

## 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 .....	10/07/2024 17:35 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	09/07/2024 14:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	OPEN CARPARK AT JALAN BAHAR
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKJ5360U
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	NEWCRANE HOLDINGS PTE LTD
Company Reg No .....	2XXXX701G
Email Address .....	jeanhzhz@gmail.com
Mobile Phone No .....	(Phone) +65-86911899
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Audi
Model .....	A5
Variant .....	A5 SB 2.0 TFSI QU
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? .....	Yes
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1984

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7220045142-02

#### DRIVER

Name of Driver .....	HAN HONGZHEN
NRIC No .....	SXXXX531B
Date Of Birth .....	03/06/1980
Occupation .....	Indoor

Driving Pass Date .....	23/03/2009
Driving experience .....	15 YEARS AND 4 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-86911899
Alt. Phone Number .....	-
Email Address .....	JEANHAN66@YAHOO.COM
Address .....	244 WESTWOOD AVENUE
Address complement .....	#06-53
Postcode .....	648366
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	DIRECTOR
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	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 .....	Nanyang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007929999
Alt. Police Station Phone No .....	(Fax) +65-67912972
Police Station Address .....	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO POLICE REPORT

#### 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 .....	UNKNOWN
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	NA / Unknown
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) .....	-

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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

10 Jul 2024  
11:50

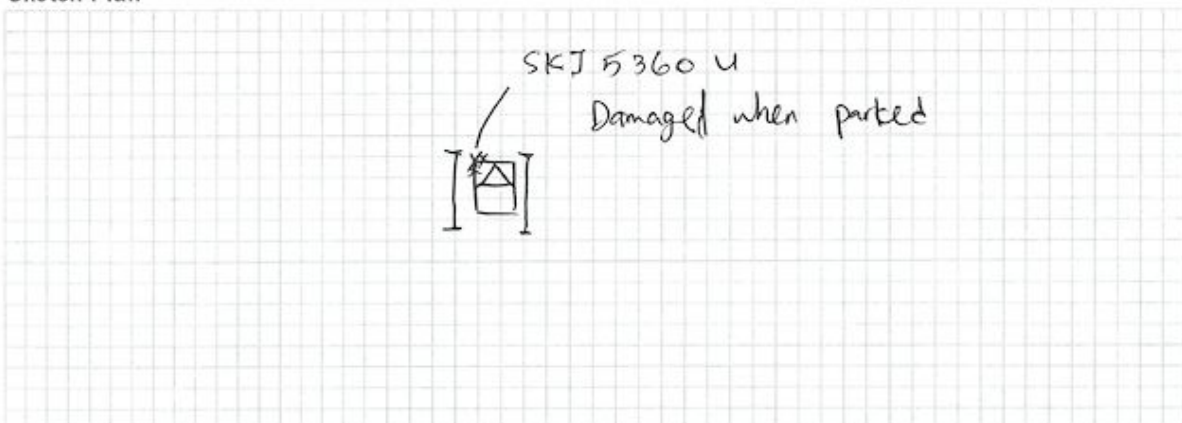
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]*

