

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	20/06/2024 18:52 (SGT)
Reported by	Actual Driver
Date of Accident	19/06/2024 18:50 (SGT)
Exact Location of Accident	80 Airport Blvd., Singapore Changi Airport, Singapore 819642
Additional Location Information	CHANGI AIRPORT TERMINAL 1, CARPARK LVL B2M, LOT 19
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDA7818J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LOW BOON SOON
NRIC No	SXXXX524E
Email Address	Ericlowbs@gmail.com
Mobile Phone No	(Phone) +65-96633730
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A8l
Variant	D5 3.0 TFSI QU
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	2995

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900080269-04

DRIVER

Name of Driver	TAN GEOK LENG
NRIC No	SXXXX682I
Date Of Birth	11/05/1973
Occupation	Indoor

Driving Pass Date	27/11/1992
Driving experience	31 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96829728
Alt. Phone Number	-
Email Address	TANGEOKLENG.TGL@GMAIL.COM
Address	13 BEDOK RESERVOIR VIEW
Address complement	#18-03
Postcode	478932
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
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	Fire, explosion or lightning
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	0
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?	Yes
Police Station Name	REPORT NO. P/20240619/0055
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHMENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

SKETCH PLAN

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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.

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 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' 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

Sketch Plan

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

Witnessed by Reporting Centre Personnel



[Handwritten signature]
20/06/24 1200Hm

Tony Foong

No sketch plan available

1. Mr Eric Low drove to Bedok Reservoir to pick up Tan GL around 1810hrs.

3. Notified via Changi airport PA system around 1850hrs. Eric received call around 1900hrs informing that SDA7818J caught fire.

4. Tan GL arrived at carpark B2M around 1902hrs, police officers, airport firefighters and CAG executives were on site, around the car, equipped with fire fighting equipments.

5. Surrendered key to fire fighter whom later asked if the window can be wind down, pressed unlock button on key fob to partially wound down the window. smoke bellowed out.

6. No naked fire detected when fire fighters opened the door, no water or chemicals used.

7. Statements taken by police officers and SCDF officers. Report Number: P/20240619/0055

8. called Audi 24hrs roadside assistance for tow.

