

## 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 .....	04/11/2022 11:22 (SGT)
Reported by .....	Both
Date of Accident .....	03/11/2022 07:50 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	Junction of Ang Mo Kio Ave 5 and CTE (just before Ang Mo Kio North Flyover)
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJP9651J
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	Ong Leh Har
NRIC No .....	S1527324J
Email Address .....	lehhar@hotmail.com
Mobile Phone No .....	(Phone) +65-96467055
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Vios
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 .....	1497

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	1900021527-03

#### DRIVER

Name of Driver .....	Ong Leh Har
NRIC No .....	S1527324J
Date Of Birth .....	02/10/1962

Occupation .....	Indoor
Date Of Driving Pass .....	19/04/1997
Driving experience .....	25 YEARS AND 7 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-96467055
Alt. Phone Number .....	-
Email Address .....	lehhar@hotmail.com
Address .....	1 ANG MO KIO AVENUE 9
Address complement .....	FAR HORIZON GARDEN 02-01 SINGAPORE
Postcode .....	-
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 - Change/cross lane
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

R2000009369      Circumstances Of Accident      My car was on Ang Mo Kio Ave 5

at junction where CTE exit road joins Ang Mo Kio Ave 5. Traffic lights were green as I drove onto the junction. The light turn amber while I was still in the junction. The space ahead of my car was occupied. I saw that the lane ahead to my left was not fully occupied. I checked my left side mirror and my left blind spot and found it clear for me to switch to the left lane. I signaled left and proceeded to switch lane. Suddenly

I heard a bang. A white van had rushed forward from behind and hit the left side of my vehicle. Both drivers got out to exchange particulars and take pictures. No one else was involved. There was a slight dent and scratches on the left side of my car. There were scratches on the right side of the van.

#### 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 .....	GBC1543D
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Goods vehicle
Name of Driver .....	-
Contact Number .....	(Phone) +65-90300495
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

















