

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	05/02/2018 14:56
Date Of Accident	16/11/2017 20:50
Exact Location Of Accident	QUEEN STREET OPEN CARPARK OPPOSITE BUGIS PLUS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF6435P
Insured/Policyholder	
Name Of Registered Owner	LOU SAI MENG
NRIC No	S1134596D
Email Address	SHAWJIE91@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90281970
Alternative Phone No	OTHERS-90281970

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.6L VTI AUTO
Exact Purpose for which vehicle was being used at time of accident	PARKING
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	2100386912-02000
Cover Note Number	

Driver

Name of Driver	LOU SHAW JIE
NRIC No	S9148833G
Date Of Birth	19/12/1991
Occupation	INDOOR
Date Of Driving Pass	04/12/2010
Driving Experience	6 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90281970
Fax Number	
Contact Number	OTHERS-90281970
Email Address	SHAWJIE91@HOTMAIL.COM

Address	BLK 304 ANG MO KIO AVE 1 #07-1133
Postcode	560304
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	DRY

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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TECK GHEE NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 321 ANG MO KIO STREET 31 , POSTCODE: 560321 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4599999 - FAX NO: 64574478
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20171117/2143

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX3466M
Vehicle Make/Model/Colour	
Details Of Properties	
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)

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:

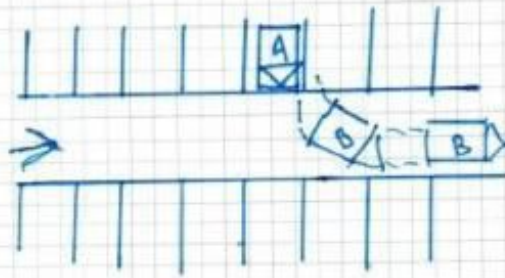
 05/02/18
Driver's Signature
(If driver is not the policyholder)
Date & Time:

 5/2/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

Queen Street open Carpark Opposite
Bugis Plus



A - SJF643SP
B - SKX3466M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was stationary park at car park lot and when
B revers and hit onto my front bumper. I go video
camera.

pls Refer to the Police Report
T/20171117/2143

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.:

GLA/MC SketchPlan ver. V3

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20171117/2143

2 of 3

Report No. T/20171117/2143

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

CONTINUATION OF REPORT

Vehicle Owner			
Name	LOU SHAW JIE	ID No.	S9148833G
Related Vehicle	SJF6435P (Car)	Contact No.	90281970
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I am the vehicle owner of my car, one black colour Honda Civic bearing plate number SJF6435P.

On 16/11/2017 at about 2000hrs, I parked my vehicle at the carpark lot number 45. All was intact when I left my car. When I returned at about 2050hrs, I noticed that my car was damaged at the front left portion near the headlight. There was no note and whilst taking a look, one witness (Karlyn Hp: 96288852) approached me and informed that about 5 minutes ago, one black colour vehicle bearing plate number SKX3466M had hit onto my vehicle and left.

On 17/11/2017, I went to collect the footage from her and indeed, it captured the said black colour vehicle hit and ran off.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Police Report



**SINGAPORE
POLICE FORCE**



T/20171117/2143

1 of 3

Police Station Of Origin:
Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

Report No. T/20171117/2143

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/11/2017 20:14	Vide Report No.: A/20171116/0130	Station Diary No.: 32
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Informant's Particulars

Name of Informant: LOU SHAW JIE			Address: APT BLK 304 ANG MO KIO AVENUE 1 #07-1133 SINGAPORE 560304	
ID Type / ID No.: NRIC NO / S9148833G			Contact No.: Home/Office: Mobile: 90281970	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 25	Date of Birth: 19/12/1991	Type of Informant: Vehicle Owner	
Race: Chinese			Language: English	Institution / School Name:
Occupation: ACCOUNT EXECUTIVE			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/11/2017 20:50	Type of Location: Car Park
Location: Along Road 1 QUEEN STREET				
OPEN CARPARK OPPOSITE BUGIS PLUS.				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJF6435P	Car	HONDA	CIVIC	Black	Slightly Damaged	0
SKX3466M	Car			Black		0

Details of Person Involved

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20171117/2143

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Report No. T/20171117/2143

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Teck Ghee NPP
321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

CONTINUATION OF REPORT

Vehicle Owner			
Name	LOU SHAW JIE	ID No.	S9148833G
Related Vehicle	SJF6435P (Car)	Contact No.	90281970
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

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Police Report



**SINGAPORE
POLICE FORCE**



T/20171117/2143

Police Station Of Origin:
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321 Ang Mo Kio Street 31 SINGAPORE
560321
Tel No: 1800-4599999

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Report No. T/20171117/2143

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:
F /
Staff Sgt MUHAMMAD HERMI BIN HAMIDON

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/11/2017 20:14

Officer In Charge Of Case:
TP / HRT /
SSI 2 SOH PENG GUAN
Contact No.: 65476171

Classification Of Case:

Authentication Stamp
NP168