9. SCDF IO arrived on scene around 2100hrs, investigated vehicle, assessed damage.

10. Vehicle towed from T1 carpark around 2140hrs.

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre
Personnel Tony Foery









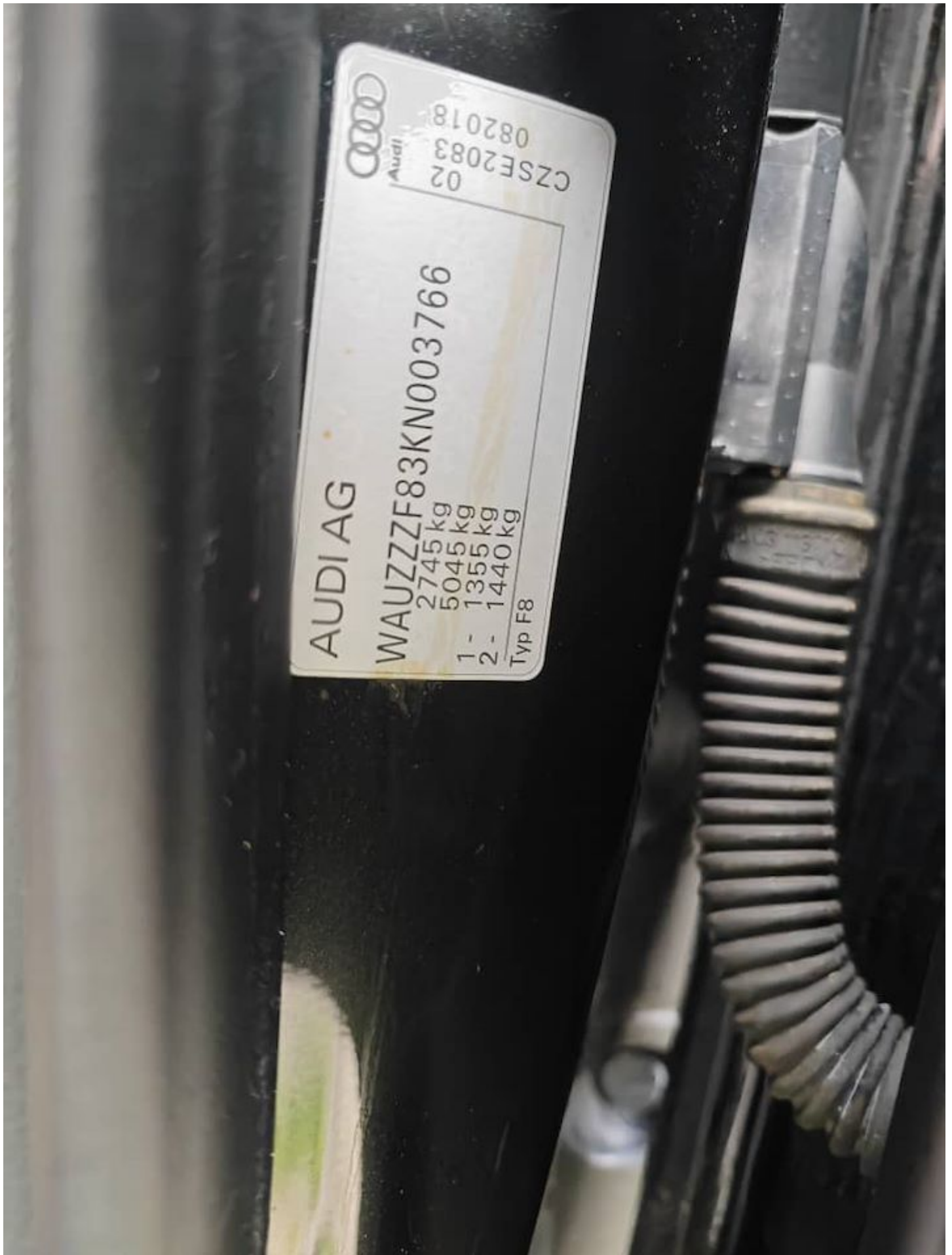




















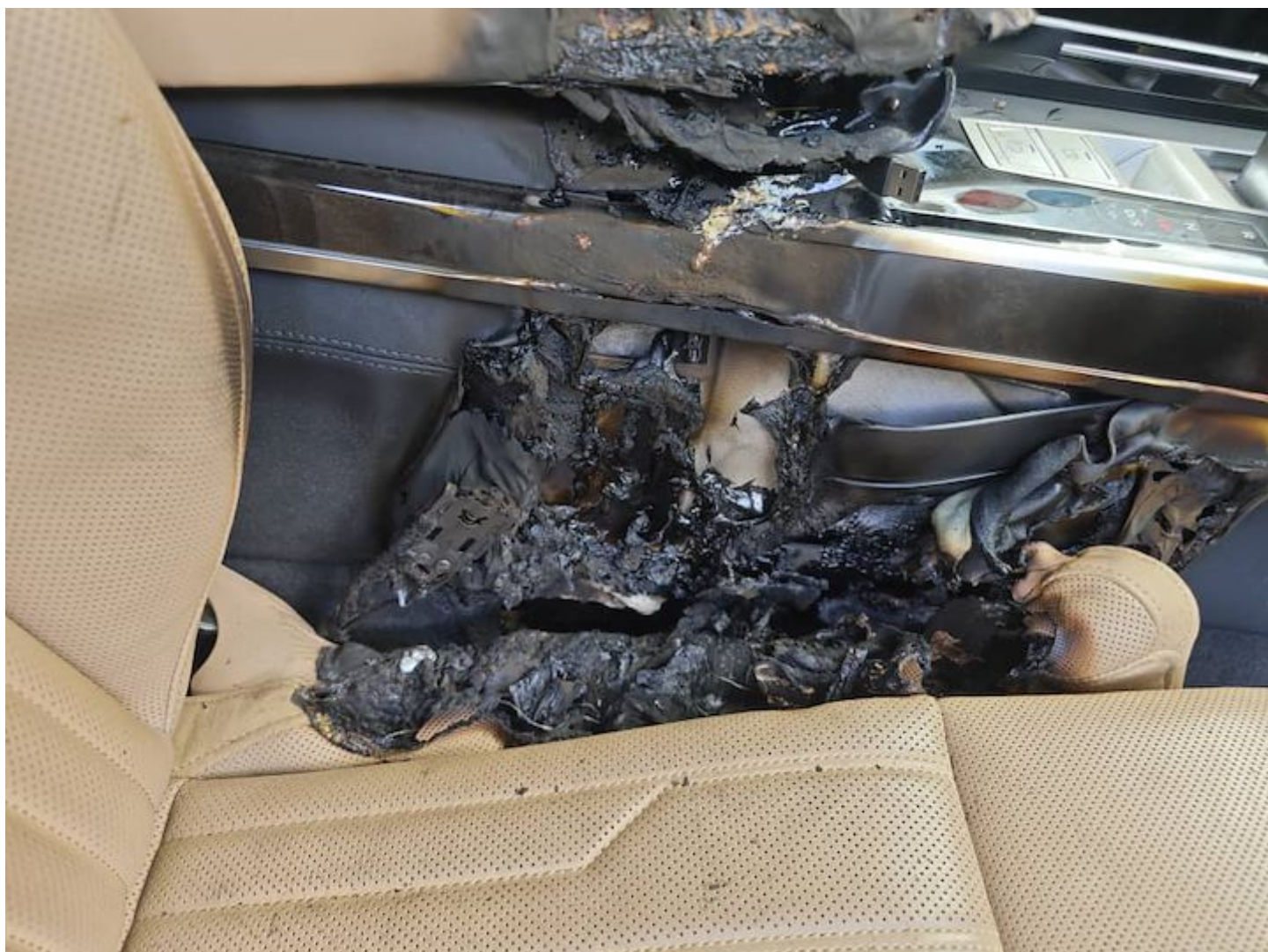




















