

## 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	11/01/2018 16:57
Date Of Accident	10/01/2018 07:50
Exact Location Of Accident	SERANGOON ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR9682K
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### Insured/Policyholder

Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-66944919

### Vehicle Particulars

Manufacturer	HONDA
Model	GRACE
Exact Purpose for which vehicle was being used at time of accident	HIRER
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 CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994992
Cover Note Number	

### Driver

Name of Driver	CHONG SIR FOO
NRIC No	S2641887I
Date Of Birth	27/10/1967
Occupation	OUTDOOR
Date Of Driving Pass	15/11/1990
Driving Experience	27 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90106639
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	6 BENOI SECTOR
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	CLEMENTI N.P.C
Police Station Address	<b>ROAD:</b> 20 CLEMENTI AVE 5 , <b>POSTCODE:</b> 129858 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO PHOTOS ATTACHED, THANK YOU.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLQ9260A
Vehicle Make/Model/Colour	
Details Of Properties	VEH. B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

### SKETCH PLAN

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7. 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:
  - (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.
- (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:
  - (i) 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:

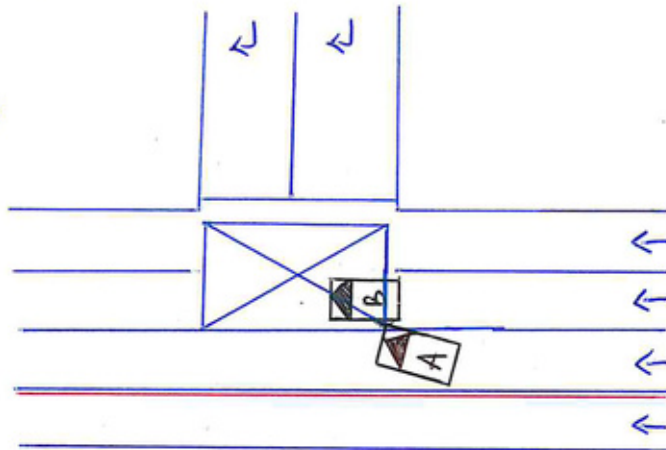
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN

SERANGOON ROAD

Ⓐ SLR 9682 K

Ⓑ SLQ9260A



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report No: T/20180110/2178

DECLARATION

I/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:

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

Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180110/2178

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

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Report No. T/20180110/2178

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/01/2018 21:07		Vide Report No.:		Station Diary No.: 154	
<b>Informant's Particulars</b>					
Name of Informant: CHONG SIR FOO			Address: APT BLK 514 WEST COAST ROAD #10-515 SINGAPORE 120514		
ID Type / ID No.: NRIC NO / S2641887I			Contact No.: Home/Office: Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 53	Date of Birth: 27/10/1964	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: UBER DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/01/2018 19:50	Type of Location: Straight Road
Location: Along Road 1 SERANGOON ROAD  Serangoon Road towards Syed Alwi Road				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLQ9260A	Car				No Damage	0
SLR9682K	Car				Slightly Damaged	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20180110/2178

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

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Report No. T/20180110/2178

**CONTINUATION OF REPORT**

<b>Driver</b>				
Name	CHONG SIR FOO		ID No.	S26418871
Related Vehicle	SLR9682K (Car)		Contact No.	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

**Brief Details.**

On the 10th of January at around 1950hrs, I was driving my car bearing the registration plate number SLR9682K along Serangoon Road towards Syed Alwi Road. There was very heavy traffic and the cars were hardly able to move.

After I exited Kinta Road, I was in the 2nd lane close to the left and was about to move to the next lane on my right. I noticed that there was an opportunity to move and thus signaled right and I inched forward. However a car who was on the lane on my right, bearing the registration plate number SLQ9260A purposely chose not to give me way. His front bumper scratched the side of my car. He got out of the vehicle and took a photo of my car and then drove away. I too managed to take a photo of his vehicle. I wanted to exchange particulars with him but he already drove off.

I am lodging a report for record and insurance purposes.





**SINGAPORE  
POLICE FORCE**



T/20180110/2178

Police Station Of Origin:  
Clementi N.P.C  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No: 1800-8729999

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Report No. T/20180110/2178

**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 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

D /  
NABIL FIKRI BIN ADNAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /  
SI ABDUL KAREEM BIN ABDUL HAGUE  
Contact No.: 65476079

Signature Of Informant:

Date/Time:

10/01/2018 21:07

Classification Of Case:



Authentication Stamp

SINGAPORE  
POLICE FORCE

SN 37

**IDENTIFICATION CARD & DRIVING LICENCE**



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S26418871



Name  
CHONG SIR FOO

張世夫

Race  
CHINESE

Date of birth  
27-10-1964

Sex  
M

Country of birth  
MALAYSIA

S26418871



REPUBLIC OF SINGAPORE DRIVING LICENCE

Personal Number: S26418871

Name  
CHONG SIR FOO

Birth Date: 27 Oct 1964

Issue Date: 12 Nov 2003



4453808



NRIC No: S26418871



Date of issue  
29-08-2009


Address  
APT BLK 514 WEST COAST ROAD  
#10-515  
SINGAPORE 120514

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	15 Nov 1990
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	15 Nov 1990

NP 428A

Licence No: S26418871



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



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