

## 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 Authorised 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 ability
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 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 Report	13/10/2016 12:13
Date Of Accident	12/10/2016 18:55
Exact Location Of Accident	BUKIT TIMAH TURF CITY CAR PARK
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX3763E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LUM WENG KEE
NRIC No	S0244462C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96753649
Alternative Phone No	Office-96753649

### Vehicle Particulars

Manufacturer	VOLVO
Model	V40-2.0 T2 CROSS COUNTRY (A)
Exact Purpose for which vehicle was being used at time of accident	SOCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Third Party
Vehicle Category	Private Car

### Insurance Company

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100442379
Cover Note Number	

### Driver

Name of Driver	QUINN LUM FU LOONG
NRIC No	S9302790F
Date Of Birth	31/01/1993
Occupation	Indoor
Date Of Driving Pass	20/07/2013
Driving Experience	3 Years And 2 Months
Gender	Male
Mobile Number	(Local) +65-92318786
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	10 HAIG AVE #03-02
Postcode	438865
Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Children
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	Collision- Head to Side
Weather Conditions	Clear
Road Surface	Dry

#### Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	Yes
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	No
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH PLAN

Are accident photos available for attachment?	Yes
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#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFY1080J
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	TANG SOO LAN JOCELYN
NRIC/Passport Number	S6834940J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

# Sketch Plan

SINGAPORE ACCIDENT STATEMENT	
<b>IMPORTANT NOTICE</b>	
1. Complete and submit this Form to: <u>Authorized Reporting Centre (ARC) for e-filing.</u> 2. Please report <u>correctly</u> the details of the accident to speed up the claims process. 3. This Form must be completed by the <u>Policyholder and/or the Authorized Driver.</u> 4. Information provided must be as <u>truthful and accurate as possible.</u> Any willful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability. 5. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies. 6. Any false reporting may be referred to the Traffic Police Department for investigation.	
<b>ACCIDENT STATEMENT</b>	
Date and Time of Accident	Date: <u>12/10/2016</u> Time: <u>1855.</u>
Exact Location of Accident	<u>BUKIT TIMAH TURF CITY CAR PARK</u>
<b>DETAILS OF OWN VEHICLE</b>	
Vehicle Registration Number	<u>SKX 3763E</u>
<b>INSURED / POLICYHOLDER (OWN VEHICLE)</b>	
Name of Registered Owner (See Insurance Cert.)	<u>LIAM NING KEE</u>
Personal Identification - NRIC (Singaporean/PR)	<u>S034462C</u>
- FIN/Passport Number	
- Not Applicable	
<b>VEHICLE PARTICULARS (OWN VEHICLE)</b>	
Vehicle Make / Model	Manufacturer <u>VOLVO</u> Model <u>V40</u>
Type of Vehicle*	<input checked="" type="radio"/> Saloon <input type="radio"/> MPV <input type="radio"/> CRV <input type="radio"/> Van <input type="radio"/> Lorry <input type="radio"/> Bus <input type="radio"/> Motorcycle <input type="radio"/> Others _____
Exact Purpose for which vehicle was being used at time of accident	<u>Social</u>
Are you claiming under your own insurance policy for repair to your vehicle?	<input type="radio"/> Yes <input checked="" type="radio"/> No (If No, Please select: <input checked="" type="radio"/> Third Party <input type="radio"/> Reporting)
Vehicle Category*	<input checked="" type="radio"/> Private <input type="radio"/> Commercial <input type="radio"/> Motorcycle
<b>INSURANCE COMPANY (OWN VEHICLE)</b>	
Name of Insurance Company *	<u>AGIA ASIA PACIFIC</u>
Type of Policy	<input checked="" type="radio"/> Comprehensive <input type="radio"/> Third Party Fire & Theft <input type="radio"/> TP Only
Fleet Policy	<input type="radio"/> Yes <input checked="" type="radio"/> No
Policy Number	<u>2000442379</u>
Motor CI	
<b>DRIVER</b>	<input type="radio"/> Same as Insured above
Name of Driver	<u>QUINN LIAM FU LOONNA</u>
Personal Identification - NRIC (Singaporean/PR)	<u>S9502790F</u>
- FIN/Passport Number	
Date of Birth	<u>31</u> dd / <u>01</u> mm / <u>1993</u> yr
Driving Date Pass	<u>20</u> dd / <u>07</u> mm / <u>2013</u> yr
Year of Driving Experience	Year(s) _____ Month(s) _____
Occupation	<input checked="" type="radio"/> Indoor <input type="radio"/> Outdoor
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female
Contact Number / Mobile Phone / Fax No.	<u>92318786 / 96753649</u>

