

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	16/02/2023 17:57 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	15/02/2023 23:00 (SGT)
Exact Location of Accident	541A Bukit Panjang Ring Rd, Singapore 671541
Additional Location Information	MULTI STOREY CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT472L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SARAVAN S/O PANNIR SELVAM
NRIC No	SXXXX598D
Email Address	pannirsaravanan@gmail.com
Mobile Phone No	(Phone) +65-87201519
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Maserati
Model	GRANTURISMO
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	4244

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220117823

DRIVER

Name of Driver	SARAVAN S/O PANNIR SELVAM
NRIC No	SXXXX598D
Date Of Birth	19/08/1989
Occupation	Indoor

Date Of Driving Pass	23/07/2010
Driving experience	12 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87201519
Alt. Phone Number	-
Email Address	pannirsaravanan@gmail.com
Address	BLK 545 BUKIT PANJANG RING ROAD #20-885
Address complement	-
Postcode	670545
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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

PLEASE REFER TO SKETCH PLAN

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	SLV2081U
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	SARAVAN S/O PANNIR SELVAM
Gender	Male
Phone No	(Phone) +65-87201519
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMT472L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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 5. Any false reporting may be referred to the Traffic Police Department for investigation.
 6. This report will be forwarded by the Insurers to 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.
- 6. 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 envelope/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: *[Signature]*

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card): *16/02/2023*

Sketch Plan: *BUK 541A BUKIT PONDONG RING RD (MSCP)*

A - *SMF472L*

B - *SLV30814*

Multi Story Car park

Slope up


Describe Circumstance of the Accident

On the above mentioned date and time as I was travelling straight suddenly there's a car bearing SLV 20814 which was coming up from slope hit onto my right side parked of my vehicle.

Declaration
I/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

 16/01/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

		2250 kg	MADE IN ITALY
	1	1150 kg	
	2	1100 kg	
e3 3001/115 0262			
★ ZAMCH45C000047336 ★			
VERSION M145 BCA	ENGINE M139 P	N° F.SPARES 48318	

MASERATI		M145BCA		238541	
	11R	022617		14R	060003
	13HR	002481		16R	040001
	18R	022615		17R	A070002
	28R	002613		21R	010023
	39R	002616		94R	010001
	48R	022482		95R	010001
	51R	02-2400			
	64R	002614			
	83R	11B052611			
	97R	A1012610			
	101R	002612			

NITROGEN
FRT 2.2Bar RR 2.2Bar









