

## 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 18:09
Date Of Accident	03/02/2018 13:00
Exact Location Of Accident	BEDOK LIBRARY CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA8282C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TENG YIWEN, JUNE
NRIC No	S8617685H
Email Address	LITTLEJUNEEEE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-82880578
Alternative Phone No	HOME-65286912

### Vehicle Particulars

Manufacturer	AUDI
Model	A1 SB 1.0 TFSI S TRONIC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	2100450428-02
Cover Note Number	

### Driver

Name of Driver	TENG YIWEN, JUNE
NRIC No	S8617685H
Date Of Birth	30/06/1986
Occupation	INDOOR
Date Of Driving Pass	20/03/2010
Driving Experience	7 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-82880578
Fax Number	
Contact Number	HOME-65286912
Email Address	LITTLEJUNEEEE@GMAIL.COM

Address	381 TANGLIN ROAD #11-03
Postcode	247965
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 - MAJOR/MINOR RD
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 21 KAMPONG JAVA ROAD , <b>POSTCODE:</b> 228892 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2959999 - <b>FAX NO:</b> 63918499
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO SKETCH PLAN & POLICE REPORT NO: T/20180204/2035

#### 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	SFG2185D
Vehicle Make/Model/Colour	SILVER
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SALLY
NRIC/Passport Number	
Contact Number	96616091
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### 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 liability.
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. The 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 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: 5/2/2018  
12:00pm

Driver's Signature

(If driver is not the policyholder)  
Date & Time:

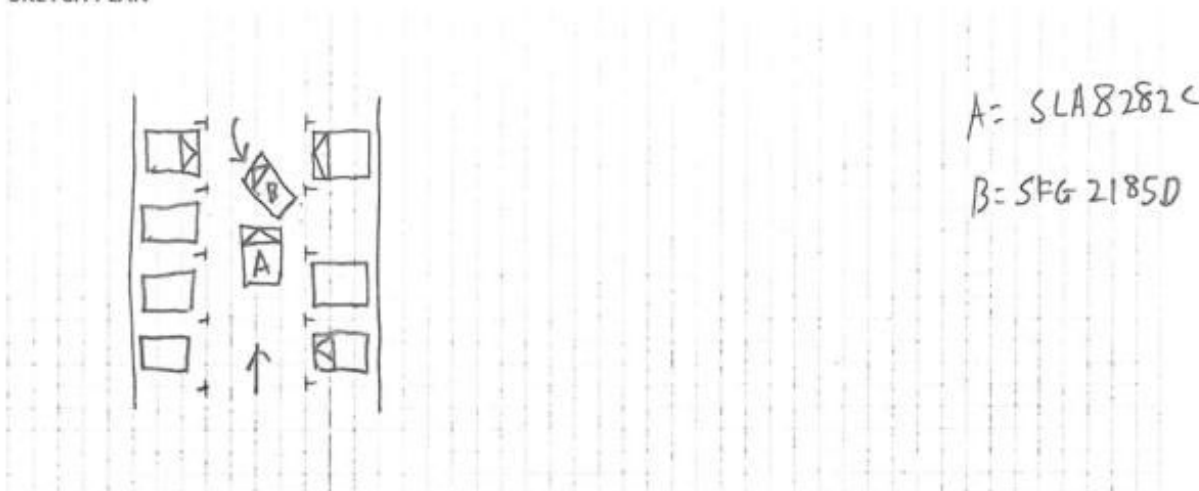


Reporting Centre Personnel's Signature

Name: Tony Fong  
NRIC/FIN No.: 620411671

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to the police report

~~NOT~~ NO: T/2018 0204/2035

### DECLARATION

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

Policyholder's Signature

Date & Time: 5/2/2018  
12:00pm

Driver's Signature

(If driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature

Name: Tony Fong  
NRIC/FIN No.: G20401071

# Police Report



**SINGAPORE  
POLICE FORCE**



T:0018002042035

Police Station Of Origin:  
Kampong Java N.P.C  
21 Kampong Java Road SINGAPORE  
228892  
Tel No: 1800-2558889

1 of 3

Report No: T:0018002042035

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/02/2018 10:06			Vide Report No.:		Station Diary No.: 35
<b>Informant's Particulars</b>					
Name of Informant: TENG YIWEN, JUNE			Address: 381 TANGLIN ROAD #11-03 SINGAPORE 247965		
ID Type / ID No.: NRIC NO / S8817685H			Contact No.: Home/Office: Mobile: 82860572		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 31	Date of Birth: 30/08/1958	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Pre-primary education teacher			Driving Licence Information: Class: 3A Date of Expiry:		

## General Information of the Accident

Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 03/02/2018 13:00	Type of Location: Car Park
Location: Along Road 1 BEDOK NORTH STREET 1			
At the entrance of Bedok Library's car park.			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
SFG2185D	Car				Slightly Damaged	0
SLA8282C	Car	AUDI	A1 SB 1.0 TFSI (P)	Red	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLA8282C	AIG ASIA PACIFIC INSURANCE PTE LTD.	2100450425-02	29/01/2018	28/01/2019

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180204/2035

Police Station Of Origin:  
Kampong Java N.P.C  
21 Kampong Java Road SINGAPORE  
225852  
Tel No: 1800-2958958

2 of 3

Report No. T/20180204/2035

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TENG YIWEN, JUNE	ID No.	S3617885H
Related Vehicle	NIL	Contact No.	82680576
Hospital/Clinic	NIL	Glass of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Sally	ID No.	NIL
Related Vehicle	NIL	Contact No.	96516291
Hospital/Clinic	NIL	Glass of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On this place, date and time, there was a silver car SFG2185D in front of me with blinkers on. I saw the vehicle wanted to park the lot as such I stepped on the brake to stop my car. I wanted to turn around to check for vehicle before reversing. But the silver car SFG2185D went ahead to park before checking. As such, the left side of silver car SFG2185D side swiped the front ride of my vehicle.

I want to park my vehicle first before talking to the driver of silver car SFG2185D as there were cars behind me. The driver of silver car SFG2185D started to accuse me of running away. I told her that I have my in-car cam installed and I will review the footage. After I have watched the footage, I found out that I was not at fault. So I texted the driver (9651 6091) and told her that she should pay for the damages instead. But she refuse, as such I told her that I will be informing the traffic police about it and she told me that she will be lodging it too.

I am lodging this report for traffic's police assistance and insurance claims purpose.

# Police Report



SINGAPORE  
POLICE FORCE



T20160204/2035

Police Station Of Origin:  
Kampong Java N.P.C  
21 Kampong Java Road SINGAPORE  
228882  
Tel No: 1800-2368888

3 of 3

Report No: T20160204/2035

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:

E /

Sgt: 1 JOREEN YAP JIA HUI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

04/02/2018 10:06

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 55478430

Classification Of Case:

Authentication Stamp  
NR183





Accident Photo



**Accident Photo**



Accident Photo





**Accident Photo**



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo





**Accident Photo**



