

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	11/06/2018 15:29
Date Of Accident	20/06/2017 17:30
Exact Location Of Accident	SERANGOON AVE 2 OPEN C/PARK BLK 301-309 NEAR GANTR
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCY9168Z
Insured/Policyholder	
Name Of Registered Owner	SHAW CHENG-YUE
NRIC No	S2221654F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96902796
Alternative Phone No	OTHERS-96902796

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	C180
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?	NO
If No, Please state action to be taken	REPORTING ONLY
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	2100319008-04000
Cover Note Number	

Driver

Name of Driver	SHAW CHENG-YUE
NRIC No	S2221654F
Date Of Birth	18/01/1947
Occupation	INDOOR
Date Of Driving Pass	01/01/1983
Driving Experience	34 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96902796
Fax Number	
Contact Number	OTHERS-96902796
Email Address	NOEMAIL

Address	26 CROWHURST DRIVE
Postcode	557905
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	
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	SERANGOON GARDENS NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 51 SERANGOON GARDEN WAY , POSTCODE: 555947 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2879999 - FAX NO: 62815969
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20170711/2168

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SFY7994H
Vehicle Make/Model/Colour	
Details Of Properties	
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)

Accident Sketch Plan

SKETCH PLAN

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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:

 11/06/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Individual Statement

SKETCH PLAN

NO SKETCH AVAILABLE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


P/s refer to the police report: 7/2017 0711/2168

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:

 11/06/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Form 10/18/19 (Rev. 1/18)

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Individual Statement



**SINGAPORE
POLICE FORCE**



T/20170711/2168

Police Station Of Origin:
Serangoon Gardens NPP
51 Serangoon Garden Way SINGAPORE
555947
Tel No: 1800-2879999

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Report No. T/20170711/2168

CONTINUATION OF REPORT

Brief Details.

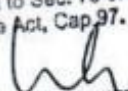
On 20/06/2017 at around 1730hrs, I was driving my vehicle SCY9168Z at the open car park of Serangoon Avenue 2 of Block 301-309. I drove my vehicle to the gentry as I wanted to get out from the car park. The gentry had open and I wanted to make a left turn. I make a check on the right side before making a left turn, however I did not notice the vehicle in front of me did not move his vehicle. Thus my vehicle hit onto the rear bumper of the front vehicle. The impact was minor, we both came out to make a check and agreed with a private settlement.

However 3 days later, he did not contact me about the details. Therefore I called him to make a check. He informed that he decided to let the insurance company to handle the issue and I agreed.

On 11/07/2017, I received a call from a lady. She informed that she was from traffic police and was instructed to lodge a traffic police report of the accident that took place on 20/06/2017.

I would like to state that I could not remember his vehicle details and his particular. As I did not know the procedure after involving an accident.

Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap. 97.


Siti Rohaiyah Kasmani (MX)
Traffic Police
Date :

20 NOV 2017

Police Report



**SINGAPORE
POLICE FORCE**



T/20170711/2198

Police Station Of Origin:
Serangoon Gardens NPP
51 Serangoon Garden Way SINGAPORE
555947
Tel No: 1800-2879999

1 of 3

Report No. T/20170711/2198

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/07/2017 17:10		Vide Report No.:		Station Diary No.: 14	
Informant's Particulars					
Name of Informant: SHAW CHENG-YUE			Address: 26 CROWHURST DRIVE SINGAPORE 557905		
ID Type / ID No.: NRIC NO / S2221654F			Contact No.: Home/Office: Mobile: 96502798		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 70	Date of Birth: 18/01/1947	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 20/06/2017 17:30	Type of Location: Car Park
Location: Along Road 1 SERANGOON AVENUE 2				
At the Open Car park of Block 301-309, Near the Gentry				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
Type of Collision: Between Moving Vehicles - Head To Rear		<p><i>Certified True Copy</i> pursuant to Sec. 15C of Evidence Act, Cap 97</p> <p>Sgt. Rohaiyah Kasmah (1851) Traffic Police Date: 20 NOV 2017</p>		

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SCY9168Z	Car	MERCEDES BENZ	C 180 KOMPRESS OR	Grey	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SCY9168Z	AIG ASIA PACIFIC INSURANCE PTE LTD.	2100318008	11/08/2016	10/08/2017	

Police Report



**SINGAPORE
POLICE FORCE**



T/20170711/2168

2 of 3

Police Station Of Origin:
Serangoon Gardens NPP
51 Serangoon Garden Way SINGAPORE
555947
Tel No: 1800-2879999

Report No. T/20170711/2168

CONTINUATION OF REPORT

Brief Details.


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Certified True Copy
pursuant to Sec. 78 of the
Evidence Act, Cap. 97.


Siti Rohayah Kasimani (MX)
Traffic Police
Date:

20 NOV 2017

Police Report



**SINGAPORE
POLICE FORCE**



T/20170711/2168

Police Station Of Origin:
Serangoon Gardens NPP
51 Serangoon Garden Way SINGAPORE
555947
Tel No: 1800-2879989

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Report No. T/20170711/2168

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: F / Cpl LAM CHEW KIT
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65475430

Signature Of Informant: Certified True Copy pursuant to Sec. 78 of the Evidence Act, Cap 97. S/S Rohaiyah Kasmani (MX) Traffic Police
Date/Time: 11/07/2017 17:10
Classification Of Case: Data : 20 NOV 2017

Authentication Stamp
NP-158