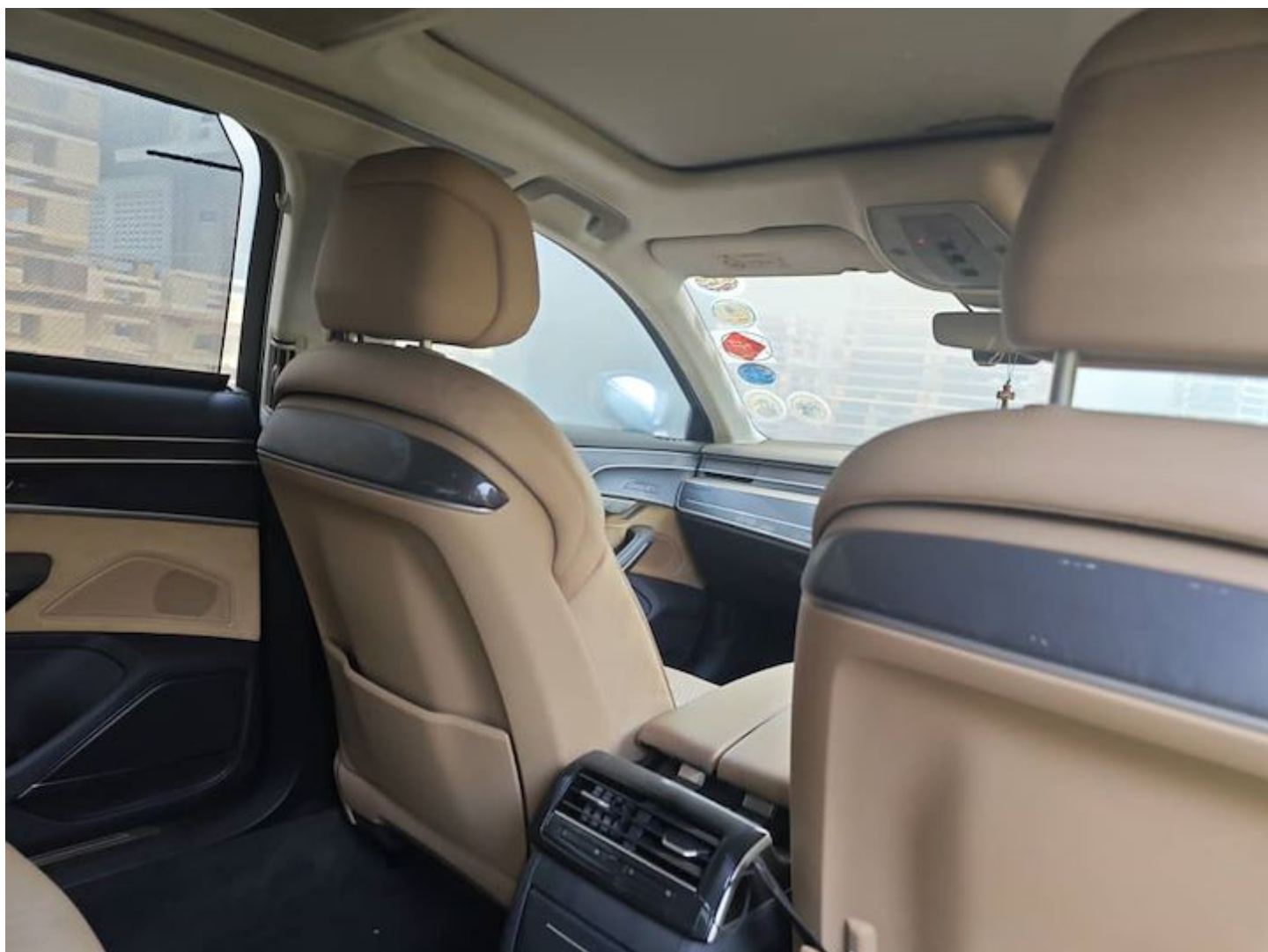










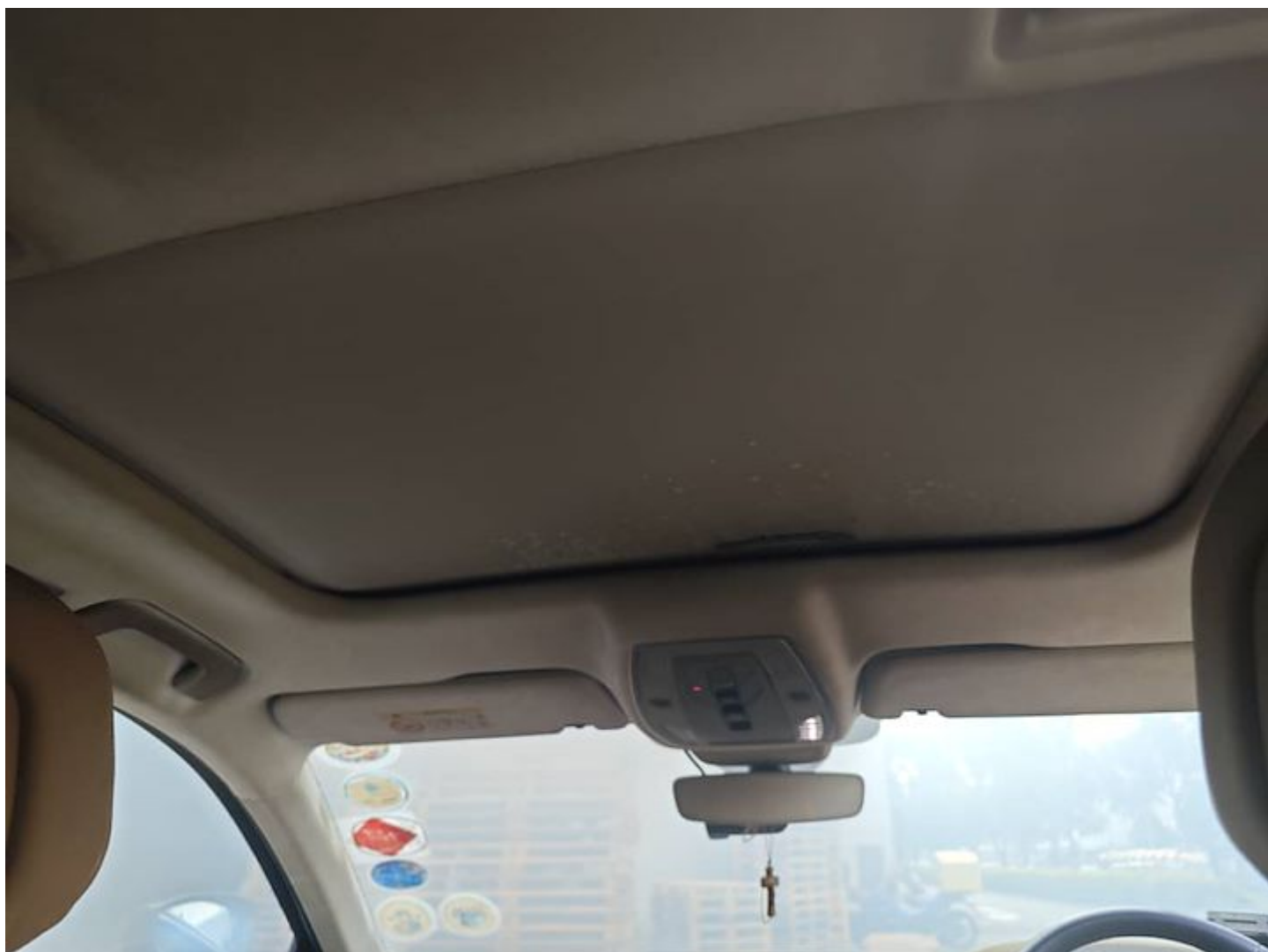




















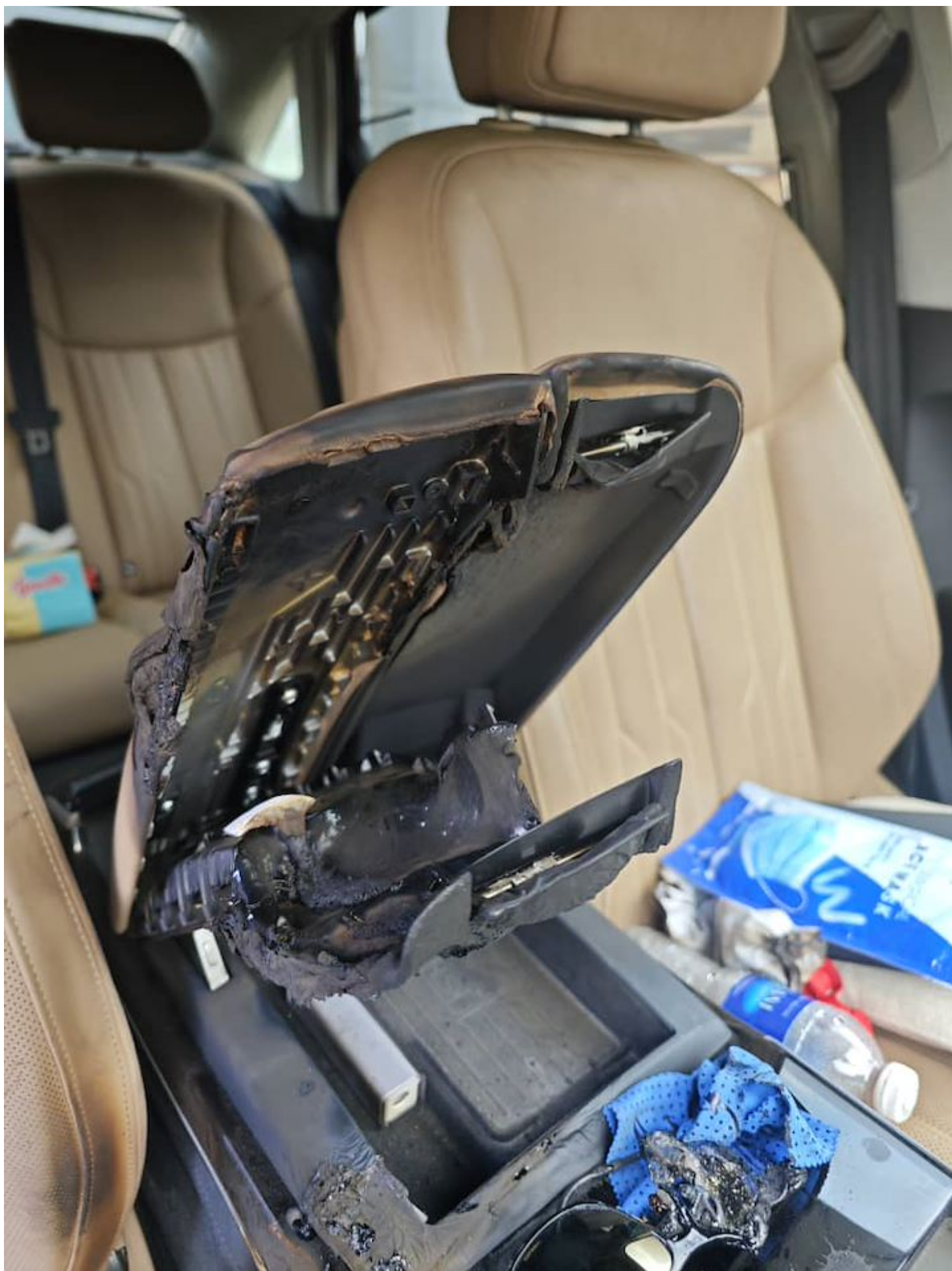






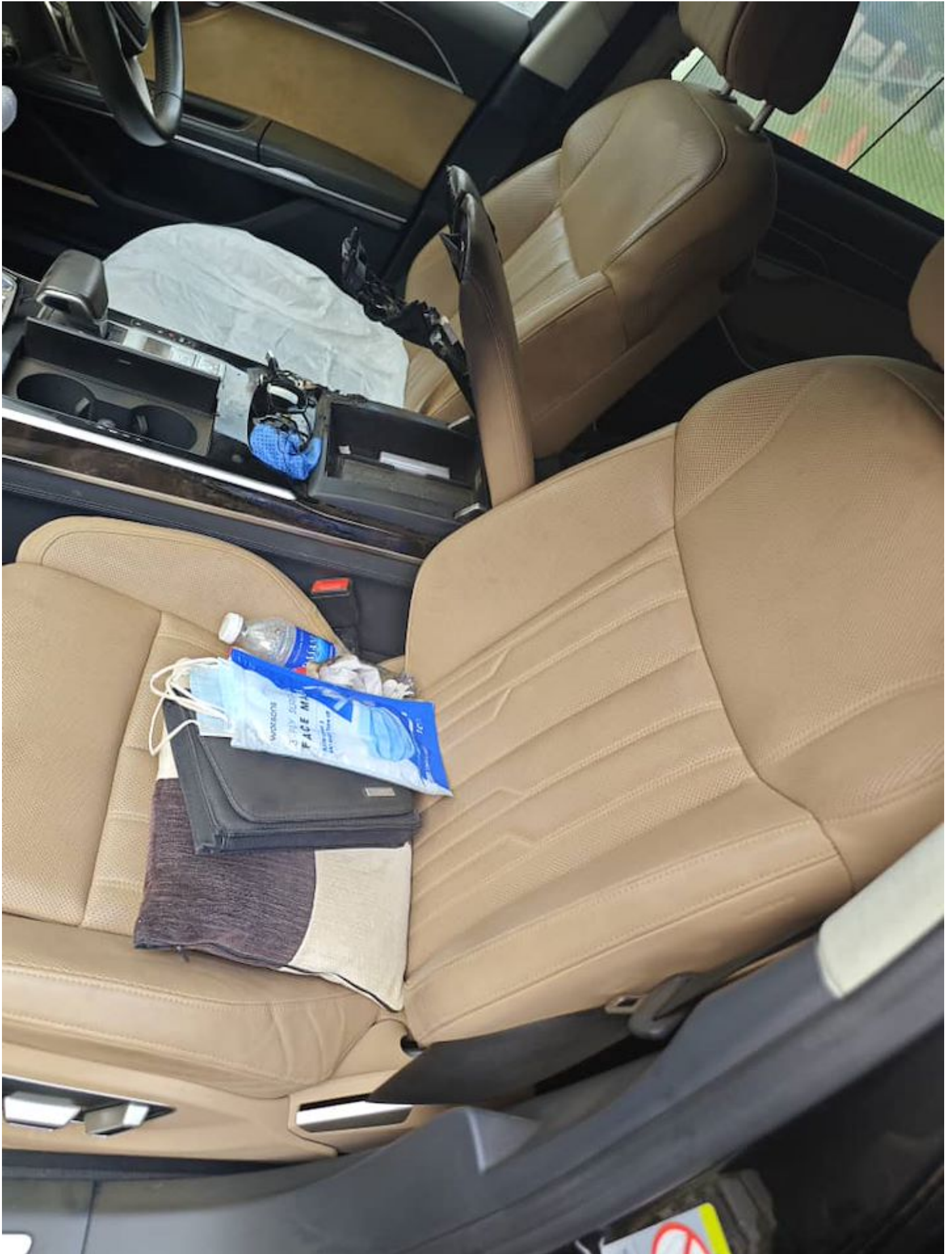










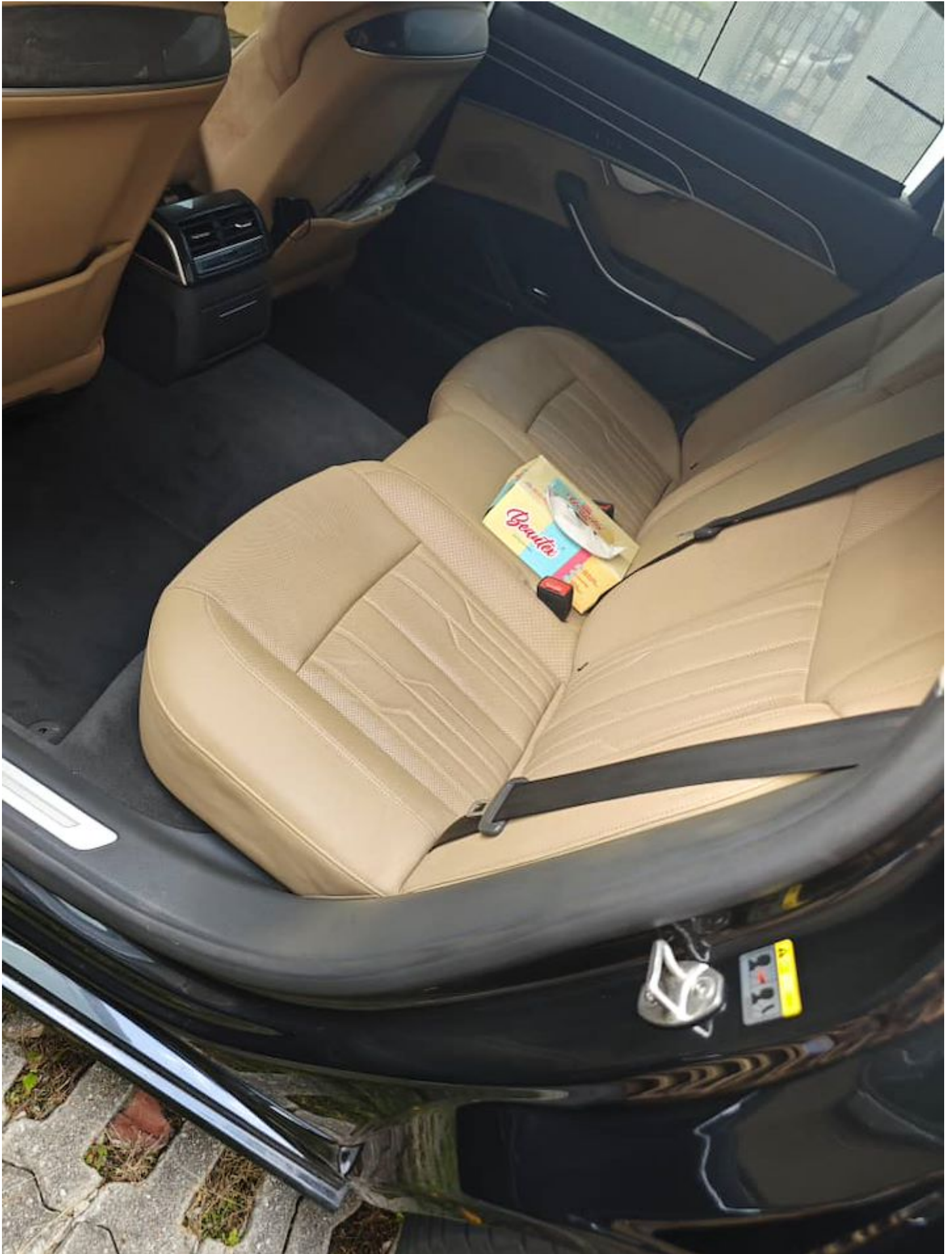


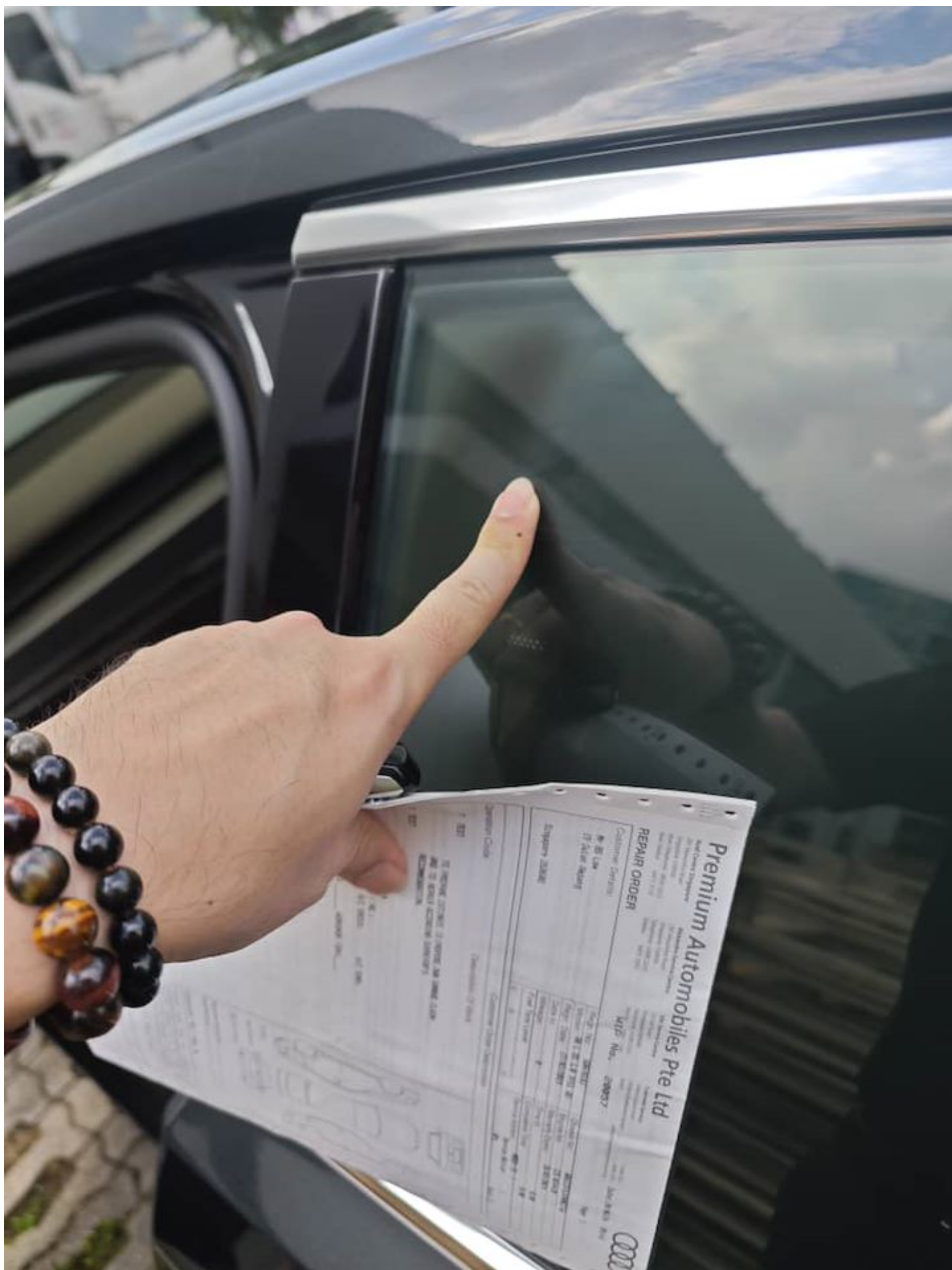






















