

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	10/07/2018 10:39
Date Of Accident	12/06/2018 15:40
Exact Location Of Accident	OPEN CARPARK TANK ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFG8168P
Insured/Policyholder	
Name Of Registered Owner	CHOY NAM CHIU
NRIC No	S0047608J
Email Address	EDWARD@LUCKGALLOP.COM
Mobile Phone No	(LOCAL) +65-82221880
Alternative Phone No	Office-93371296

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALPHARD-2.4 (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 CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100376028
Cover Note Number	

Driver

Name of Driver	MOHD YUSOFF BIN MAAROP
NRIC No	S1180361Z
Date Of Birth	19/03/1956
Occupation	OUTDOOR
Date Of Driving Pass	22/06/1981
Driving Experience	36 YEARS AND 11 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-93371296
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 722 JURONG WEST AVE 5 #06-134
Postcode	640722
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - OTHER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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	ORCHARD NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 KILLINEY ROAD , POSTCODE: 239572 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7359999 - FAX NO: 67331934
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

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	SJX1109U
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

IMPORTANT NOTICE

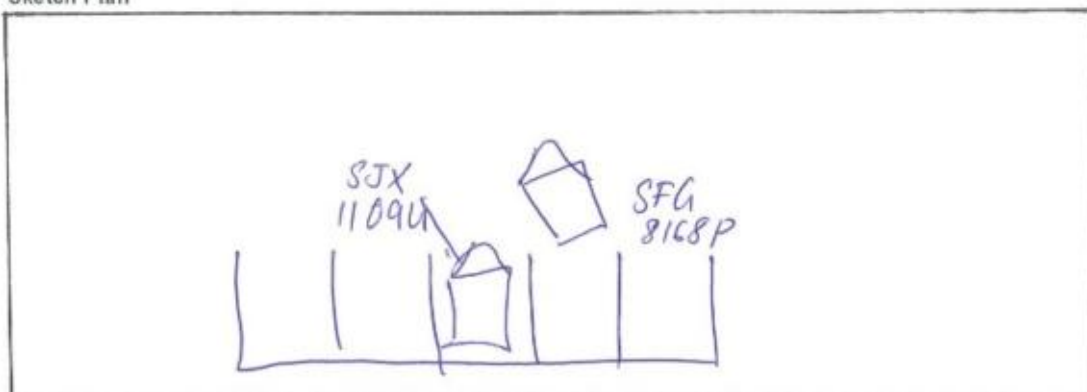
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may 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 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)**
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' 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 w ith 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' 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.

Policy holder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Common Statement



AIG Asia Pacific Insurance
Pte. Ltd. (201000404M)
AIG Building
78 Shenton Way #07-16
Singapore 079120

www.aig.com.sg

T: (65) 6419 3000
F: (65) 6835 7416

Your Ref: SFG8168P
Our Ref: 2240681364SG-001

Date: 20 June 2018

Choy Nam Chiu @ Robert Choy
7 Draycott Drive
#07-02
SINGAPORE 259421

WITHOUT PREJUDICE

Dear Sir/Madam,

**ACCIDENT INVOLVING SFG8168P AND SJX1109U ON 12 June 2018 AT TANK
ROAD PARALLEL OPEN CARPARK Singapore**

We refer to the above matter.

We would like to inform you that we have received a claim from a third party involved in the above auto accident.

Our record shows that you have not reported the accident to us. We would appreciate it if you could urgently file a report at our approved reporting centre.

You should also IMMEDIATELY forward us by hand any letters or Courts Summons received from the other party involved in the accident. You should not negotiate, admit liability or offer payment to them.

We would like to bring to your attention that under Policy Condition 5A, we shall have full discretion in the process and settlement of the said third party claim.

Your NCD (No Claim Discount) will be reduced by 30% (20% for motorcycle/commercial vehicles) if a claim is made under your policy.

To enable us to look into the matter immediately, please let us hear from you within seven (7) days from date of this letter. In accordance with the policy conditions, we reserve the right to repudiate the said claim to you should you not give proper notice to us of any occurrence which may give rise to it.

Kindly contact our Call Centre at (65) 6419-3000 if you have any further enquiries.

Yours faithfully,

Claims Department

AIG Asia Pacific Insurance Pte. Ltd.

This is computer generated document, no signature is required.

Police Report



**SINGAPORE
POLICE FORCE**

Our Ref : TP/IP/35687/2018
Date : 26 June 2018

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel : +65 6547 6144
Fax : +65 6547 4883
www.police.gov.sg

CHOY NAM CHIU @ ROBERT CHUA
7 DRAYCOTT DRIVE
#07-02
SINGAPORE 259421

(URGENT)

Dear Sir / Madam

ALLEGED HIT-AND-RUN ACCIDENT INVOLVING A PARKED CAR SJX1109U AND YOUR CAR SFG8168P AT THE OPEN CAR PARK ALONG TANK ROAD ON 12 JUNE 2018 AT ABOUT 3.37PM

Our investigations showed that you are the registered owner / driver of **SFG8168P**, which is alleged to have been involved in a hit and run accident.