Witnessed by Reporting Centre Personnel



### Sketch Plan



**Describe Circumstances of the Accident**

Pls refer to police Report

**Declaration**

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

























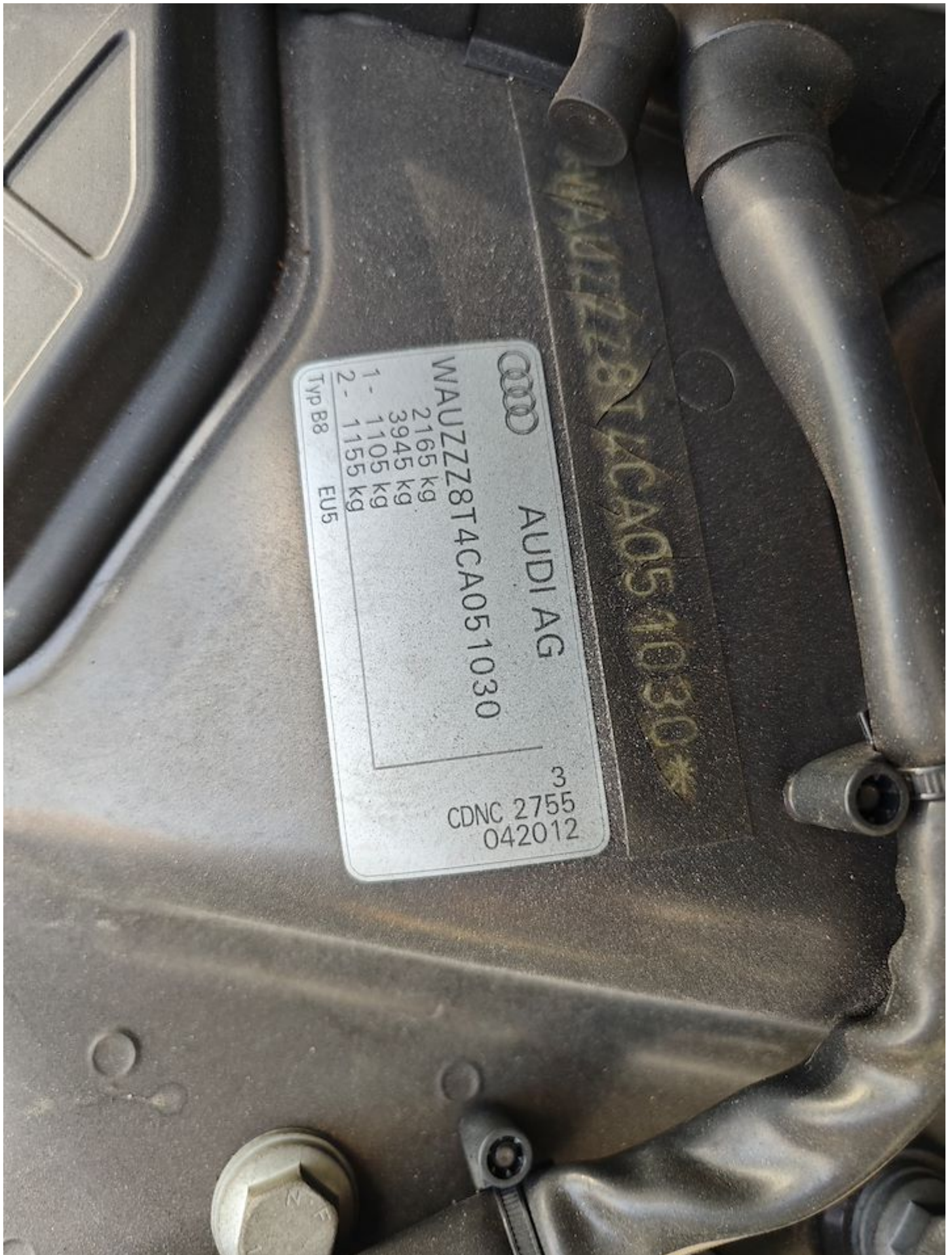








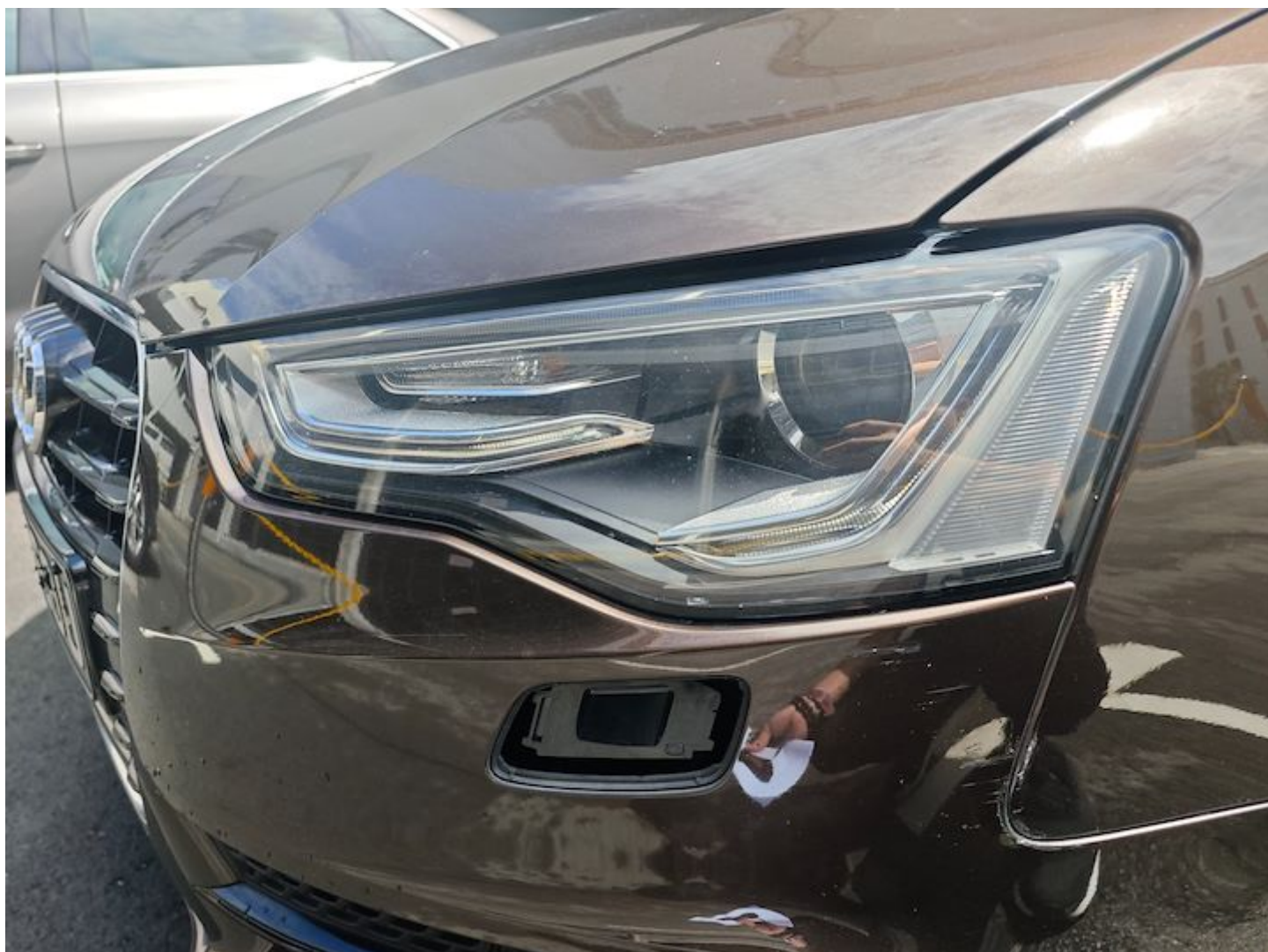




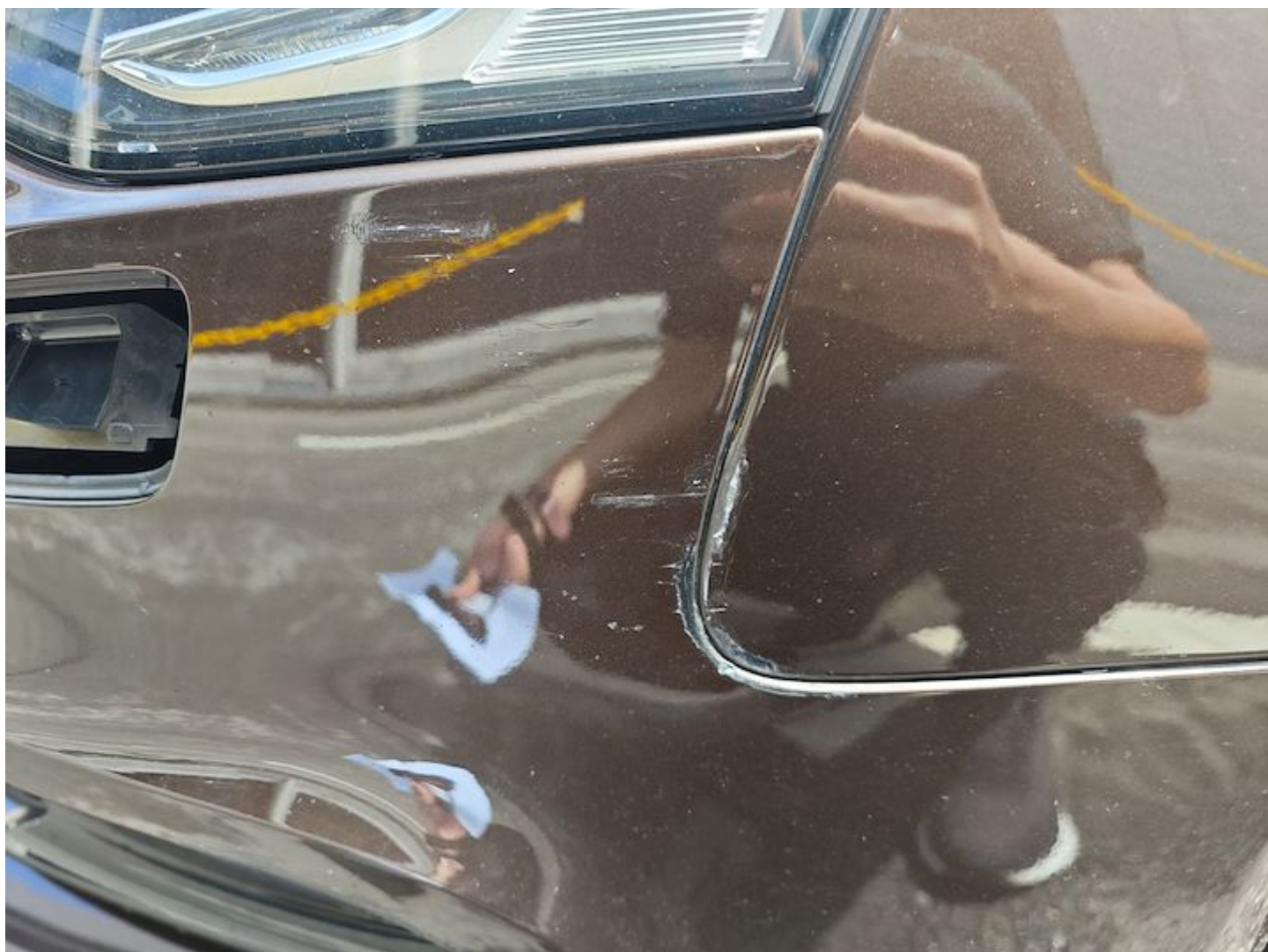




























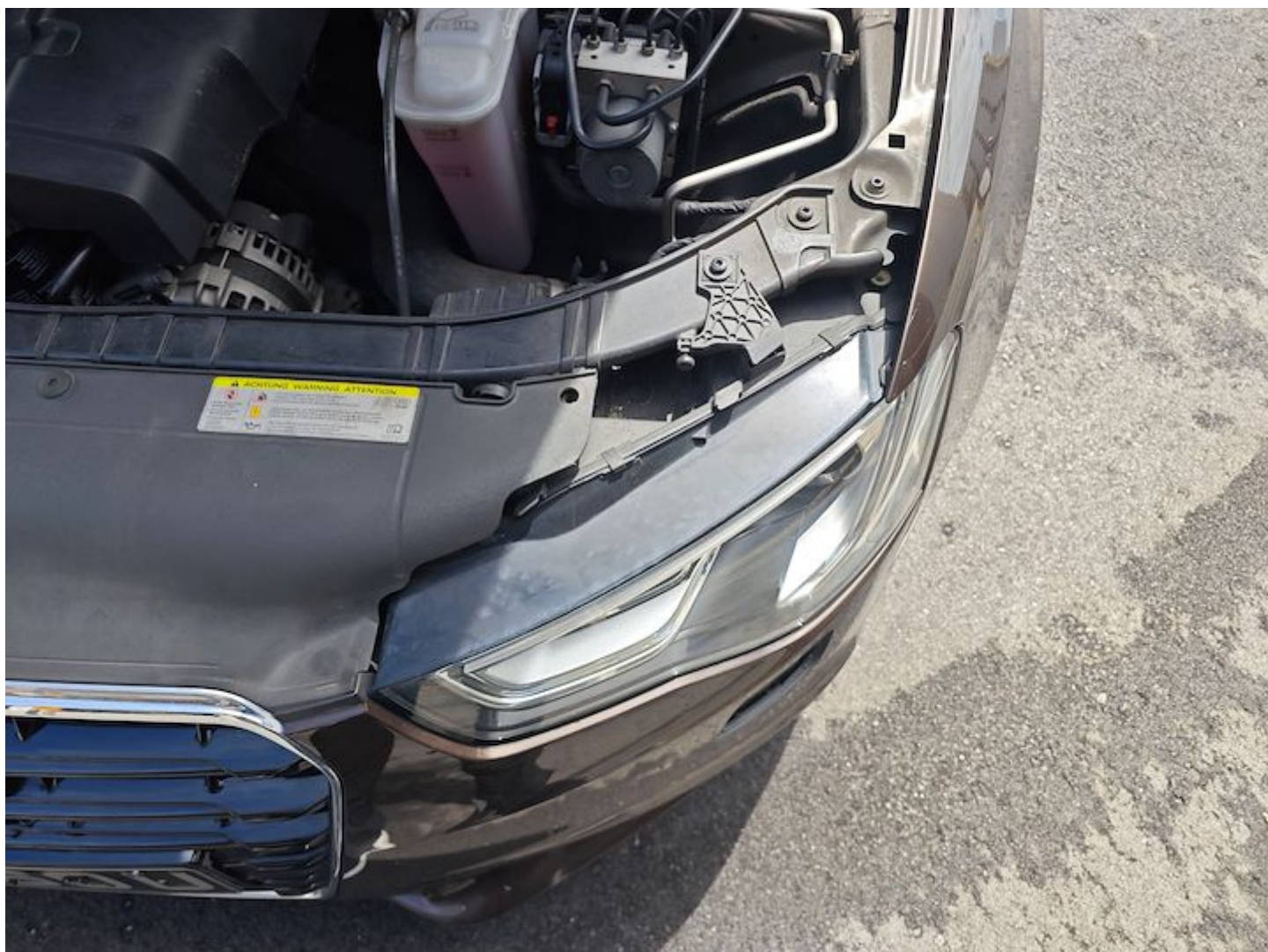








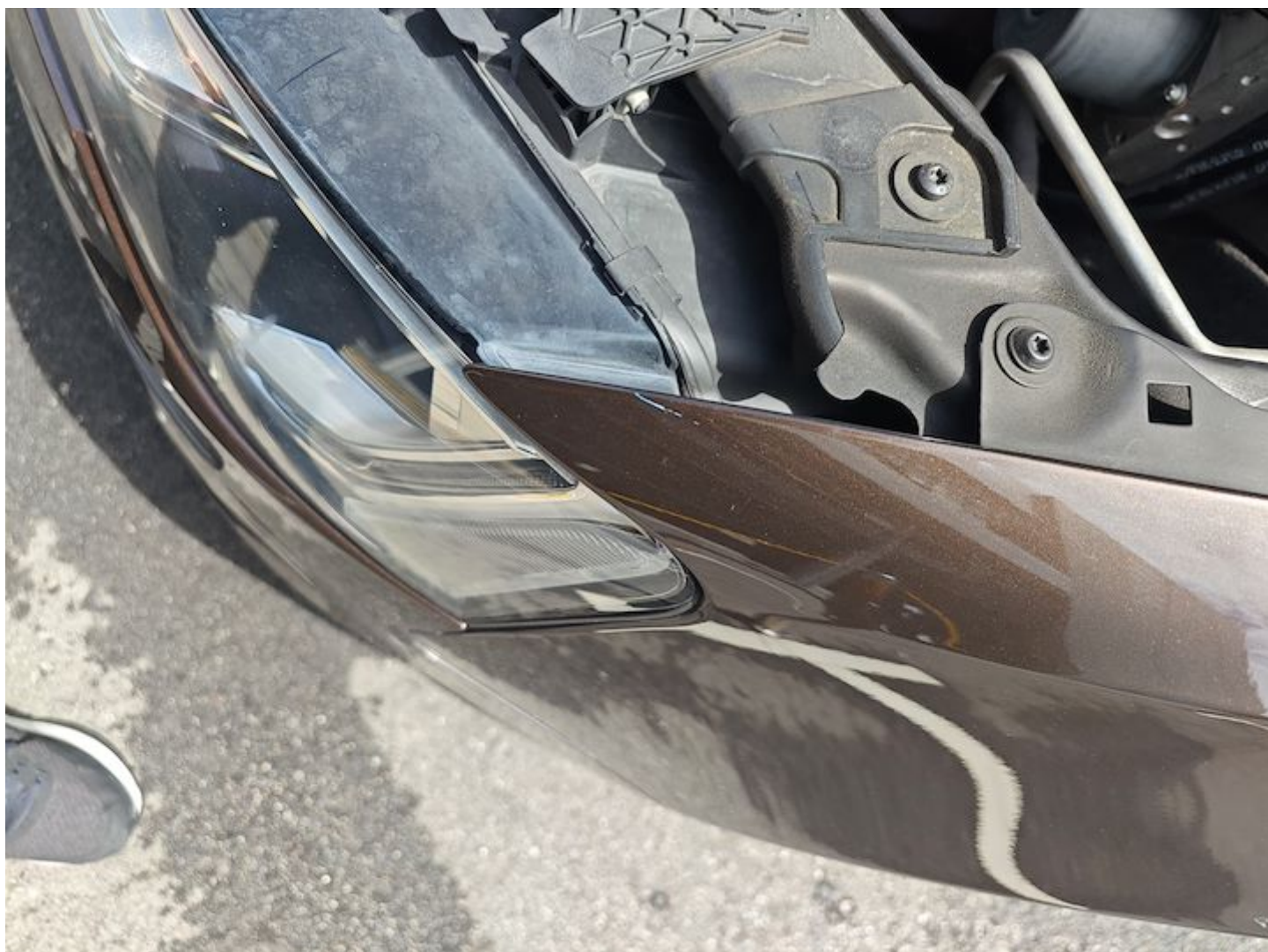












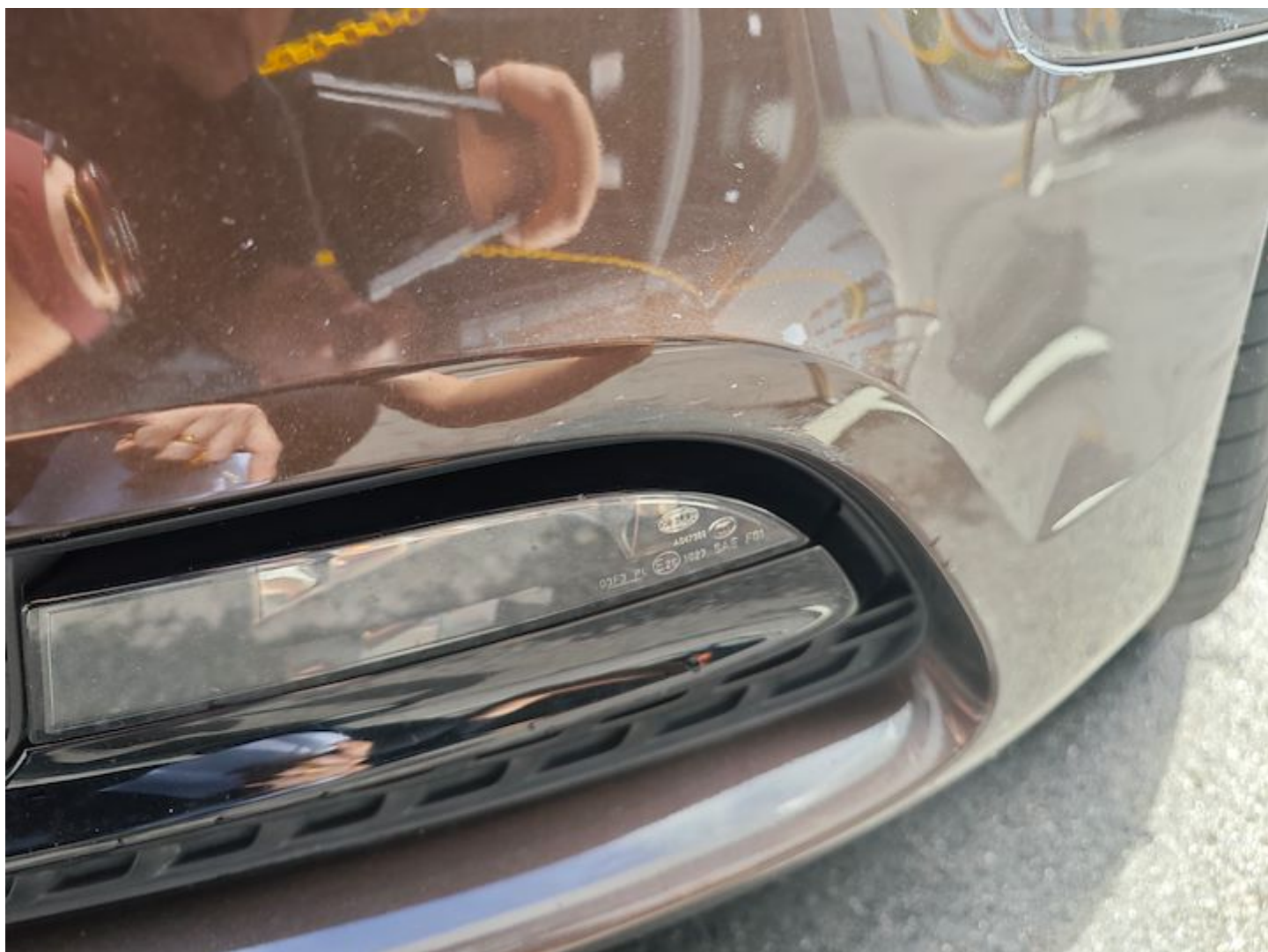














**SINGAPORE  
POLICE FORCE**



T/20240709/2066

1 of 3

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

