

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 28/12/2022 11:03 (SGT)
Reported by Both
Date of Accident 23/12/2022 12:10 (SGT)
Exact Location of Accident Singapore
Additional Location Information 100 meter toward Woodlands Check from Johor custom
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKU7277G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Lee Hui Lin
NRIC No S1654503A
Email Address huilinlee@hotmail.com
Mobile Phone No (Phone) +65-96257283
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mazda
Model 5
Variant 5 2.0 SKYACTIV
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 1998

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 2100424785-07

DRIVER

Name of Driver Wong Keng Yak
NRIC No S1553446Z
Date Of Birth 05/01/1962
Occupation Indoor

Date Of Driving Pass	20/03/2008
Driving experience	14 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96920049
Alt. Phone Number	-
Email Address	noemail@aig.com
Address	23 HILLVIEW AVENUE
Address complement	GLENDALE PARK
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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

R2000009564 Circumstances Of Accident I was driving from JB Custom towards Woodlands Checkpoint

the car was standing still most of the time and moving slowly. I was looking at something and did not notice my car was moving forward even though I did not step on the accelerator pedal. I did not realise I hit the car in front until I felt the jerk. Thankfully

it was a light hit with no injuries.

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	SLT3914X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-