2 You are required to provide the particulars of the driver on the above date and time within 14 days of receipt of this letter. Under the provisions of the Road Traffic Act, it is an offence not to provide the driver's particulars, and the owner can be liable to a fine of up to \$1,000/- or 6 months' imprisonment.

3 In addition, please inform the driver to lodge an online Police Report of a Traffic Accident (NP168) using SingPass via the SPF Electronic Police Centre¹ (<http://www.police.gov.sg/epc>). Alternatively, the report may be lodged at any Police Post or Neighbourhood Police Centre. Do note that failure to lodge a report may have an adverse effect against the involved party.

4 The information given by the driver in the report will be carefully considered. The driver may not be called upon an interview if the information provided is sufficient for our investigation. If you have video evidence, you can send it to the Investigation Officer (IO) via email Leslie_JL_Tan@spf.gov.sg. If the file size is too big, you can make arrangements with the IO at her office number 65476144 during office hours for a convenient method of retrieval.

Yours faithfully,

PUTEH BTE SHARIFF (DSP)
CHIEF INVESTIGATION OFFICER / TRAFFIC POLICE
This is a computer-generated letter. No signature is required.

Particulars of the driver SFG8168P on 12/06/2018 at about 3.37pm (TP/IP/35687/2018):-

Name :	<i>MOHD YUSOFF BIN</i> <i>MAHMOUD</i>	NRIC / FIN / PP No.	<i>S11803612</i>
Contact No :	<i>92371296</i>		

I affirm that the information I gave above is true and correct.

CHOY NAM CHIU
Name / Contact No of Registered owner

[Signature]
Signature of Registered vehicle owner

8/7/18.
Date

*Please mail, fax or email a soft copy of the completed form, addressed to the Investigation Officer.

¹ For the purpose of lodging this report, please select "Yes" for "Is this a Hit and Run accident?" under "Step 2: Accident Info", even if the driver is not aware of any accident".



**SINGAPORE
POLICE FORCE**



T/20180709/2164

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

1 of 3

Report No. T/20180709/2164

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/07/2018 19:06		Vide Report No.:		Station Diary No.: 160	
Informant's Particulars					
Name of Informant: MOHD YUSOFF BIN MAAROP			Address: APT BLK 722 JURONG WEST AVENUE 5 #06-134 SINGAPORE 640722		
ID Type / ID No.: NRIC NO / S1180361Z			Contact No.: Home/Office: Mobile: 93371296		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 19/03/1956	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: Other car and light goods vehicle drivers nec			Driving Licence Information: Class: 3,4,5 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 12/06/2018 15:40	Type of Location: Car Park
Location: Along Road 1 TANK ROAD OPEN CAR PARK OF TANK ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: BETWEEN MOVING AND STATIONARY VEHICLE- HEAD TO REAR				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFG8168P	Car				No Damage	0
SJX1109U	Car				No Damage	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20180709/2164

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

2 of 3

Report No. T/20180709/2164

CONTINUATION OF REPORT

Driver			
Name	MOHD YUSOFF BIN MAAROP		ID No. S1180361Z
Related Vehicle	SFG8168P (Car)		Contact No. 93371296
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL		Degree of Injury NIL

Brief Details.

I am the personal driver for Mr Choy Nam Chiu and have been driving for him for about 20 years.

On 12/06/2018 at about 03.37p.m, I had parked the driven car (SFG8168P) at Tank Road Open carpark. While executing the park behind another car, SJX1109U, the front left bumper of the car I was driving had brushed against the right rear bumper of the front car.

After I parked the car, both of us alighted from the car and the other driver took photos of the damages. She took photos of both the vehicles and subsequently we left. I wish to state that I did not take down the particulars of the other driver as I felt that there is no fresh damages to our car.

I wish to state that at that point in time, there is scratch marks on her car but it was not fresh. As for my car, there is no fresh damages. I wish to indicate that there is confrontation between us.



**SINGAPORE
POLICE FORCE**



T/20180709/2164

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

3 of 3

Report No. T/20180709/2164

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 / Sr Staff Sgt ABDUL AZIZ BIN DOLGANI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 09/07/2018 19:06
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt TAN JEOK LENG Contact No.: 65476144	Classification Of Case: SN 172
Authentication Stamp NP168   SIGNATURE	

Interview Form



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : MOHD YUSOFF BIN MAAROP
VEHICLE NUMBER : SFG8168 P
DATE/TIME OF ACCIDENT : 12/6/18 G 3:37 PM
PLACE OF ACCIDENT : OPEN CAR PARK TANJ R/D
THIRD PARTY VEHICLE (IF ANY) : SJX 11094

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Accidental bump during parking

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

N/A

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Slight bump. No damage
Slight bump at negligible speed. No damage on
visual inspection

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

N/A

[Signature]

Name: MOHD YUSOFF BIN MAAROP

I Affirmed The Above Information Is Given To My Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120
Tel: 6419 3000

Driver Nric And Driving Licence

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