SINGAPORE POLICE FORCE
SAFEGUARDING EVERY DAY

CASE CARD

Report Number: P/20240619/0055

Classification: _____

Actions Taken:

- ☐ Advised to seek assistance from State Courts
- ☐ Advised to seek community mediation
- ☐ For further investigation (case number: _____)
- ☐ Others: _____

For queries, please contact:

6446 0000

1800 6543058

TEL: _____

Email: SP_APJ/KM/BK/CS/3196752

NP319E (2019)

If further investigation is conducted:

Police are investigating into your case. The Police may contact you or other witnesses to seek further information.

Police will inform you of the case outcome upon completion of investigation.

You may contact the Investigation Officer in charge if you need further clarification or have information to provide.

NP319E (2019)

QR CODE



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: S66550020G / 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 : SP14246K0006 Vehicle Registration No: SDA 7818 J
Name (as shown in NRIC) : LOW BOON SOON NRIC/FIN/Passport No : SXXXX524E
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 13 BEDOK RESERVOIR VIEW, #18-03 Singapore (478932)
Contact (Tel) : _____ Mobile No. : 96633730
Email Address : Ericlowbs@gmail.com
Date of Accident : 19/06/2024 Time of Accident : 18:50
Place of Accident : CHANGI AIRPORT TERMINAL 1, CARPARK LVL B2M, LOT 19
Insurance Company: AIG Asia Pacific Insurance Pte. Ltd.

(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:

TO AMEND OWNER'S EMAIL ADDRESS



Policyholder / Driver's Signature
Date:

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