

## 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	19/02/2018 15:12
Date Of Accident	15/02/2018 14:00
Exact Location Of Accident	INSIDE SPC WASHING AREA
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE8517E
<b>Insured/Policyholder</b>	
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	VEZEL
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	THIRD PARTY
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	999995058
Cover Note Number	

### Driver

Name of Driver	TAN MUI HOON
NRIC No	S8009646A
Date Of Birth	10/04/1980
Occupation	OUTDOOR
Date Of Driving Pass	20/07/2005
Driving Experience	12 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90106639
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	44 BENOI RD BLOCK B
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	CHAIN COLLISION
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	WOODLANDS WEST NPC
Police Station Address	<b>ROAD:</b> 9 MARSILING LANE , <b>POSTCODE:</b> 739146 , <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?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGF9785U
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)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLA8220G
Vehicle Make/Model/Colour	

Details Of Properties  
Vehicle Category  
Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

VEH.C  
PRIVATE CAR

## Accident 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:



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

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



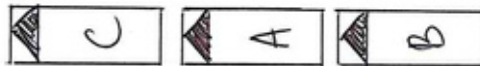
SKETCH PLAN

Inside SPC Washing Area

A SLE8517E

B SGT97854

C SLA8220G



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report No: T/20182219/2029

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:

*[Signature]*

Reporting Person's Signature  
Name:  
NRIC/FIN No.:



Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180219/2029

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

1 of 4

Report No. T/20180219/2029

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/02/2018 11:35		Vide Report No.:		Station Diary No.: 45	
<b>Informant's Particulars</b>					
Name of Informant: TAN MUI HOON			Address: APT BLK 178 ANG MO KIO AVENUE 4 #12-955 SINGAPORE 560178		
ID Type / ID No.: NRIC NO / S8009646A			Contact No.: Home/Office:                      Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 37	Date of Birth: 10/04/1980	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: MANAGER			Driving Licence Information: Class:                      Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 15/02/2018 14:00	Type of Location: Straight Road
Location: Along Road 1 ADMIRALTY ROAD  Inside SPC Washing area				
Weather:		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Involving 3 vehicles				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGF9785U	Car	HONDA	JAZZ 1.5 VTIR CVT ABS D/AIRBAG 2WD	Silver	Slightly Damaged	0
SLA8220G	Car	ALFA ROMEO	GIULIETTA 1.4T MULTIAIR TCT	White	Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20180219/2029

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

2 of 4

Report No. T/20180219/2029

**CONTINUATION OF REPORT**

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLE8517E	Car	HONDA	VEZEL 1.5X CVT	Black	Seriously Damaged	0

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	TAN SHI HUI			ID No.	S8529331A
Related Vehicle	SGF9785U (Car)			Contact No.	
Hospital/Clinic	NIL			Class 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	
Driver					
Name	TEO CHUN SANG			ID No.	S7333656B
Related Vehicle	SLA8220G (Car)			Contact No.	
Hospital/Clinic	NIL			Class 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	
Driver					
Name	TAN MUI HOON			ID No.	S8009646A
Related Vehicle	SLE8517E (Car)			Contact No.	
Hospital/Clinic	PEACE FAMILY CLINIC & SURGERY			Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/02/2018		Date Discharge	19/02/2018	
No. of Days granted Medical Leave	03		Degree of Injury	NIL	



**SINGAPORE  
POLICE FORCE**



T/20180219/2029

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

3 of 4

Report No. T/20180219/2029

**CONTINUATION OF REPORT**

**Brief Details.**

On 15.02.2018 at about 1400hrs, I was at SPC Petrol Kiosk queuing up to have my vehicle SLE8517E washed. In front of my car was vehicle SLA8220G and behind me was vehicle SGF9785U. Suddenly, I felt a bang from my rear, which causes my vehicle to roll forward and hit onto vehicle SLA8220G. I then went down to make a check. I saw vehicle SGF9785U had hit onto the rear of my vehicle. According to the driver of SGF9785U, she informed that it was her mistake and that she had accidentally stepped on the accelerator instead of the brake which cause her vehicle to go forward and hit onto my vehicle. After that we exchanged particulars and informed that we will claim through insurance company. My vehicle suffered dents at the front and rear. No other properties was damaged. After that I felt unwell and decided to visit the doctor. However as it was public holiday, most of the clinic was closed thus, I visit the doctor on 19.02.2018, and was given three(3) days Medical Leave.





