SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 1. Please report <u>correctly</u> 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 witholding 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 conse aforesaid.	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	20/04/2018 16:29
Date Of Accident	19/04/2018 20:00
Exact Location Of Accident	NICOLL HIGHWAY OF KPE TOWARDS PIE CHANGI
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLQ6334R
Insured/Policyholder	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201604597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62414992
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	PRIUS HYBRID-1.8 S (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	
Driver	
Name of Driver	LEE LIAN HOE STEVEN
NRIC No	S1538077B
Date Of Birth	16/02/1962

OUTDOOR

27/12/2007

10 YEARS AND 3 MONTHS

Gender Mobile Number

Fax Number

Contact Number

EMail Address NOEMAIL

Address **NOADDRESS**

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PAID DRIVER

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 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

NO

MALE

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

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 BISHAN NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 20 BISHAN STREET 23, POSTCODE: 579757, COUNTRY: SINGAPORE

TEL NO: 1800-5529999 - FAX NO: 65561905 **Police Station Contact**

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO SKETCH PLAN AND POLICE REPORT

Attachment(s)

Are accident photos available for attachment? YES YES Was there any video captured by Car Camera?

Remarks/ Reasons: VIDEO OVERWRITTEN

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLB1020H

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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 Formby insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

l understand, acknowledge, agree and consent that :

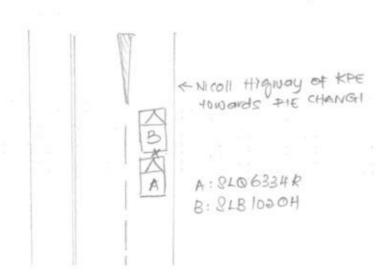
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal information to all insurer(s) who have insured vehicle(s) involved in this accident (ell insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the 'Insurers'), the insurers' law yers 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;
- (ii) 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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's-Signature / Date &

Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date

Witnessed by Reporting Centre Personnell



	7	
PETER	TO POLICE NOTE	
ILTER	10 POCIGE NOTE	
		_
		_
		_
		_
		_
		_
		_
	/	_
		_
		_
		_
		_
-		_
		_
		_

Describe Circumstances of the Accident

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Annex A

NOTICE OF COMPLIANCE

This is to inform that <u>Lee Lian Hoe Steven</u>, S1538077B, Blk 256 Bishan Street 22 #07-474, HP: 96680812 has reported to the police a non-injury traffic accident which had occurred along <u>Nicoll Highway</u> on 19/04/2018 at about 2000hrs involving the following vehicles:

- 1. SLQ6334R (Complainant)
- 2. SLB1020H (Other Party)

Brief Facts

On 19/04/18 at about 2000hrs, I was driving my vehicle (SLQ6334R) Nicoll highway of KPE towards PIE Changi at Lane 1 coming out of the tunnel.

It was not raining and the road was dry at the point of time. The vehicle (SLB1020H) in front of me braked out of a sudden and I jammed brake as a result. We stopped our vehicle after we came out of the expressway and exchanged particulars. No injury at the point of time, a Traffic Police happened to be there. No ambulance came to scene. No government property damaged.

The other driver's particular:

Name: Brandon Lim

NRIC:

HP: 98730897

If this accident has been report to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of issuing officer: SGT Daron Ho

Time: 2356hrs ESD Reference: 154

Police Post/ Police Centre: Bishan NPC

Original – To be issued to complainant Duplicate- To be submitted to Traffic Police BISHAN NPC 20 BISHAN STREET 25 SINGAPORE 579757 FEL: 1806-5529999

CONFIDENTIAL

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$1538077B



Harrie



LEE LIAN HOE STEVEN

n. CH

Race CHINESE Date of birth 16-02-1962

Sex M

515380778

Country/Place of Sinth SINGAPORE







25-05-2017

Astoness

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

PASS DATE

Class 3A Motor cars without clutch pedals (Auto) < 3000kg with < 7 passengers, exclusive of the driver, and other motor vehicles without clutch pedals < 25ncs

27 Dec 2007

NP 428A

Licence No. 515330778

















