

# 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 ..... 10/05/2023 10:54 (SGT)  
Reported by ..... Both Policyholder and Actual Driver  
Date of Accident ..... 10/05/2023 09:10 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Filter lane into Clemenceau Avenue  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLF202K

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... Lim Wei-Wen Aaron  
NRIC No ..... S7923291B  
Email Address ..... aaronlim99@hotmail.com  
Mobile Phone No ..... (Phone) +65-96225257  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Mercedes  
Model ..... A180  
Variant ..... BENZ A180 BE STYLE  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1595

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Policy Number / Cover Note Number ..... 2100478239-06

### DRIVER

Name of Driver ..... TAN XINLI, CINDY (CHEN XINLI, CINDY)  
NRIC No ..... S8433093J  
Date Of Birth ..... 29/10/1984  
Occupation ..... Indoor

Date Of Driving Pass .....	01/07/2003
Driving experience .....	19 YEARS AND 10 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-92334222
Alt. Phone Number .....	-
Email Address .....	Cindytan_84@yahoo.com.sg
Address .....	48 SPOTTISWOODE PARK ROAD
Address complement .....	#32-03
Postcode .....	-
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	OTHER
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 .....	Collision - Head to Rear
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) .....	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

R2000010116    Circumstances Of Accident    Exiting from Filter Lane into Clemenceau Road

a 3rd party vehicle is at a complete stop without moving off when my vehicle was prepared to accelerate out onto the major road (Clemenceau) due to no incoming vehicle from the right after verifying with a check by turning the head to the right

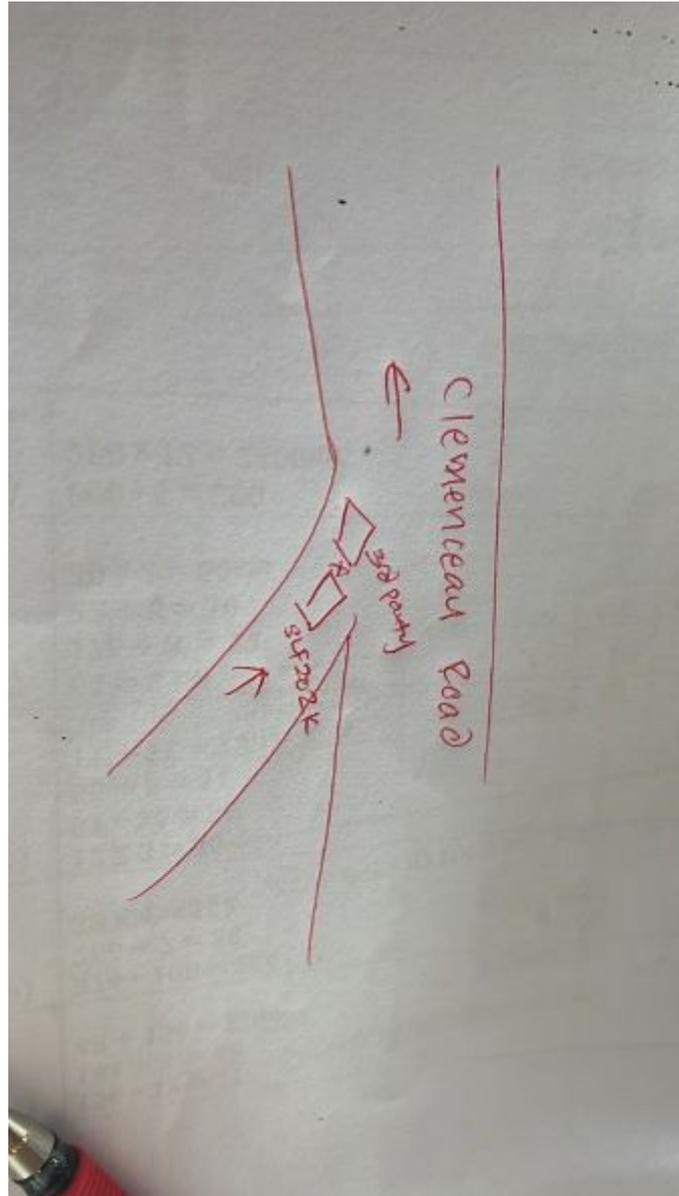
#### ATTACHMENT(S)

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 .....	GBD9714U
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	Goods vehicle
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) .....	-











GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S665500206 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the **same** Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : SA01235A0003 Vehicle Registration No: SLF202K  
 Name (as shown in NRIC) : Tan Xinli Cindy NRIC/FIN/Passport No : S8433093J  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address : 48 Spottiswoode Park Road #32-03 Singapore( 088660)  
 Contact (Tel) : Nil Mobile No. : 92334222  
 Email Address : Cindytan\_84@yahoo.com.sg  
 Date of Accident : 10th May 2023 Time of Accident : 910am  
 Place of Accident : Filter lane into Clemenceau Ave from Fort Canning  
 Insurance Company: AIG

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Change of Driver's name during accident. The earlier form had self-input the driver's details by assuming it is the car owner

Change of report from Reporting only to Own Damage claim.

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: