

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 First Submission	14/08/2024 16:13 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	14/08/2024 09:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	STEVENS ROAD, ENTRANCE J MERCURE HOTEL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS317G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LOH KIA IM PATRICIA
NRIC No	SXXXX954F
Email Address	patkiloh@hotmail.com
Mobile Phone No	(Phone) +65-98318387
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q3
Variant	Q3 SPORTBACK 1.5 TFSI
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	1498
Vehicle Fuel	-
First Registration Date	30/01/2023
Chassis no	WAUZZZF32P1012106
Effective Date/Time of Ownership	-

INSURANCE COMPANY

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

DRIVER

Name of Driver	LOH KIA IM PATRICIA
NRIC No	SXXXX954F
Date Of Birth	31/01/1959
Occupation	Indoor
Driving Pass Date	21/06/1977
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	47 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98318387
Alt. Phone Number	-
Email Address	patkiloh@hotmail.com
Address	BLK 31 BALMORAL PARK
Address complement	#03-31
Postcode	259858
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	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	AMM9346
Vehicle Category	Private car

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Timah Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004629999
Alt. Police Station Phone No	(Fax) +65-64628933
Police Station Address	1 Duke Road Singapore 268914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	DASHCAM WITH TRAFFIC POLICE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	AMM9346
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	FORUQ HAMIN BIN HIDZIR
Contact Number	(Phone) +65-85013842
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1


Name of injured person	FARUQ HAKIM BIN HIDZIR
Gender	-
Phone No	(Phone) +65-88013842
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

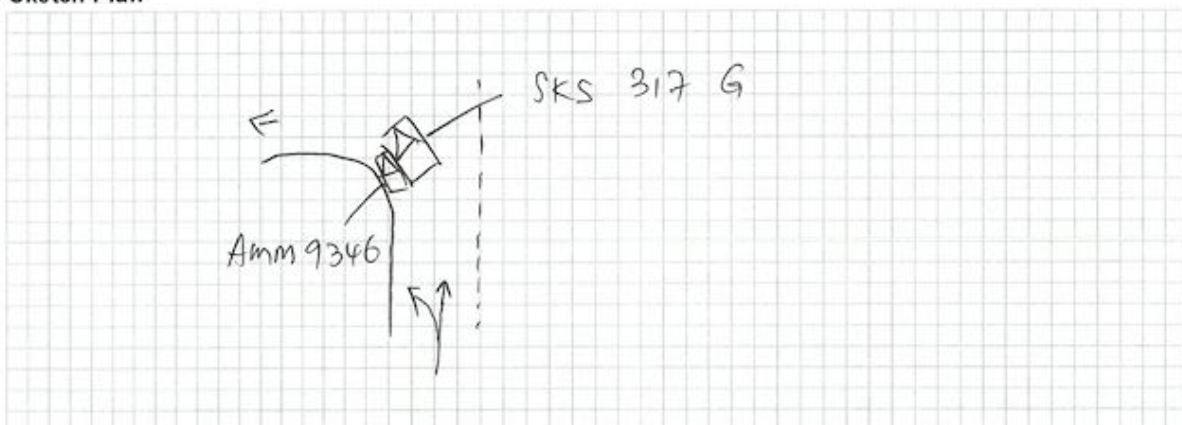
SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


Policyholder's Signature / Date &
Time 14/8/24 3.22pm
Sketch Plan

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


Witnessed by Reporting Centre
Personnel



Describe Circumstances of the Accident

Refer to Police Report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time
14/8/24
3.22pm

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



Witnessed by Reporting Centre Personnel































































**SINGAPORE
POLICE FORCE**



T/20240814/2045

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

1 of 3

Report No. T/20240814/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/08/2024 13:07	Vide Report No.: E/20240814/0061	Station Diary No.: 36
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Informant's Particulars

Name of Informant: LOH KIA IM PATRICIA			Address: 31 BALMORAL PARK #03-31 SINGAPORE 259858		
ID Type / ID No.: NRIC NO / S1296954F			Contact No.: Home/Office: Mobile: 98318387		
Nationality: SINGAPORE CITIZEN			Email: patkiloh@hotmail.com		
Sex: Female	Age: 65	Date of Birth: 31/01/1959	Type of Informant: Driver		
Race: Chinese			Language:		
Occupation: Retiree			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/08/2024 09:40	Type of Location: Straight Road
Location: STEVENS ROAD				
Weather: Clear		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
AMM9346				Black	Slightly Damaged	0
SKS317G		AUDI	Q3	Grey	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



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Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20240814/2045

CONTINUATION OF REPORT

Name	Faruq Hakim Bin Hidzir	ID No.	G7708212W
Related Vehicle	AMM9346	Contact No.	NIL
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	14/08/2024	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight
Driver			
Name	LOH KIA IM PATRICIA	ID No.	S1296954F
Related Vehicle	SKS317G	Contact No.	98318387
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On the date, time and location I was driving along Stevens Rd and I was driving on the most left lane and wanted to turn into Mercure Hotel. The floor was wet, and the sky was clear, road was congested. I was turning into Mercure hotel when suddenly a motorbike had collided with my left side of my vehicle. I saw him skid and fall into the bushes in front of Mercure Hotel. I immediately parked my car at the side entrance of Mercure Hotel and went to check on the rider. The Mercure traffic warden called for Police and SCDF. The rider was still laying down and got up moments later, he informed me that his right arm could not move. The Police came and questioned us, and I informed the Police officer of what had happened, and he took my SD card for investigation. They issued me a Police acknowledgement slip. I overheard the rider telling the Police officer that he intended to go straight.

After SCDF made a check on the rider, I exchange particulars with the rider. I ask the SCDF where they were taking him, and they said Tan Tock Seng Hospital. The police then told me to lodge a Police report.

The damage to my car: Scratched on my rear left door and left passenger door, my left view mirror was damaged as well.



**SINGAPORE
POLICE FORCE**



T/20240814/2045

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Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20240814/2045

CONTINUATION OF REPORT

Signature of Officer Recording The
E /
SGT 2 SURA HANDOYO
NURHAKIM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
STAFF SGT TAN WEI SIONG
Contact No.: 96723584

Signature Of Informant:

Date/Time:
14/08/2024 13:07

Classification Of Case:

NP168