### 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 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 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	24/05/2018 14:43	
Date Of Accident	23/05/2018 10:00	
Exact Location Of Accident	GEYLANG SERAI MARKET	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLZ5437L	
Insured/Policyholder		
Name Of Registered Owner	YEO SIO HONG	
NRIC No	S7250575A	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-91542134	
Alternative Phone No	OTHERS-91542134	
Vehicle Particulars		
Manufacturer	MITSUBISHI	
Model	OUTLANDER-2.0 (A)	
Exact Purpose for which vehicle was being used at time of accident	t .	
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	1800049878	
Cover Note Number		

**Driver** 

Name of Driver **GAO JINGUANG** NRIC No S2705341F Date Of Birth 12/12/1967 Occupation **INDOOR Date Of Driving Pass** 12/12/2005

**Driving Experience** 12 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91542134

Fax Number Contact Number

**EMail Address** JINDELAI@SINGNET.COM.SG

BLK 329 UBI AVENUE 1 #08-617 Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE** 

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

Type Of Accident **COLLISION - OPENING DOOR OF VEHICLE** 

Weather Conditions **RAINING** DRY Road Surface

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 NO

ambulance?

Was any other material or property damaged? YES

NO

2

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 NAME: : YEO SIO HONG

> GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name KRETA AYER NPP

ROAD: 32 NORTH CANAL ROAD, POSTCODE: 059282, COUNTRY: Police Station Address

**SINGAPORE** 

NO

Police Station Contact TEL NO: 1800-5359999 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO ATTACHMENT

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 YP7502S

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category **COMMERCIAL VEHICLE** 

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

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Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

#### Sketch Plan

### SKETCH PLAN

### **IMPORTANT NOTICE**

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  Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
  interested parties.
- 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:
  - 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: 23/05/18

3:20Pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 23/05

3:20pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

### Sketch Plan #2

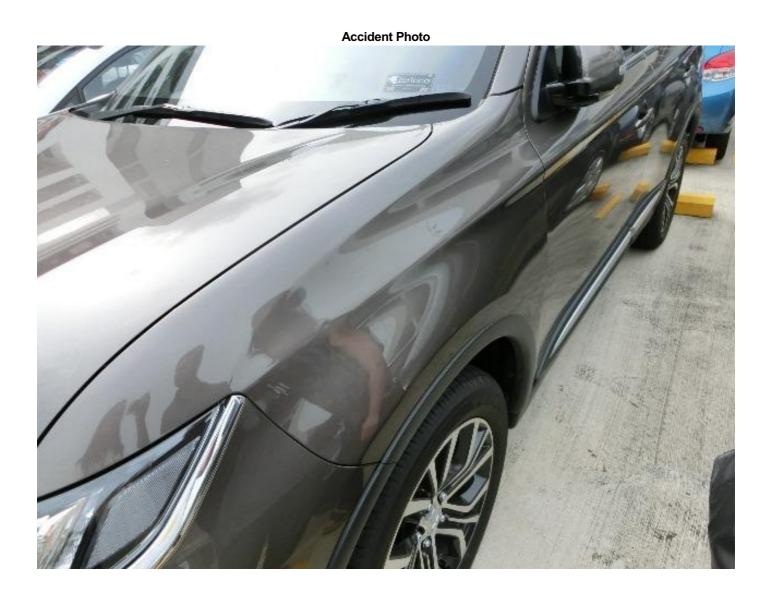
KETCH PLAN			
	A Rown door	1 Ei7	
SCRIBE CIRCUMSTANCES	DELGO POR PORTUGAÇÃO		
causing a	and the door y	side of	my front
left h	and side of	my vehicle	2 . 0
CLARATION le declare the foregoing partic	ulars are true in every respect.		$\cap$
	3 mit	/	V <sub>2</sub>
MeSchony ityholdor's Signature te & Time: 53/05/18	Driver's Signature (If driver is not the policyho Date & Time: 33/05/	Repolder) Na	porting Centre Personnel's Signature me: IC/FIN No.:

GIARMCSketchPlanForm\_VX

# **Accident Photo**









# **Accident Photo**



### Police Report





1 of 2

Report No. A/20180523/2110

# POLICE REPORT (NP289)

Police Station Of Origin Kreta Ayer NPP 32 North Cenal Road SINGAPORE 059282 Tel No: 1800-5359999

Date/Timo Report Made 23/05/2018 18:06	Vide Report No. G/20180523/0071		Station Diary No.	
Name Of Informant YEO SIO HONG	Address APT BLK 329 UBI AVENUE 1 #08-617 SINGAPORE 400329			
ID Type / ID No. NRIC NO / S7250575A	Contact I Home/Of		Mobile 97381888	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation Manager Institution/School Name	Sex Formale Language	Age 45	Date of Birth 23/12/1972	Race Chinese
Date/Time Of Incident 23/05/2018 09:45	Location Of Incident 1 GEYLANG SERAI SRI GEYLANG SERAI SINGAPORE			

#### Brief details.

On 23/05/18 at 0945hrs, my husband had parked his car SLZ5437L (Mitsubishi/Outlander) at the loading & unloading bay. He went off while I waited inside the car. Shortly after, I felt an impact from the front as such I alighted to check and discovered that the rear door of the lony (YP7502S) is resting on the front left side the car. I waited for the owner (Indian, Male) who came by and notice a dented on the car when he closed the rear door. He admitted that it was his fault. I am lodging this report for my follow up action. That is all.

My
18:08
on Of Case:

# Police Report





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CONTINUATION OF REPORT

Report No. A/20180523/2110

Signature Of Officer Recording Title Report:	Signature Of Informent:
A / Staff Sgt MUHAMMAD IBRAHIM BIN SAMSURI	
Signature Of Interpreter, Not applicable	Dato/Time: 23/05/2018 18:06
Officer In-Charge Of Case: G Division LEE JUN LEI, KENETH Contact No.: 62440000	Classification Of Case:
Authentication Stamp	
2012 JU	
f "	

### **Identification Card**