# Sketch Plan #2

Address of Driver	10 HAIB AVE	
	#0302	Postcode (43885)
Email Address	NDCMAIL	
Was driver an employee of the Insured's Company?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
If No, Relationship of the Driver with the Insured	CHALORN	
Vehicle Registration Number of Driver's Own	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Vehicle Registration Number of Driver's Own Vehicle (if applicable)		
Insurance Company of Driver's Own Vehicle (if applicable)		
<b>GENERAL INFORMATION OF THE ACCIDENT</b>		
Type of Collision (Eg. Chain collision, Head-On collision, Side Swipe, Front to Rear)	HEAD SIDE	
Weather Conditions	<input checked="" type="radio"/> Clear <input type="radio"/> Raining <input type="radio"/> Others, _____	
Road Surface	<input checked="" type="radio"/> Dry <input type="radio"/> Wet <input type="radio"/> Others, _____	
<b>OTHER INFORMATION</b>		
a. Was anybody injured in the accident?	<input type="radio"/> Yes <input checked="" type="radio"/> No	
b. Was any other vehicle or property damaged? (Including Witness)	<input checked="" type="radio"/> Yes <input type="radio"/> No	
<b>DETAILS OF POLICE ACTION</b>		
Was the Accident reported to the Police?	<input type="radio"/> Yes <input type="radio"/> No (If Yes, please state which Police Station.)	
Police Station Name		
Police Station Address		
Police Station Contact	Tel No.	Fax No.
Was notice of intended Prosecution given?	<input type="radio"/> Yes <input type="radio"/> No (If Yes, against whom?)	
<b>DETAILS OF OTHER VEHICLE / PROPERTY 1</b>		
Vehicle Registration Number	SFY1080J	
Vehicle Make/ Model/ Colour		
Details of Properties		
Name of Driver	TAN SCD LAN JOCELYN	
Personal Identification - NRIC (Singaporean/PR)	S6834940J	
- FIN/Passport Number		
Contact Number		
Address		
Name of Insurance Company		
No. of Passenger (Including Driver)		
(Note - Please use page 8 if you need to add more vehicles)		



### Sketch Plan #3

#### SKETCH PLAN

#### IMPORTANT NOTICE

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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' 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

13/10/2016

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

Witnessed by Reporting Centre  
Personnel

Sketch Plan

Refv to Attachment



## Sketch Plan #4

### Describe Circumstances of the Accident

Refer to Attachment.

### Declaration

We declare the foregoing particulars are true in every respect.

 13/10/2016 

Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre  
Personnel

## Sketch Plan #5

Car Accident Report  
Bukit Timah Turf City Carpark  
12/10/2016  
18:54:41 PM

Driver of Car SKX 3763E : Quinn Lum Fu Loong, S9320790F  
Driver of Car SFY 1080J : Tang Soo Lan Jocelyn, S6834940J

- 1) Before the collision, I was searching for a vacant parking lot at Bukit Timah Turf City car park. At that time I had a passenger beside me, Mack Zhi Fang, Wendy (HP: 90011897). I slowed down and steered left to position myself for the parking lot. This was when driver of SFY 1080Y was very close to my car (Refer to Diagram 1).
- 2) Assessing the situation, I was unable to turn into the parking lot. Thus I reversed and straightened my car to allow Ms Tang to pass at 18:53:43 (Refer to Diagram 2). I believe my intention was verbalized clearly in the exact words, "She can go first." (Refer to 18539335.AVI.)
- 3) However, Ms Tang's car remained behind mine despite me waiting for approximately 6 seconds. Naturally, I assumed that she was planning to wait just a while more for me to finish parking. At 18:53:49, I turned my hazard lights on and inched my car forward slightly towards another vacant lot on my right (Refer to Diagram 3).
- 4) After ensuring that my car's position was ahead of Ms Tang's, I steered left again slowly at 18:53:53 to reposition myself for the parking lot (Refer to Diagram 4). During which, I was confident that my intention to park was made clear since my hazard lights remained switched on, and my left turn was made before Ms Tang rushed ahead from the left.
- 5) Unfortunately, both cars collided at 18:53:56. (Refer to diagram 5)

