SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Address

Mobile Number Fax Number Contact Number EMail Address

- 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 witholding 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 policyliability 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

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	ACCIDENT STATEMENT
Date Of Report	30/11/2017 16:41
Date Of Accident	29/11/2017 22:50
Exact Location Of Accident	INFRONT BLK 624 YISHUN RING RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLG5898P
Insured/Policyholder	
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	20150462K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-31584255
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER EX-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	UBER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	
Driver	
Name of Driver	TAN BENG SING
NRIC No	S2192703A
Date Of Birth	15/10/1967
Occupation	OUTDOOR
Date Of Driving Pass	11/05/1988
Driving Experience	29 YEARS AND 6 MONTHS
Gender	MALE

NOEMAIL

Postcode Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own Vehicle

NO

Insurance Company of Driver's Own Vehicle

NO

1

YES

General Information of the Accident

Type Of Accident COLLIDED INTO MOTORCYCLIST

Weather Conditions **RAINING** Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO Was any body injured in the Accident? YES

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name SENGKANG NPC

ROAD: 2 SENGKANG SQUARE #01-02, POSTCODE: 545025, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FT921U

Vehicle Make/Model/Colour YAMAHA MOTORCYCLE/BLUE

Details Of Properties Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number **Email Address**

DETAILS OF INJURED PERSON 1

UNKNOWN Name

Approximate Age

Injuries Sustain

Injured person in which vehicle? FT921U

Were seat belts worn?

Was injured conveyed to hospital by ambulance? YES

Address Postcode

SKETCH PLAN

IMPORTANT NOTICE

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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 Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
 interested parties.
- By the lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

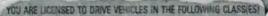
Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

SKETCH PLAN			
		->	
DESCRIBE CIRCUMSTA	NCES OF THE ACCIDENT		
	2 for + PK	R	
	leter to lotte	Keport	
DECLARATION //We declare the foregoing		REVIEW AND LAND	1
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signal Name:	sture



