

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	05/06/2023 15:46 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	03/06/2023 01:20 (SGT)
Exact Location of Accident	Sims Ave, Singapore
Additional Location Information	TWDS SIMS AVE EAST BEFORE ALJUNIED ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNJ4263M
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	GOH LEASING
Company Reg No	53392514B
Email Address	FRANCIS4436@GMAIL.COM
Mobile Phone No	(Phone) +65-83825855
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Opel
Model	Insignia
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5136450420

DRIVER

Name of Driver	YIP WAI KONG
NRIC No	S8113358A
Date Of Birth	09/05/1981
Occupation	Outdoor