SA01231J0005 / AIG Asia Pacific Insurance Pte. Ltd. ENTRY DATE & TIME: 19/01/2023 11:20 (SGT) SUBMITTED BY: Paramchand, Varsha VERSION: 1 (19/01/2023 11:20 (SGT))

# **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.

- 4. The issue and acceptance of this is form by instrained 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 19/01/2023 11:20 (SGT) Reported by Date of Accident 18/01/2023 07:15 (SGT) Exact Location of Accident Singapore Additional Location Information BKE before Dairy Farm exit towards PIE (lamp post 160) Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

No - Reporting only

Vehicle Registration Number SJB916D

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LOH KA YENG NRIC No S7128171Z Email Address NOEMAIL@AIG.COM Mobile Phone No (Phone) +65-97428678 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model A6 Variant A6 2.0 TFSI 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? 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 2070026467-02

DRIVER

Name of Driver LOH KA YENG NRIC No S7128171Z Date Of Birth 20/08/1971 Occupation Indoor



Date Of Driving Pass 20/08/1996 Driving experience 26 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-97428678 Alt. Phone Number Email Address NOEMAIL@AIG.COM Address BLK 617 CHOA CHU KANG NORTH 7 Address complement #04-433 SINGAPORE Postcode Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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? Yes Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Yes Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο 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 JVH2782 Vehicle Category Motorcycle PASSENGER 1 Name Ng Year Eng Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Marina Bay Neighbourhood Police Centre

(Phone) +65-18002229999

No 70 Marina View Singapore 018962

(Fax) +65-64359276

CIRCUMSTANCES OF ACCIDENT

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Was notice of intended Prosecution given?

If yes, against whom?

R2000009657 Circumstances Of Accident On the above date and time

I was driving along BKE towards PIE and the traffic was heavy. At lamp post 160 before the Dairy Farm exit while on lane 2

I intended to make a lane switch to lane 1 when I noted there was sufficient clearance to do so. Signal was made when I started to encroach slightly into lane 1 and that was when the motorcyclist on straddling lane hit my car on my rear right bumper. The speed of the motorcyclist was significantly faster than my car and the impact thrown the lady rider off her motorcycle. Upon impact

I rendered help to her immediately and called for ambulance when I noticed she was injured. Ambulance came and the injured rider was conveyed to NTF hospital. I was assisted by the traffic Marshall on site and was escorted to the nearest car park at Dairy Farm. TP subsequently came and I was given a case card and police report was made thereafter.

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	JVH2782
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	_
Vehicle Category	Motorcycle
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 - 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? -













