

## 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	19/04/2018 12:51
Date Of Accident	18/04/2018 22:00
Exact Location Of Accident	CAIRNHILL CIRCLE TURNING INTO BIDEFORD RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLX7951R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA YONG HUA
NRIC No	S8036154H
Email Address	CYH1980@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98351201
Alternative Phone No	Office-98351201

<b>Vehicle Particulars</b>	
Manufacturer	AUDI
Model	A3 SB 1.0 TF
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800037501
Cover Note Number	

<b>Driver</b>	
Name of Driver	HAN FEIMIN
NRIC No	S8877632A
Date Of Birth	23/01/1988
Occupation	INDOOR
Date Of Driving Pass	18/06/2016
Driving Experience	1 YEAR AND 10 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96608496
Fax Number	
Contact Number	
E-Mail Address	NICHOLAS.HFM@GMAIL.COM
Address	32A DUKU ROAD #02-06
Postcode	429266
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	YES
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)	2
Passenger 1	Name: : CHUA YONG HUA Gender: : Male

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT NO:T/20180419/2028

#### 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	SJW9125A
Vehicle Make/Model/Colour	AUDI

Details Of Properties

Vehicle CategoryPRIVATE CAR

Name of DriverJACHINTHA THANNIMALAI

NRIC/Passport NumberS7700808Z

Contact Number97919745

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

Approximate Age

Injuries Sustain

Injured person in which vehicle?SLX7951R

Were seat belts worn?YES

Was this injured conveyed to hospital by ambulance?

Address

Postcode

## 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:

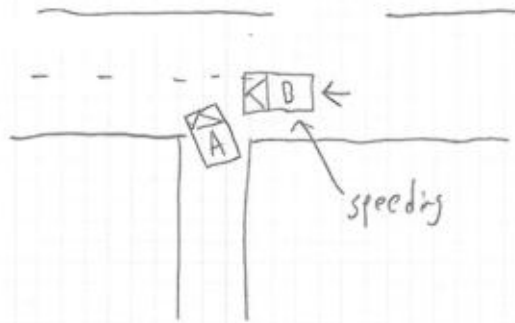
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 19 April 2018

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 19 Apr 2018

  
Reporting Centre Personnel's Signature  
Name: Tony Fong  
NRIC/FIN No.: G2040197X

# SKETCH PLAN



A = SLX7951R

B = 55W9125A

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I waited to turn left from Cairnhill Circle to Bideford Road around 10pm on Apr 18, 2018.
The red light was on however there was a sign "Left Turn on Red"
I checked the upcoming traffic - cars seemed far and slow.
I started to turn out and was hit by a speeding car coming out of nowhere.
I could not find the driver of the car immediately after the accident.
After the traffic police arrived, I located the driver near the CTE entrance about 200m from the accident site.
There was a witness confirming that before the car hit me, the car took over several cars (which was the reason why I could not see it) and was speeding towards the accident site, causing the accident.

## DECLARATION

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

Policyholder's Signature  
Date & Time: 19 April 2018

Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 19 Apr 2018

Reporting Centre Personnel's Signature  
Name: Tony Koo  
NRIC/FIN No.: 6724497X



# Police Report



**SINGAPORE  
POLICE FORCE**



T201804192028

1 of 2

## POLICE REPORT (NP299)

Report No. T201804192028

Police Station Of Origin  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Date/Time Report Made 19/04/2018 11:35		Vide Report No.		Station Diary No.	
Name Of Informant HAN FEIMIN		Address 32A DUKU RD #02-06 LUSH, THE SINGAPORE 429266			
ID Type / ID No. NRIC NO / S8877632A		Contact No. Home/Office Mobile 96608486			
Nationality CHINESE		Email Address			
Occupation Financial analyst (eg equities analyst, credit analyst)		Sex Male	Age 30	Date of Birth 23/01/1988	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 18/04/2018 22:00 - 18/04/2018 22:00		Location Of Incident SINGAPORE			

### Brief details.

On the 18/4/2018, I was driving (SLX7961R) travelling along Cairnhill Circle > Bideford Road. The red light was on however there was a sign "Left turn on RED" I checked the upcoming traffic - cars seemed far and slow. I started to turn out and suddenly got hit by a speeding vehicle (SJW9125A) coming out of nowhere. I could not find the driver of the car immediately after the accident. After the Traffic Police arrived, I located the driver near the CTE entrance about 200m from the accident location. There was a witness confirming that before the car hit me, the vehicle over took several cars (which was the reason why I could not see it) and was speeding towards the accident site, causing the accident. The vehicle

Signature Of Officer Recording The Report TP / TONG HWEE SIONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 18/04/2018 11:35
Officer In-Charge Of Case: TP / Traffic Police Department Investigation Branch / Staff Sgt TANG SIEW PING Contact No.: 65478430	Classification Of Case:

Authentication Stamp



## Police Report



SINGAPORE  
POLICE FORCE



TP-01 8/04/19/2025

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. T/20180419/2028

was also driving very recklessly on the road where it's supposed to be around 50km/hr.

That's all.

Signature Of Officer Recording The Report: TP / TONG HWEE SIONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/04/2018 11:35
Officer In-Charge Of Case: TP / Traffic Police Department Investigation Branch / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case:
Authentication Stamp	



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



**Accident Photo**



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

