# 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 witholding 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.

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   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 20/07/2023 12:57 (SGT) Reported by **Actual Driver** Date of Accident 20/07/2023 09:30 (SGT) Exact Location of Accident Singapore Additional Location Information JUNCTION OF JALAN EUNOS AND EUNOS CRESCENT **TOWARDS PIE** Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Kia

2151

Vehicle Registration Number SLK1983G

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner SHERMAINE NG QIN PEI NRIC No SXXXX755Z Email Address ADRIANSHERMAINE@GMAIL.COM Mobile Phone No (Phone) +65-97828308 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Carnival 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 - Reporting only Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210144677

DRIVER

CC

Name of Driver TAN THENG WAI ADRIAN (CHEN TENGWEI) NRIC No SXXXX941C Date Of Birth 12/01/1977

Occupation Indoor Date Of Driving Pass 30/04/1999 Driving experience 24 YEARS AND 3 MONTHS Gender Male Mobile Number (Phone) +65-96953933 Alt. Phone Number Email Address ADRIANSHERMAINE@GMAIL.COM Address **BLK 8 ANGKLONG LANE** Address complement #03-04 Postcode 579981 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured Spouse Does Driver Own Other Vehicles? Nο 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 Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED STATEMENT 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
 SKU889L

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour
 White

 Vehicle Category
 Private car

 Name of Driver
 EDDY SEE HOCK LAI

NRIC No	SXXXX265G
Contact Number	(Phone) +65-96889114
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

# SKETCH PLAN

# IMPORTANT NOTICE

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- 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 Traffic Police Department for investigation.
- 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.
- 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 invoive 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.

Policyholder's Signature / Date & Time

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

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

# Sketch Plan

Jalan > A D Van B. SKU 8 89 L

Emos Sunos

Wunsozz

on 20 7 23 at about 0930 hs, I was driving clong.	
Jalan Ermos Powards PIE direction.	
While crossing the junction of Euros Grescent,	
a white relicle (SKU 889L) suddenly swerved	
to my lane and hit against my velvale (SLK198	X
right front portion.	
No one was injured	
,	

Declaration

I/We declare the foregoing particulars are true in every respect.

vJun2022























