

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	07/05/2023 13:14 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/05/2023 23:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BUKIT TIMAH ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG2829Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	THAM WAI WAH
NRIC No	SXXXX293C
Email Address	starfish1328@gmail.com
Mobile Phone No	(Phone) +65-91777863
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Tiguan
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	1390

INSURANCE COMPANY

Name of Insurance Company	Singapore Life Ltd
Policy Number / Cover Note Number	11036251

DRIVER

Name of Driver	THAM WAI WAH
NRIC No	SXXXX293C
Date Of Birth	16/02/1966
Occupation	Indoor

Date Of Driving Pass	14/04/1993
Driving experience	30 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-91777863
Alt. Phone Number	-
Email Address	starfish1328@gmail.com
Address	123 JALAN JURONG KECHIL
Address complement	#04-26
Postcode	598680
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	Yes
Vehicle Registration Number of Other Vehicle Owned by Driver	EY1328H
Insurance Company of Other Vehicle Owned by Driver	AIG Asia Pacific Insurance Pte. Ltd.

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Wet

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	Passenger 1
Gender	Female

PASSENGER 2

Name	Passenger 2
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

I was traveling along Bukit Timah road it was a 3 lane traffic and my vehicle was positioned in the middle lane as I slowed down third party vehicle which was behind me collided onto my vehicle rear. No injuries involved.

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	SNH180E
Vehicle Manufacturer	Porsche
Vehicle Model	Macan
Vehicle Variant	-
Vehicle Colour	Blue
Vehicle Category	Private car
Name of Driver	HENG JING JIE, JACKY
NRIC No	SXXXX729H
Contact Number	(Phone) +65-82989798
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

PASSENGER 1

Name	Passenger 1
Gender	Female

Describe Circumstances of the Accident

I was traveling along Bukit Timah road it was a 3 lane traffic and my vehicle was positioned in the middle lane as I slowed down third party vehicle which was behind me collided onto my vehicle rear. No injuries involved.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time 7 May 2023

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

Witnessed By Reporting Officer
Mohamed Saifullah S/O Syed Masood

Witnessed by Reporting Centre
Personnel

ACCIDENT DIAGRAM Ver. Jun2022

Bukit Timah Road:

Vehicle A: SMG2829Y
Vehicle B: SMH180E

[Signature]
Policyholder's Signature / Date & Time

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

Witnessed By Reporting Officer
Mohamed Saifullah S/O Syed Masood
Witnessed by Reporting Centre
Personnel

AJAX MARB PTE LTD







































































