

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 | 15/11/2024 16:28 (SGT) |
| Reported by | Both Policyholder and Actual Driver |
| Date of Accident | 06/09/2024 17:50 (SGT) |
| Exact Location of Accident | 51 Meyer Rd, Singapore 437874 |
| Additional Location Information | GUARD HOUSE |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------------|----------|
| Vehicle Registration Number | SJH3838U |
|-----------------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------------|---------------------------------|
| Is company? | No |
| Name Of Registered Owner | CHONG YONG WEI @CHONG CHAI HING |
| NRIC No | S1646033H |
| Email Address | vincentchong38@yahoo.com.sg |
| Mobile Phone No | (Phone) +65-86689418 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------|
| Manufacturer | Mercedes |
| Model | Cla180 |
| 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 |
| CC | 1595 |
| Vehicle Fuel | - |
| First Registration Date | - |
| Chassis no | - |
| Effective Date/Time of Ownership | - |

INSURANCE COMPANY

| | |
|---|--------------------------------------|
| Name of Insurance Company | AIG Asia Pacific Insurance Pte. Ltd. |
| Policy Number / Cover Note Number | 7240044584 |

DRIVER

| | |
|--|---------------------------------|
| Name of Driver | CHONG YONG WEI @CHONG CHAI HING |
| NRIC No | S1646033H |
| Date Of Birth | 03/07/1964 |
| Occupation | Indoor |
| Driving Pass Date | 03/08/1982 |
| Driving License Pass Class | 3 |
| Driving License Validity | Valid |
| Driving experience | 42 YEARS AND 1 MONTH |
| Gender | Male |
| Mobile Number | (Phone) +65-86689418 |
| Alt. Phone Number | - |
| Email Address | vincentchong38@yahoo.com.sg |
| Address | 36 LORONG 31 GEYLANG #05-03 |
| Address complement | - |
| Postcode | 388034 |
| 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 | 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) | 2 |
| 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 | WIFE |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|--------------------------------------|
| Was the accident reported to the police? | Yes |
| Police Station Name | Bedok Division Headquarters |
| Police Station Phone No | (Phone) +65-18002440000 |
| Alt. Police Station Phone No | (Fax) +65-64443009 |
| Police Station Address | 30 Bedok North Road Singapore 469676 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT G/20240930/7007

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 SGG4988D
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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) -

Describe Circumstance of the Accident


REFER to POLICE REPORT, G/20240930/7007

Declaration


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

 15/11/2024

Policyholder's Signature / Date & Time

 15/11/2024

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

 15/11/2024

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





















**SINGAPORE
POLICE FORCE**



G/20240930/7007

1 of 2

POLICE REPORT (NP299)

Report No. G/20240930/7007

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

| | | | | | |
|--|--|---|-----------|-----------------------------|-----------------|
| Date/Time Report Made 30/09/2024 02:05 | | Vide Report No. | | Station Diary No. | |
| Name Of Informant CHONG YONG WEI | | Address 36 LORONG 31 GEYLANG #05-03 SINGAPORE 388034 | | | |
| ID Type / ID No. | | Contact No. | | | |
| NRIC NO / S1646033H | | Home/Office: | | Mobile: 86689418 | |
| Nationality SINGAPORE CITIZEN | | Email Address VINCENTCHONG38@YAHOO.COM.SG | | | |
| Occupation Delivery driver | | Sex Male | Age 60 | Date of Birth 03/07/1964 | Race Chinese |
| Institution/School Name | | Language English | | | |
| Date/Time Of Incident 06/09/2024 17:20 - 06/09/2024 17:50 | | Location Of Incident #Nil-Nil THE BELVEDERE | | | |

Brief details.

The incident happened at 51 Meyer road guard house on the above stated date.
Wanted to enter the property but was told by guard to press intercom.
I have to reverse to reach for the intercom.
While reversing slowly, I heard a loud horn behind so I stopped and alighted the car to check on what happen.
The car SGG4988D was too near to me and therefore my back of the car was brushed against his bumper.
Nothing happen to my fiber bumper but he found out that his plastic bumper had a light scratch/dent.
I offered to polish his bumper but was turn down as he said he was too busy. I offered him to reach out to me anytime so I could polish for him but he insist that he wanted a whole new bumper. I negotiated that just a light scratch/dent is too much to change a new bumper and offered to polish instead.
He just took a photo and left without exchanging any form of contacts.

| | |
|--|--|
| Signature Of Officer Recording The Report: Not applicable | Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required. |
| Signature Of Interpreter: Not applicable | Date/Time: 30/09/2024 02:05 |
| Officer In-Charge Of Case: | Classification Of Case: |



**SINGAPORE
POLICE FORCE**



G/20240930/7007

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20240930/7007

| | | | |
|-------------------|----------------------------|---------------------------|---|
| Subjects Involved | | | |
| Suspect | | | |
| Person Name | Not sure | | |
| Gender | Male | | |
| Victim | | | |
| Person Name | CHONG YONG WEI | | |
| ID Type | NRIC NO | ID No | S1646033H |
| Gender | Male | Age | 60 |
| Race | Chinese | Language | English |
| Occupation | Delivery driver | Address | 36 LORONG 31 GEYLANG #05-03 SINGAPORE 388034 |
| Mobile No | 86689418 | Is Informant A Victim? | Yes |
| Person Name | CHONG YONG WEI (Informant) | | |

| | |
|--|--|
| Signature Of Officer Recording The Report: Not applicable | Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required. |
| Signature Of Interpreter: Not applicable | Date/Time: 30/09/2024 02:05 |
| Officer In-Charge Of Case: | Classification Of Case: |