Report No. T/20240709/2066

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 09/07/2024 16:58		Vide Report No.:		Station Diary No.: 116
<b>Informant's Particulars</b>				
Name of Informant: HAN HONGZHEN		Address: 244 WESTWOOD AVENUE #06-53 SINGAPORE 648366		
ID Type / ID No.: NRIC NO / S8065531B		Contact No.: Home/Office:		Mobile: 86911899
Nationality: CHINESE		Email: jeanhzhz@gmail.com		
Sex: Female	Age: 44	Date of Birth: 03/06/1980	Type of Informant: Driver	
Race: Chinese		Language: Chinese		
Occupation: Company director		Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 09/07/2024 14:00	Type of Location: Car Park
Location:  JURONG WEST AVENUE 5				
Weather: Drizzling		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
SKJ5360U	Motor car				Slightly Damaged	2

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20240709/2066

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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Report No. T/20240709/2066

**CONTINUATION OF REPORT**

Driver			
Name	HAN HONGZHEN		ID No. S8065531B
Related Vehicle	SKJ5360U (Motor car)		Contact No. 86911899
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 9/7/2024 at around 1400hrs, I went to Sheng Siong supermarket located at Jalan Bahar to have my lunch. When I parked my vehicle at the open space carpark. I affirmed that all was intact and there are no damages. However, at around 1501hrs, when I went back to my vehicle after I had my lunch. I discovered that my vehicle front left side had some scratches. there is a lid at the front at the front of my car which is used for towing dropped out. My front mirror also had a slight crack at the inner part. The left side of my vehicle have scratches also and paint being chipped off. I would like to state that when I return back to my vehicle, there are no vehicles beside my car already. However when I parked my car, there is a lorry on my left side of my vehicle.

The purpose of this report is for any insurance claims if any. That is all





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999



T/20240709/2066

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Report No. T/20240709/2066

## CONTINUATION OF REPORT

Signature of Officer Recording The  
J /  
SGT 2 DARRYL CHONG YU  
XIANG

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
SI MOHAMMAD ABDILLAH BIN PALIL  
Contact No.: 65476902

Signature Of Informant:

Date/Time:  
09/07/2024 16:58

Classification Of Case:

NP168



**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 : SP14247A0001 Vehicle Registration No: SKJ 5360 U  
Name(as shown in NRIC) : NEWCRANE HOLDINGS PTE LTD NRIC/FIN/Passport No : 2XXXXX701G  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 86911899  
Email Address : jeanhahz@gmail.com  
Date of Accident : 09/07/2024 Time of Accident : 14:00  
Place of Accident : OPEN CARPARK AT JALAN BAHAR  
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 VEHICLE NO

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Policyholder / Driver's Signature  
Date:

  
Reporting Centre Personnel's Signature  
Name: Lim Koe Song  
NRIC/FIN No.: S691M  
Date: 11/7/2024