

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	09/07/2024 12:28 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/07/2024 19:45 (SGT)
Exact Location of Accident	7 Everton Park, #01-15 Block 7, Singapore 080007
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH7804E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KOH HONG HENG, JERRY (XU HONGXING, JERRY)
NRIC No	SXXXX713E
Email Address	jerrykoh80@gmail.com
Mobile Phone No	(Phone) +65-96949996
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	SHUTTLE 1.5G CVT
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900263851

DRIVER

Name of Driver	KOH HONG HENG, JERRY (XU HONGXING, JERRY)
NRIC No	SXXXX713E
Date Of Birth	09/03/1980
Occupation	Indoor

Driving Pass Date	07/01/2003
Driving experience	21 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96949996
Alt. Phone Number	-
Email Address	jerrykoh80@gmail.com
Address	11 SILAT AVENUE
Address complement	11-32
Postcode	168877
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Wet

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	Central Division Headquarters
Police Station Phone No	(Phone) +65-18002240000
Alt. Police Station Phone No	(Fax) +65-62200877
Police Station Address	391 New Bridge Road #03-112 Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

-

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	SLM8739P
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)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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.**
6. 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.
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")

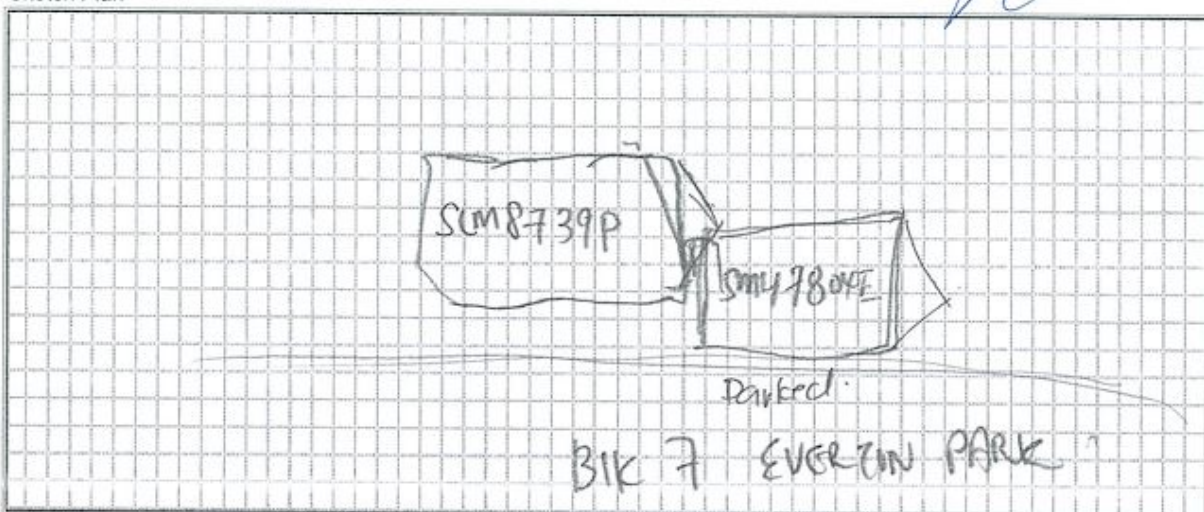
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

[Signature] 9 JUL 2014 / 1130
Policyholder's Signature / Date & Time

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

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

Sketch Plan

Describe Circumstance of the Accident	
VEHICLE NO: SMH7804E	ACCIDENT DATE & TIME: 8 JUL 20 / 1945
CONTACT NUMBER: 96949996	E-MAIL: jerrykoh80@gmail.com
LOCATION: BIK 7, EVERTON PARK CARPARK	
<p style="font-size: 1.2em; text-align: center;">Refer to police report.</p>	
<p>NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE A 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION.</p>	
<p>PLEASE STATE: <input type="checkbox"/> CLAIM OWN POLICY <input checked="" type="checkbox"/> CLAIM THIRD PARTY <input type="checkbox"/> CLAIM OD/TP AT OTHER WORKSHOP <input type="checkbox"/> REPORTING ONLY</p>	

