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 witholding 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.

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 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 25/01/2023 20:18 (SGT) Reported by Both Date of Accident 24/01/2023 12:52 (SGT) Exact Location of Accident Wilkinson Rd, Singapore Additional Location Information Wilkinson Rd Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX7285T

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner NGIAM HIAN KANG JUSTIN NRIC No SXXXX202Z Email Address JUSTINKANG93@GMAIL.COM Mobile Phone No (Phone) +65-90889233 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model Α3 Variant SEDAN 1.0 TFSI 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 999

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210007390

DRIVER

Name of Driver NGIAM HIAN KANG JUSTIN NRIC No SXXXX202Z Date Of Birth 07/04/1993 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	23/12/2014 8 YEARS AND 1 MONTH Male (Phone) +65-90889233 - JUSTINKANG93@GMAIL.COM BLK 39 LORONG 32 GEYLANG #03-04 398299 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Side Swipe Raining Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? 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? Was notice of intended Prosecution given? If yes, against whom?	
CIRCUMSTANCES OF ACCIDENT	
THIS TOYOTA NO PLATE: SNF676C, AN OLD OLD MAN, WAS WAY. I STOPPED FOR HIM TO MOVE OUT OF MY WAY, ON H SPACE FOR HIS VEHICLE TO TURN INTO INSTEAD OF MOVING SQUEEZE PAST ME WHERE MY CAR WAS STATIONARY AND MIRROR KNOCKED INTO MINE WITH A LOUD THUD SCRATC PARKING MODE AFTER THE LOUD THUD AND SHOCK TO MY	OHIS CAR SIDE MIRROR SWIPE MY SIDE MIRROR. HIS SIDE HING MY SIDE MIRROR. I SHOVE MY VEHICLE INTO THE Y NECK, I CAME OUT OF THE VEHICLE AND CONFRONT HIM. HE RS AND TOLD ME TO MAKE A REPORT AS I HAVE HIS NUMBER

Are accident photos available for attachment?

Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Vehicle Registration Number SNF676C

ATTACHMENT(S)

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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Gender Phone No	NGIAM HIAN KANG JUSTIN Male (Phone) +65-90889233
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	_
Injuries Sustained	_
Injured person in which vehicle?	_
Were seat belts worn?	
	-
Was this injured conveyed to hospital by ambulance?	-

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.
- 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)

Lunderstand, 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 & Driver's

Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A! SMX7285T B:SNF676C



De	scribe Circumstances of the Accident
7	Curning into Willsmson Road
	I was turning into Wilkinson Road on the way to my
C	relative house. It was a 2 way street. there was
1	+ As I was turning in . this towa togota no plate 28NP67
7	an old man was dratha towards the on to the lane that
î	5 My Staht of way I stopped for him to more Day
1	of the way on his left on his DWA lane there was
6	more than prough space wa for his vehicle to turn my
l'	Instead of movima into his own lake for him to
	cross he tried to samper past me when my car
\vdash	was stationary and his car side mirror swip side super
	surbe my site mirror. His side mirror Enocked into
	wine with a loud thud scratching my side mirror.
	t enouse my webicle in the side purcher ands after
	the loud third and shock to my neck, I came out
	of the wehicle and confront him. He refused to give
	any contact details or particulars and ext told me to
	injure report as I have non loss number plate.
	I have submitted the dash cam camera footage from
	my car
	Wy Cur
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T	

Declaration

We declare the foregoing particulars are true in every respect.

25/1/2023

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel







































