

## 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 .....	25/03/2023 12:44 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	24/03/2023 18:00 (SGT)
Exact Location of Accident .....	Bukit Batok West Ave. 5, Singapore
Additional Location Information .....	BUKIT BATOK WEST AVE 5, OPPS HOMETEAM NS BT.BATOK
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMN3130K
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	MOHAMED NOOR BIN AKBAR
NRIC No .....	SXXXX185D
Email Address .....	NOORBON23@GMAIL.COM
Mobile Phone No .....	(Phone) +65-97720046
Alternative Phone No .....	(Home) +65-64440262

#### VEHICLE PARTICULARS

Manufacturer .....	Audi
Model .....	Q2
Variant .....	1.0 TFSI S-TRONIC
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 .....	999

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	1900141871

#### DRIVER

Name of Driver .....	MOHAMED NOOR BIN AKBAR
NRIC No .....	SXXXX185D
Date Of Birth .....	23/08/1961
Occupation .....	Indoor

Date Of Driving Pass .....	13/09/1985
Driving experience .....	37 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97720046
Alt. Phone Number .....	(Home) +65-64440262
Email Address .....	NOORBON23@GMAIL.COM
Address .....	BLK 98 BEDOK NORTH AVENUE 4
Address complement .....	#06-1902
Postcode .....	460098
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
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 .....	-

#### PASSENGER 1

Name .....	SANGADAH BTE OSMAN
Gender .....	Female

#### PASSENGER 2

Name .....	SHAMA BENAZIR
Gender .....	Female

#### 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

ON THE 24 MARCH 2023, I WAS DRIVING OUT AT BUKIT BATOK AVE 5 TOWARDS BUKIT BATOK ROAD. AROUND 1800 I WAS DRIVING IN THE RIGHT LANE IN FRONT OF MY CAR TURNING LEFT I SIGNALLED MY CAR AND LOOK A BLIND SPOT THERE WAS NO VEHICLE. SUDDENLY, A VEHICLE BEHIND ME DROVE FASTER AND DROVE THRU MY LEFT AND HIT MY VEHICLE. I WAS HALF-LANE AND GIVEN A SIGNAL IN ADVANCE. THERE IS DAMAGE ON THE LEFT SIDE OF MY CAR.

#### 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 .....	XE3553R
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	White
Vehicle Category .....	Commercial vehicle
Name of Driver .....	ABDUL HAFIZ BIN HAMZAH
Contact Number .....	(Phone) +65-87483061
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	2

**SKETCH PLAN****IMPORTANT NOTICE**

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5. Any false reporting may be referred to the Police for investigation.
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.

M 25/03/23  
Policyholder's Signature / Date & Time

M 25/03/23  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel

**Sketch Plan**

HOME TEAM  
BT. BAYOK WEST AVE. 5  
  
① SMN 3130K  
② KE 3553R

**Describe Circumstances of the Accident**

On the 24 March 2023, I was driving at Bukit Batok Ave 5 towards Bukit Batok Rd. Around 1800 I was driving on right lane in front of me car turning left I signal my car and look blind spot there none side suddenly there a vehicle behind me driving faster and drive thru my left and hit my vehicle, I was half a lane and given signal in advance. There is damage on left side of my car

**Declaration**

We declare the foregoing particulars are true in every respect.

M 25/03/23  
Policyholder's Signature / Date & Time

M 25/03/23  
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]  
Witnessed by Reporting Centre Personnel































































































