

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	25/04/2018 11:57
Date Of Accident	24/04/2018 15:10
Exact Location Of Accident	BISHAN STREET 14
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT5526T
Insured/Policyholder	
Name Of Registered Owner	QUEK KOK HWA
NRIC No	S1295125F
Email Address	DIVIZIONJQ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96720775
Alternative Phone No	Office-67785016

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY-1.5 4AT (A)
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

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100167933-08
Cover Note Number	

Driver

Name of Driver	QUEK KOK HWA
NRIC No	S1295125F
Date Of Birth	16/04/1958
Occupation	INDOOR
Date Of Driving Pass	31/10/1978
Driving Experience	39 YEARS AND 5 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96720775
Fax Number	
Contact Number	OFFICE-67785016
EMail Address	DIVIZIONJQ@GMAIL.COM
Address	BLK 415 COMMONWEALTH AVENUE WEST #25-3015
Postcode	120415
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 - 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	2
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	KIM KEAT NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 231 LORONG 8 TOA PAYOH , POSTCODE: 310231 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2529999 - FAX NO: 63554311
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN ATTACH. PLEASE REFER TO POLICE REPORT T/20180424/2112ATTACH.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GT5477L
Vehicle Make/Model/Colour	
Details Of Properties	LORRY
Vehicle Category	COMMERCIAL VEHICLE

Name of Driver	L. USAMANKAG
NRIC/Passport Number	G3277285X
Contact Number	96710456
Address	
Postcode	
Insurance Company Name	
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: 24/4/2018
1823 hrs.

Driver's Signature

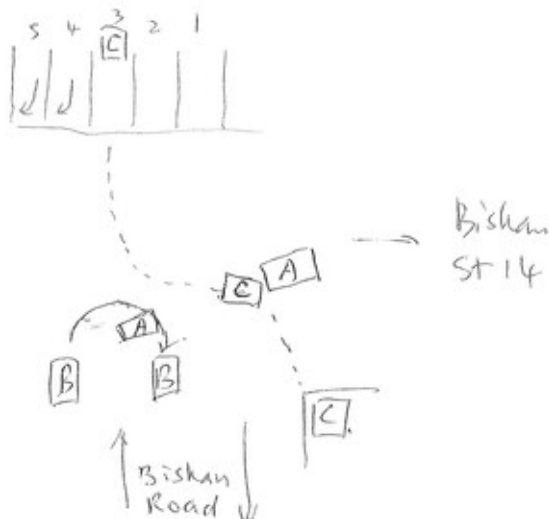
(If driver is not the policyholder)
Date & Time:

TAN CHONG MOTOR SALES PTE LTD
17 Toa Payoh Lorong 8
Singapore 319254
Tel: 6357 0756 : Fax: 6356 4922

Reporting Centre Personnel's Signature

Name: AFFEND I J
NRIC/FIN No.: S13381886

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving car A, waiting to turn right into Bishan St 14. When the on-coming vehicles had passed, and car C is far away from ~~me~~ me on 3rd lane, I turned into Bishan St. 14 safely.

The car behind me, car B made a U-turn without realising of the approaching car C. According to the driver of car C, he had to sway to the left to avoid car B.

As car C swayed too much and too quickly to the left, it hit the back of my car and went on to hit the lamp post and traffic light and ended up on the turfed island.

Car B escaped unscratched.

DECLARATION

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

Policyholder's Signature

Date & Time: 24/4/2018
18:25 hrs

Driver's Signature

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

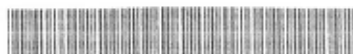
TAN CHONG MOTOR SALES PTE LTD
17 Toa Payoh Lorong 8
Singapore 319254
Tel: 6357 0756 Fax: 6356 4922

Reporting Centre Personnel's Signature

Name: AFFENDI J
NRIC/FIN No.: 813381886



**SINGAPORE
POLICE FORCE**



T/20180424/2112

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

1 of 3

Report No. T/20180424/2112

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/04/2018 19:13	Vide Report No.: E/20180424/0117	Station Diary No.: 46
--	-------------------------------------	--------------------------

Informant's Particulars

Name of Informant: QUEK KOK HWA			Address: APT BLK 415 COMMONWEALTH AVENUE WEST #25-3015 SINGAPORE 120415	
ID Type / ID No.: NRIC NO / S1295125F			Contact No.: Home/Office: Mobile: 96720775	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 60	Date of Birth: 16/04/1958	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: PROPERTY CONSULTANT			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 24/04/2018 15:10	Type of Location: Straight Road
Location: Along Road 1 BISHAN STREET 14	Along Bishan street 14	Road Surface: Dry	Road Speed Limit:	
Weather: Clear	Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GT5477L	Lorry				Seriously Damaged	0
SJT5526T	Car	NISSAN	SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR	Red	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
-------------	-------------------	---------------	-----------	-------------

Scanned by CamScanner

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180424/2112

2 of 3

Report No. T/20180424/2112

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJT5526T	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100167933-08	19/10/2017	18/10/2018

Brief Details.

On 24/4/18 at about 1510hrs, I was driving my vehicle bearing plate number SJT5526T along the right lane of Bishan road towards ang mo kio. The traffic light was green and there were no incoming vehicles. I then started to make a right turn into bishan street 14. When I was about to complete the right turn, there is one vehicle bearing plate number GT5477L knocked onto the rear of my vehicle. The said vehicle then ended up knocking onto the traffic light post. According to the lorry driver, he was trying to avoid U-turn vehicles by swaying to the left side as such resulted into colliding onto the rear of my vehicle. No one was injured. My vehicle's rear bumper, boot cover, both rear lights and right rear tyre were damaged due to the collision. Ambulance and Traffic police then came to scene. Traffic police then interviewed me and advised to lodge a traffic accident report after providing the report number E/20180424/0117. There is no camera installed in my vehicle.

Lorry driver:
L.Umasankag
FIN:G3277285X
HP:96710456

Scanned by CamScanner

Sketch Plan #5



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Kim Keat NPP
231 Lorong 8 Toa Payoh #01-186
SINGAPORE 310231
Tel No: 1800-2529999



T/20180424/2112

3 of 3

Report No. T/20180424/2112

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 2 LIM BRANDON	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/04/2018 19:13
Officer In Charge Of Case: TP / AEIT / SSI KASMAWATI BTE SAMIAN Contact No.: 65476179	Classification Of Case: SN 064
Authentication Stamp NP168	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