Declaration

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

 9 JUL 20 / 1130
 Policyholder's Signature / Date & Time

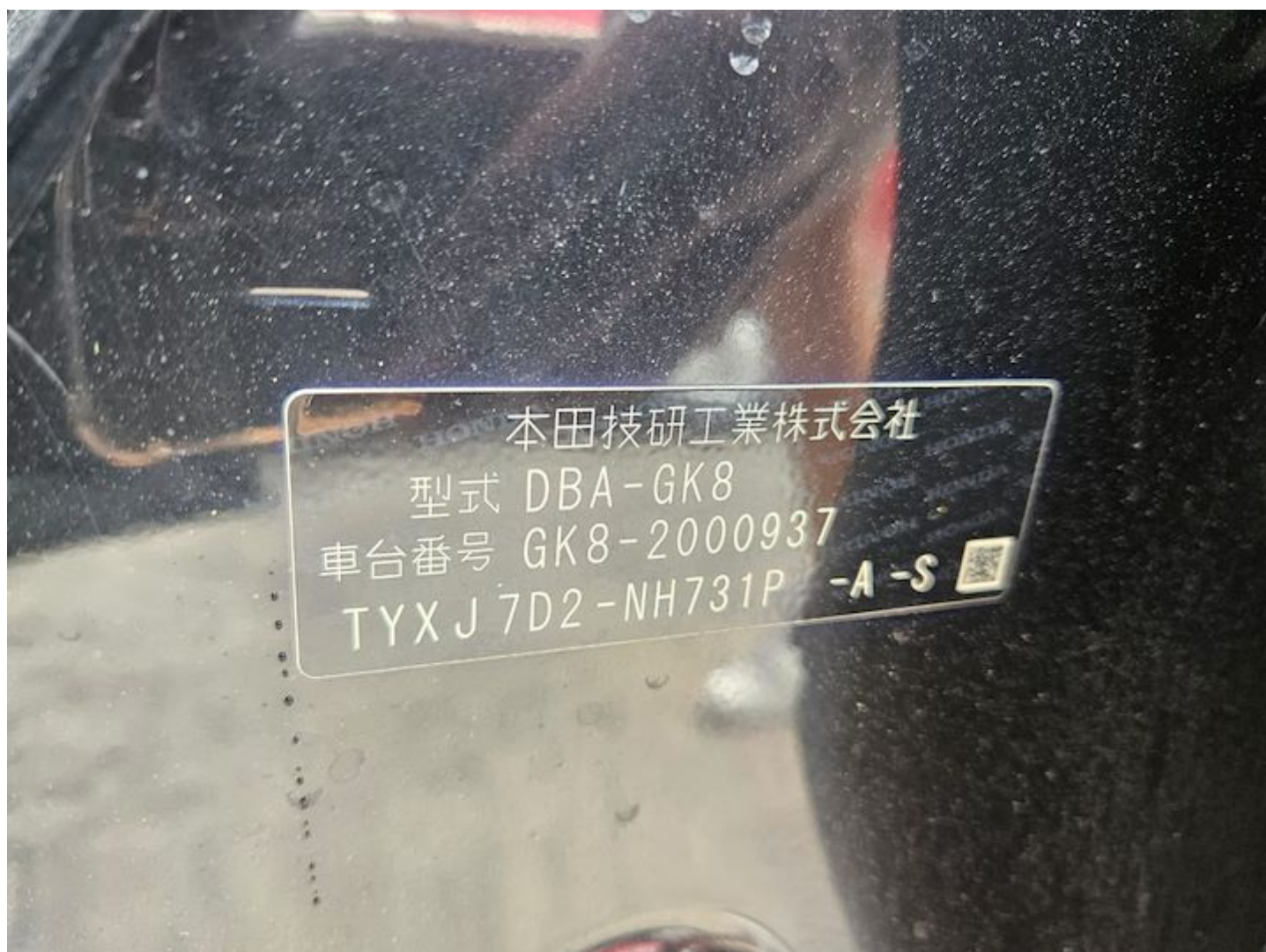
 Driver's Signature (if driver is not the policyholder) / Date & Time


 Witnessed by Reporting Centre Personnel
 (Name as in NR1210 card)

