. Later on, I called him to check if he had experienced any injuries from the accident, and he informed me that he had no injuries. He also then informed me that there was one passenger in his vehicle at the time of the accident, which I had not realised earlier.

I had experienced no injuries as well.