Shocked at the collision, I stepped out of the car to assess the situation. There was no personal injury. There was no government property affected. No foreign cars were involved. She was initially aggressive with her strong gestures made towards me and I felt threatened. Both parties exchanged particulars. I noticed that my car had scratches on the front left bumper while Ms Tang's car had scratches on the right back door. Ms Tang pressured me to sign a document stating that I reversed into her car before allowing me to leave. At no point in time I had agreed that the collision was my fault and never apologized for the accident. She mentioned that she is not an "evil woman" and as such I signed her document hesitantly.

Upon reviewing the video footage at 08:49PM on 12/10/2016, I realized it was indeed her impatience that caused the collision by rushing her car forward while ignoring my clear signals to reverse park.

Quinn Lum Fu Loong  
S9302790F

Diagram.

① Before: Attempting to park on the right.

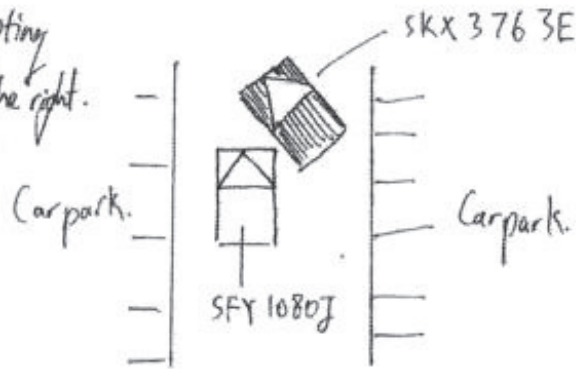


Diagram  
②

straightened the car & allowed her to move but she didn't

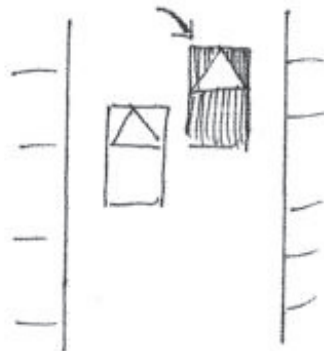


Diagram  
③

Hazard light switched on and inched forward.

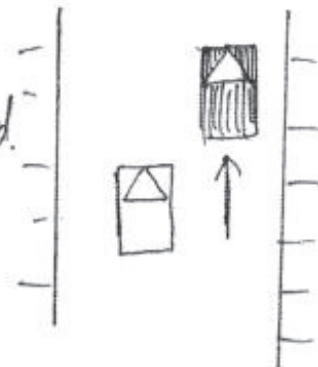
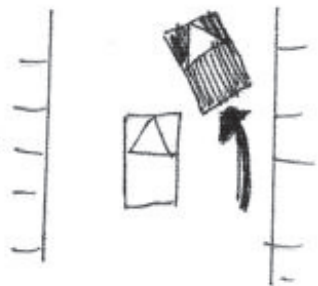


Diagram  
④

Turned left to position car for parking.  
Sure that my car was ahead of hers.

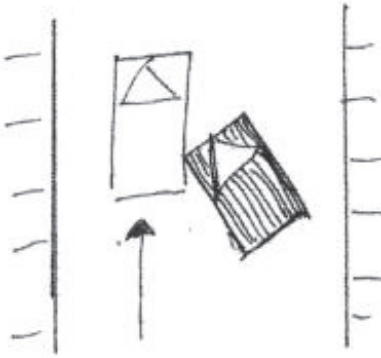




Accident Sketch Plan

Diagram ⑤

She suddenly moved forward  
while I attempt my parking.



Accident Photo



Accident Photo





Accident Photo





Accident Photo