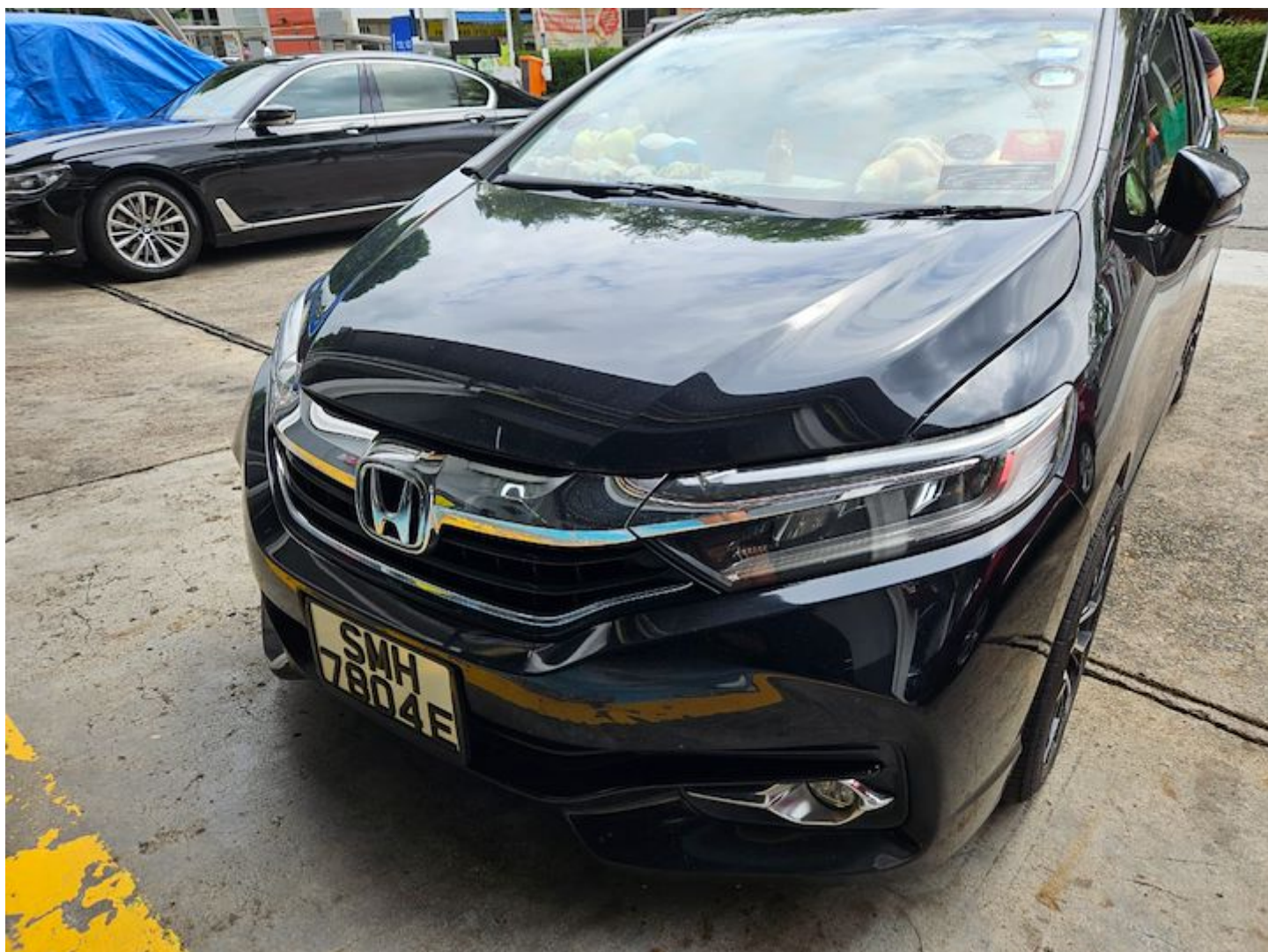


















**SINGAPORE
POLICE FORCE**



A/2024/07/08/7064

1 of 2

POLICE REPORT (NP299)

Report No. A/20240708/7064

Police Station Of Origin
Central Division HQ
391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 08/07/2024 21:28		Vide Report No.		Station Diary No.	
Name Of Informant KOH HONG HENG, JERRY		Address 11 SILAT AVENUE #11-32 SINGAPORE 168877			
ID Type / ID No.		Contact No.			
NRIC NO / S8006713E		Home/Office:		Mobile: 96949996	
Nationality SINGAPORE CITIZEN		Email Address JERRYKOH80@GMAIL.COM			
Occupation Electrical engineer		Sex Male	Age 44	Date of Birth 09/03/1980	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 08/07/2024 19:45 - 08/07/2024 19:50		Location Of Incident 7 EVERTON PARK EVERTON PARK SINGAPORE 080007			

Brief details.

My car, SMH7804E was stationary parked. There was a car SLM8739P, hit my car from the rear. I wanted to exchange particular with the driver, but he refused to provide and immediately drove off. Because this is a hit and run incident, I am making this police report for car insurance claim purposes.

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: 08/07/2024 21:28
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



A/20240708/7064

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20240708/7064

Subjects Involved			
Suspect			
Person Name	Can't get suspect details		
Gender	Male	Age	45-55
Race	Chinese	Language	English
Occupation	Other car and light goods vehicle drivers	Complexion	Dark tan
Build	Stout	Height About	172cm
Attire Last Worn	T shirt		
Victim			
Person Name	KOH HONG HENG, JERRY		
ID Type	NRIC NO	ID No	S8006713E
Gender	Male	Age	44
Race	Chinese	Language	English
Occupation	Electrical engineer	Address	11 SILAT AVENUE #11-32 SINGAPORE 168877
Mobile No	96949996	Is Informant A Victim?	Yes
Person Name	KOH HONG HENG, JERRY (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: 08/07/2024 21:28
Officer In-Charge Of Case:	Classification Of Case: