

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	16/12/2022 14:54 (SGT)
Reported by	Both
Date of Accident	16/12/2022 10:50 (SGT)
Exact Location of Accident	1 Elias Green, Singapore 519959
Additional Location Information	OUTSIDE THE ENTRANCE OF ELIAS GREEN CONDO - ELIAS GREEN ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJA1180H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	THIA CHEE CHEW
NRIC No	SXXXXX685C
Email Address	THIAROL@GMAIL.COM
Mobile Phone No	(Phone) +65-81980001
Alternative Phone No	(Office) +65-91554820

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
Variant	2.0 TFSI S-TRONIC
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	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7210079662

DRIVER

Name of Driver	THIA CHEE CHEW
NRIC No	SXXXXX685C
Date Of Birth	04/12/1961

Occupation	Indoor
Date Of Driving Pass	30/12/1980
Driving experience	42 YEARS
Gender	Male
Mobile Number	(Phone) +65-81980001
Alt. Phone Number	(Office) +65-91554820
Email Address	THIAROL@GMAIL.COM
Address	9 ELIAS GREEN
Address complement	#08-01
Postcode	519963
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	Side Swipe
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)	2
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	-

PASSENGER 1

Name	NG AH LAH
Gender	Female

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

I WAS DRIVING OUT OF THE ELIAS GREEN CONDOMINIUM AND AT THE ENTRANCE, NOTICE THAT THE TAXI SHD9826J WAS STATIONARY AT THE CENTRE OF THE ROAD WAITING TO ENTER THE CONDOMINIUM. IN FRONT OF THE TAXI, THERE ARE ANOTHER 2 CARS WAITING TO ENTER THE CONDOMINIUM. ON NOTICING THE TAXI NEAR THE LANE THAT I AM DRIVING, I DECIDED TO KEEP LEFT AND IT HIT THE LEFT SIDE KERB AND THE MY CAR SWAY TO THE RIGHT AND SWIPE THE SIDE OF THE TAXI.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD9826J
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Taxi
Name of Driver	TAN TIONG SENG
Contact Number	(Phone) +65-81856789
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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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.

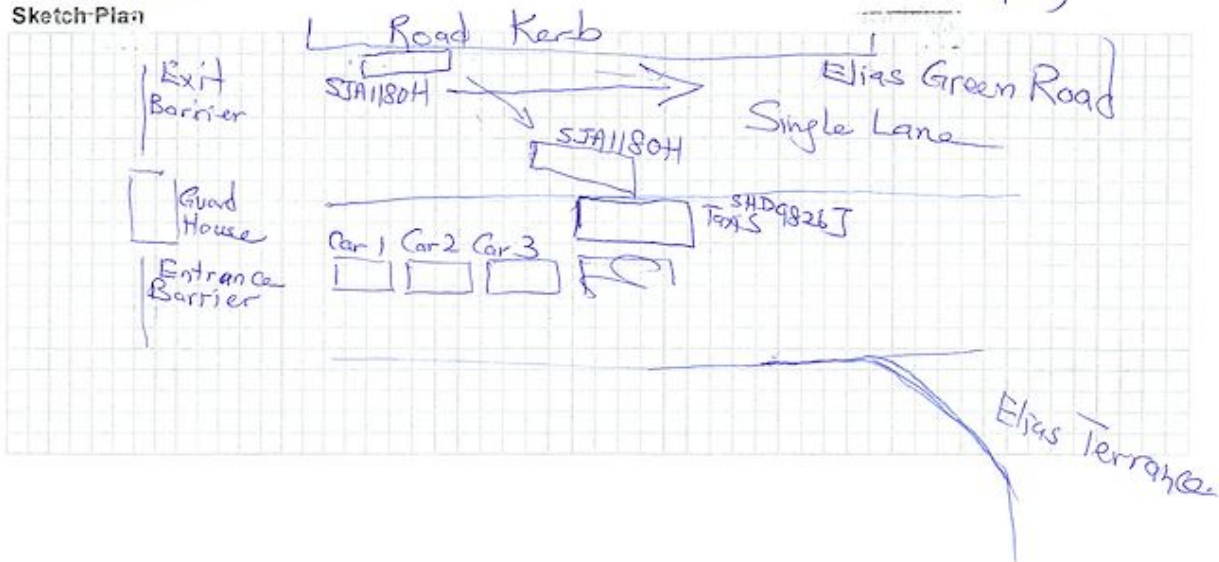


Policyholder's Signature / Date & Time
1300hrs

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

Witnessed by Reporting Centre Personnel
Tony Foo

Sketch Plan



Describe Circumstances of the Accident

I was driving out of the Elias Green Condominium and at the entrance notice that the taxi SHD9826I was stationary at the centre of the road waiting to enter to condominium. In front of the taxi, there are another 3 cars waiting to enter the condominium. On noticing the taxi near the lane that I am driving, I decided to keep left and it hit the left side kerb and then my car ~~sw~~ sway to the right and scrape the side of that taxi.

Declaration

We declare the foregoing particulars are true in every respect.



16/12/22

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Tony Foong





