SINGAPORE  
POLICE FORCE



T/20180219/2029

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

4 of 4

Report No. T/20180219/2029

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:

J/

Staff Sgt LIM RUI QI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

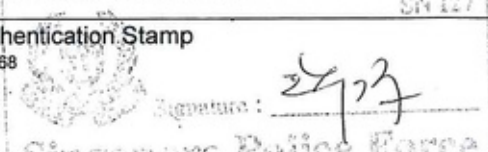
TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Authentication Stamp

NP168



Signature Of Informant:

Date/Time:

19/02/2018 11:35

Classification Of Case:

IDENTIFICATION CARD & DRIVING LICENCE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **S8009646A**

Name: **TAN MUI HOON  
(CHEN MEIYUN)**

Birth Date: **10 Apr 1980**

Issue Date: **20 Jul 2005**

1901357514A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8009646A**

Name: **TAN MUI HOON  
(CHEN MEIYUN)**

陈美云

Race: **CHINESE**

Date of birth: **10-04-1980**

Sex: **F**

Country of birth: **SINGAPORE**

S8009646A

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

Class 3 Motor cars  $\leq$  3000 kg with  $\leq$  7 passengers, exclusive of the driver; and motor tractors / vehicles  $\leq$  2500 kg

PASS DATE: **20 Jul 2005**

NP 4/3A

License No: **S8009646A**

4687845

NRIC No: **S8009646A**

Date of issue: **01-03-2011**

APT BLK 178 ANG MO KIO AVENUE 4 #12-955  
SINGAPORE 560178

NRIC No: **S8009646A** Date: **24/03/2012** No: **7017404**

Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7333656B**

Name: **TEO CHUN SANG (ZHANG JUNSHENG)**

Birth Date: **01 Oct 1973**

Issue Date: **30 Aug 2003**

000787771G



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7333656B**

Name: **TEO CHUN SANG (ZHANG JUNSHENG)**

张俊生

Race: **CHINESE**

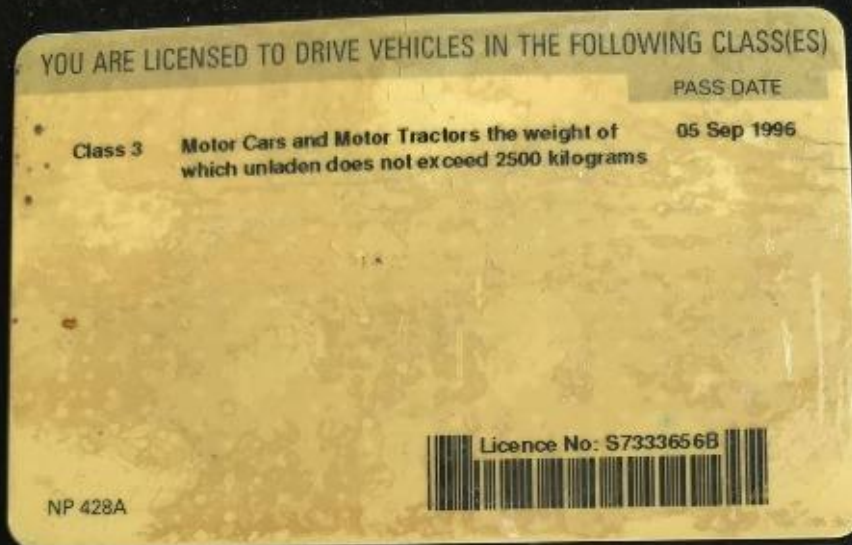
Date of birth: **01-10-1973**

Sex: **M**

Country of birth: **SINGAPORE**



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

