

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	11/01/2023 19:18 (SGT)
Reported by	Both
Date of Accident	10/01/2023 19:00 (SGT)
Exact Location of Accident	Johor Bahru, Johor, Malaysia
Additional Location Information	KM 13 JLN JOHOR BAHRU - AIR HITAM TOWARDS DANGA BAY
Country/State of Loss	Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNJ1770K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LIM KOK TIONG
NRIC No	SXXXX880Z
Email Address	LAURENCELIMKT@GMAIL.COM
Mobile Phone No	(Phone) +65-97468897
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A7
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220151500

DRIVER

Name of Driver	LIM KOK TIONG
NRIC No	SXXXX880Z
Date Of Birth	29/12/1968
Occupation	Indoor

Date Of Driving Pass	30/10/2001
Driving experience	21 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97468897
Alt. Phone Number	-
Email Address	LAURENCELIMKT@GMAIL.COM
Address	BLK 30 AMBER GARDENS
Address complement	#04-01
Postcode	439964
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?	Yes
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	KBM4224
Vehicle Category	Private car

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	IBU PEJABAT POLIS DAERAH JOHOR BAHRU UTARA, POLIS DIRAJA MALAYSIA, JKR NO.3861, BATU 10 81300 SKUDAI, JOHOR
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE BELOW SKETCH PLAN & ACCIDENT STATEMENT.

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	KBM4224
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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)	-

SKETCH PLAN

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6. The 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.
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.

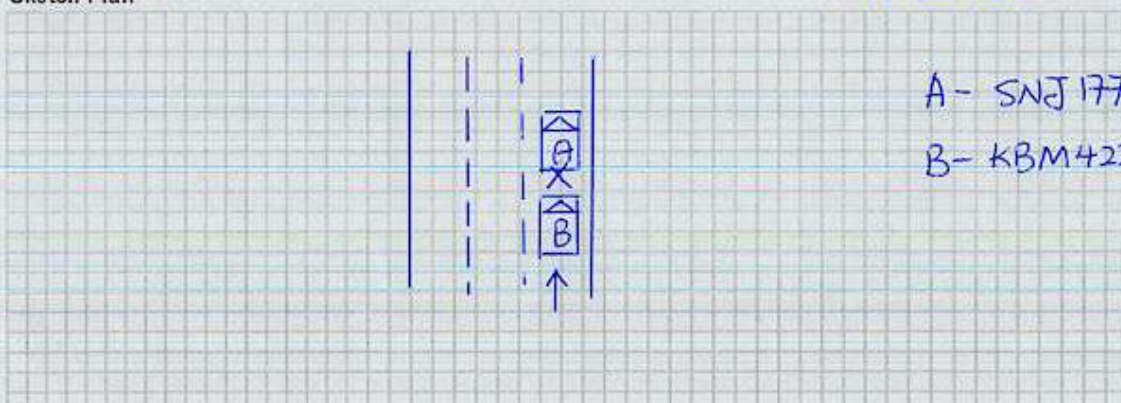
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

11/1/23 @ 1739



A - SNJ1770K

B - KBM4224

Describe Circumstances of the Accident

I was travelling along KM 13 JLN JOHOR BAHRU - AIR HITAM to Danga Bay. The car in front of me on my lane (Right most lane) make a brake suddenly, so I follow the same. (KBM4224) However, the car behind ^{me} hit onto the rear of my car. The damages of car was the rear bumper, sensors, Exhaust and it might have hidden ~~damages~~ damages on my, which I not able to confirm based on exterior of the car. I have also done a ~~reporting~~ police report at Malaysia on the same day 10/01/2023 08:16:11 PM. Besides, I managed to retrieve the video footage from my dash cam ^{to} and upload into the accident report.

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

11/1/23 @ 1730







































POL.316



CAWANGAN TRAFIK,

IBU PEJABAT POLIS DAERAH JOHOR BAHRU UTARA,

POLIS DIRAJA MALAYSIA,

JKR No. 3861, BATU 10 81300 SKUDAI,

JOHOR.

07-5571952

Resit Akuan Penerimaan Repot Polis :

Nama Pengadu : LIM KOK TIONG
 No Kad Pengenalan / Paspot : K1736148G
 No Repot Polis : TRAFIK JOHOR BAHRU (U) 000645/23
 Tarikh @ Masa Repot Polis : 10/01/2023 @ 20:05
 Pengesahan Penerimaan Repot :

Tandatangan Ketua Pejabat Pertanyaan

Pegawai Penyiasat :

Nama Pegawai Penyiasat : (R107013) SJN RUSILAH BINTI ABU
 Tempat Tugas : JOHOR, J/BAHRU UTARA
 No Telefon Pejabat : No Telefon Bimbit : 012-7313740
 Tarikh @ masa Perjumpaan : 10/1/23 20:05

Pengesahan Penerimaan Repot :

Tandatangan Pegawai Penyiasat

Juru Gambar :

Nama : No Badan : Pangkat :

Tarikh @ Masa Gambar Diambil :

Pengesahan Gambar Diambil :

Tandatangan Juru Gambar

Unit Pembekalan Dokumen Siasatan :

No Telefon Unit Pembekalan Dokumen :

Waktu Pejabat :

Ahad - Rabu :
 08:00 Pagi - 01:00 Tengah Hari
 02:00 Petang - 04:30 Petang
 Khamis :
 08:00 Pagi - 1:00 Tengah Hari
 02:00 Petang - 03:00 Petang
 Jumaat / Sabtu : Tutup
 Cuti Umum / Khas : Tutup

Jenis Dokumen Dibekal Kepada Pengadu :

1. Salinan Repot Polis
 2. Gambar Kenderaan
 3. Rajah Kasar Kemalangan
 4. Keputusan Siasatan
 5. Lain-lain Dokumen
 Tarikh @ Masa Dokumen Diserah :

Pengesahan Kaunter Pembekalan
 Dokumen :

Tandatangan Pegawai Kaunter
 Pembekalan Dokumen

POLIS DIRAJA MALAYSIA REPOT POLIS

: TRAFIK JOHOR BAHRU(U)
 : J/BAHRU UTARA
 : JOHOR
 : TRAFIK JOHOR BAHRU(U)/000645/23
 : 10/01/2023
 Waktu : 2005 PM
 Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R107013
 No. Repot Bersangkut : TRAFIK JOHOR
 BAHRU(U)/000644/23

Butir-butir Penerima Repot :

Nama : SALHAN BIN JAMALI No. Badan : R151471 Pangkat : L/KPL
 Butir-butir Jurubahasa (Jika Ada) :

Nama : --- No. K/P (Baru) : --- No. Polis/Tentera : ---
 No. Pasport : --- Bahasa Asal : ---
 Alamat : ---

Butir-butir Pengadu :

Nama : LIM KOK TIONG
 No. K/P (Baru) : --- No. Polis/Tentera : --- No. Pasport : K1736148G
 No. Sijil Beranak : --- Jantina : Lelaki Tarikh Lahir : 29/12/1968
 Umur : 54 Tahun 0 Bulan Keturunan : Cina Warganegara : SINGAPORE
 Pekerjaan : SWASTA
 Alamat Tinggal : 07 JLN PERSIARAN TEKNOLOGI, 81200 JOHOR
 Alamat IbuBapa : ---
 Alamat Pejabat : ---
 No. Tel (Rumah) : --- No. Tel (Pejabat) : --- No. Tel (Bimbit) : 6597468897
 Emel : ---

Pengadu Menyatakan :

PADA 10/01/2023 JAM LEBIH KURANG 19:00 PETANG, SAYA MEMANDU MOTOKAR/WAGON NOMBOR SNJ1770K DARI TMN TEKNOLOGI HENDAK KE DANGA BAY. PADA KETIKA ITU, APABILA SAYA SAMPAI DI KM 13 JLN JOHOR BAHRU-AIR HITAM, SEWAKTU MEMANDU DI LORONG KANAN TIBA-TIBA SEBUAH M/KAR NO PASTI YANG BERADA DI DEPAN BREK MENGEJUT, SAYA PUN BREK TETAPI DILANGGAR DI BAHAGIAN BELAKANG OLEH SEBUAH M/KAR NO KBM4224. SAYA TIDAK CEDERA, KEROSAKAN M/KAR SAYA PADA BAHAGIAN BELAKANG BUMPAR, SENSOR, EXZOS DAN LAIN-LAIN KEROSAKAN BELUM PASTI LAGI. SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa (Jika ada):

Tandatangan Penerima Repot:

ID Pencetak / Tarikh @ Masa Cetak : R151471 | 10/01/2023 08:16:11 PM