PASS DATE

FOR C&C USE ONLY

APT BLX 289A COMPASSVALE CRESCENT #08-319 SINGAPORE 541209

RIC No: \$2192703A

Dete: 25/02/2017

S2192703A TAN BENG SING = 15 Oct 1967 FOR C&C USE

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$2192703A



TAN BENG SING



Date of hors 15-10-1967

SINGAPORE









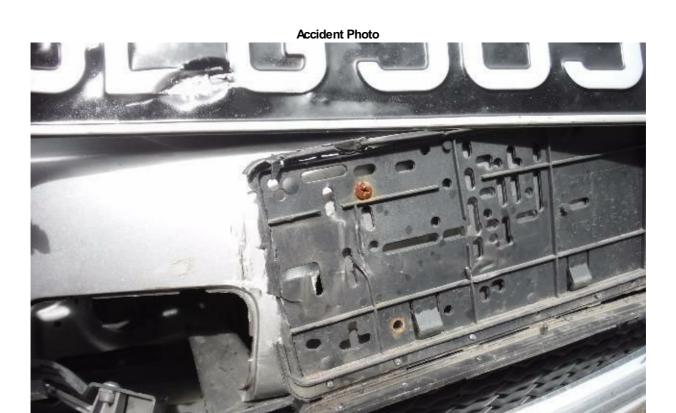


























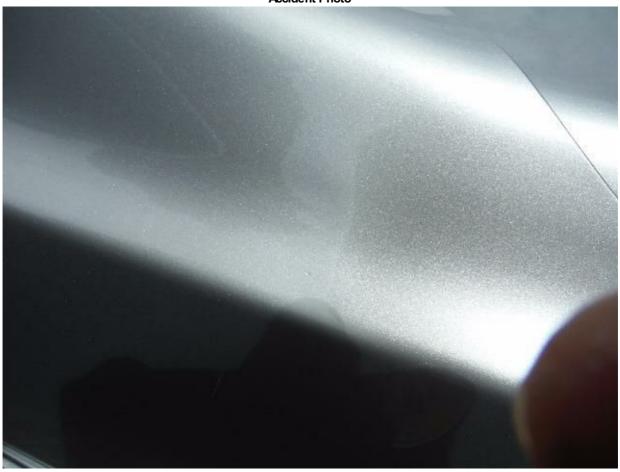












Police Report



Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

REPORT OF A TRAFFIC ACCIDENT Date/Time Report Made: 30/11/2017 11:59

58	Stati	on Diary N	D.:
	58		_
	Section	LONG CO. CO.	
		- 17 Sept 100	

Report No. T/20171130/2042

10[3

REPORT	F A TRAFFIC	ACCIDENT		
Date/Time Report Made: Vide Report No.: 30/11/2017 11:59 F/20171129/0293			Station Diary No. 58	
Informa	nt's Particu	ilars	ON STREET STREET, STREET	SECURITIES AND DESCRIPTION OF THE PERSON OF
	Informant: NG SING		Address:	
	/ ID No.; O / S219270	D3A	Contact No.: Home/Office:	Mobile:
National SINGAP	ity: PORE CITIZ	EN	Email:	
Sex: Male	Age: 50	Date of Birth: 15/10/1987	Type of Informant Driver	
Race: Chinese			Language:	Institution / School Name:
Occupa UBER D			Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/11/2017 22:5/	Type of Location Straight Road
Location: Along Road 1 YISHUN RIN Infront of Blk Weather: Orizzling		utside carpark entra Road Surface: Wat	ince	Road Speed Limit;
Traffic Flow: Dual Carriage	e Way	Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collis		2ide		Anyone conveyed by ambulance:

Darano en A	chicle Involve		1	200	120 00	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
FT7921U	Motorcycle	YAMAHA	RXZ	Blue	Seriously Damaged	
SLG5898P	Car	MITSUBISHI	1.5 AT LED	Silver	Seriously Damaged	10.00

Details of Person Involved	THE RESERVE THE PARTY OF THE PA
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report





Police Station Of Origin: Folia Station of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

2 of 3 Report No. T/20171130/2042

CONTINUATION OF REPORT

Name	TAN DENO ONE		1		
rvanie	TAN BENG SING			ID No.	S2192703A
Related Vehicle	SLG5898P (Car)		Contact !	No.	
Hospital/Clinic	NIL		Class of Driving Licence 8 Expiry Da		
Date Treatment	NIL		Data Dia		
	NIL led Medical Leave	NIL	Date Disc		L

Brief Details.

On the 28/11/2017 at about 2250hrs, I was driving vehicle number SLG5888P on the right lane along Yishun Ring Road direction towards Yishun Avenue 5 as I was waiting to make a right turn to bik 624 Yishun Ring Road carpark. As there was another vehicle turning into the carpark of bik 846 Yishun Ring Road, I was unable to see the left tane of the opposite direction. As I was making the fight turn into the carpark of bik 824 Yishun Ring Road, a motorbike FT7921U suidenly approaching towards my direction. I could not stop in time as such my vehicle collided against the said motorbike. The rider fell onto the ground and I immediately stopped my vehicle, called for the ambulance to scene. The ambulance and traffic police then came to the scene. The said motorbike rider was then conveyed to an unknown hospital.

Police Report





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINOAPORE 545025 Tel No: 1800-343 8999 3 of 3 Report No. T/20171130/2042

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474895 stating the report number as reference.

Signature Of Officer Recording The Report:

F /
Sgt 2 MUHAMMAD FAIRUZ ZAMEEN

Signature Of Interpreter:
Not applicable

Date/Time:
30/11/2017 11:59

Officer In Charge Of Case:
TP / GIT /
Staff Sgt MOHAMED SUMMEN SUDIN
Contact No: 85476307

Authentication Stamp
NP165

Singapore Police Førce