

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 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	26/01/2018 12:22
Date Of Accident	25/01/2018 18:30
Exact Location Of Accident	YISHUN AVE 1 TURNING INTO AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT2968Y
Insured/Policyholder	
Name Of Registered Owner	FOO WAN TING
NRIC No	S8310092C
Email Address	WERE_0004@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96849164
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	SUBARU
Model	XV-1.6 I-S AWD CVT (A)
Exact Purpose for which vehicle was being used at time of accident	LEISURE
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	1700070177
Cover Note Number	

Driver

Name of Driver	FOO WAN TING
NRIC No	S8310092C
Date Of Birth	02/04/1983
Occupation	INDOOR
Date Of Driving Pass	14/11/2008
Driving Experience	9 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96849164
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	WERE_0004@HOTMAIL.COM

Address	1
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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 REAR
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?	
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)	2
Passenger 1	NAME: : A GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)
Police Station Address	ROAD: 51 ANG MO KIO AVENUE 9 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2180000 - FAX NO: 64814246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHED SKETCH PLAN AND POLICE REPORT F/20180125/7046

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB2135B
Vehicle Make/Model/Colour	HYUNDAI/SONATA
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LEE CHENG HOO
NRIC/Passport Number	S0529229H
Contact Number	96882158
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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: 26/1/18
1135 am

Driver's Signature

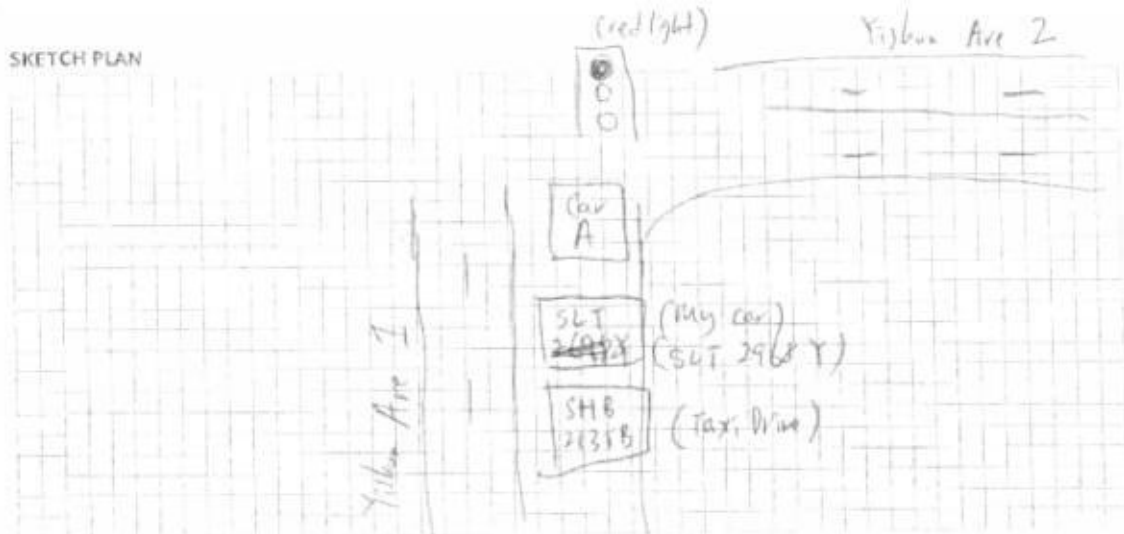
(If driver is not the policyholder)
Date & Time: 26/1/18
1135 am

Reporting Centre Personnel's Signature

Name:
NRIC/TIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Yishun Ave 1 & stopped at the traffic junction waiting to turn right into Yishun Ave 2. At 6.31 pm, a taxi, SHB 2135B banged into the rear of my car.

We had exchange phone numbers & he had told me to check my car at my service centre & contact him for claims after inspection.

He had said that he stepped on the brakes and I told him I had a child in my car.

DECLARATION

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

Policyholder's Signature

Date & Time: 26/11/18
11.35 am

Signature of Policyholder

Driver's Signature

(If driver is not the policyholder)

Date & Time: 26/11/18
11.35 am

Signature of Driver

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



1201801251956

1 of 2

POLICE REPORT (NP290)

Report No: F2318D1257046

Police Station Of Origin
Ang Mo Kio Police Division HQ
51 Ang Mo Kio Avenue 3 SINGAPORE
069784
Tel No: 830 2160003

Date/Time Report Made 25/01/2018 19:56	Video Report No.	Station Diary No.
Name Of Informant FOO WAN TING	Address APT RI K 315C YISHUN AVENUE 9 #11-156 SINGAPORE 760318	
ID Type / ID No. NRIC NO / S85100520	Contact No. Home/Office:	Mobile: 96649154
Nationality SINGAPORE CITIZEN	Email Address wene_0014@hotmail.com	
Occupation Management executive	Sex Female	Age 34
Institution/School Name	Date of Birth 02/04/1983	Race Chinese
Date/Time Of Incident 25/01/2018 18:34 - 25/01/2018 19:38	Location Of Incident 201 YISHUN AVENUE 1 KILATID MRT STATION SINGAPORE 769092	

Brief details.

My car SLT2668Y was stopping at the traffic junction at Yishun Ave 1 waiting to turn right into Yishun Ave 2 when a taxi SHD2135D bumped into my stationary car.
This happened at about 835pm on 25 Jan 2018. I had took pictures of the incident and took down the IC and phone number of the taxi driver. He had informed me to get my car checked at the service centre and bill him for costs incurred. I had been advised by my car agent to make a police report.

Signature Of Officer Recording The Report

Not applicable

Signature Of Interpreter

Not applicable

Officer In-Charge Of Case

Authentication Stamp

Signature Of Informant

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

25/01/2018 19:56

Classification Of Case:

Police Report



**SINGAPORE
POLICE FORCE**



1,220,300,000,000,000

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F231801297046

Subjects Involved			
Victim			
Person Name	FOO WAN TING		
ID Type	NRIC NO	ID No	S63100920
Gender	Female	Age	34
Race	Chinese	Language	English
Occupation	Management executive		
Address	AP BUKIT TIMO YISHUN		
	AVENUE 9 #11-105		
	SINGAPORE 780310		
Is Informant A Victim?	Yes		
Person Name	FOO WAN TING (Informant)		

Signature Of Officer Recording The Report

Not applicable

Signature Of Interpreter

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
25/01/2018 19:53

Classification Of Case