

## 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	13/06/2018 14:12
Date Of Accident	22/02/2018 13:40
Exact Location Of Accident	BLK 505A JELAPANG ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR9824S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO KUAN CHIONG
NRIC No	S2551178F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96654808
Alternative Phone No	Others-96654808

### Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY-1.5 (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	2100380274
Cover Note Number	

### Driver

Name of Driver	LEO AH LEONG
NRIC No	S2551179D
Date Of Birth	07/07/1954
Occupation	INDOOR
Date Of Driving Pass	28/01/1984
Driving Experience	34 YEARS AND 0 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-92749338
Fax Number	
Contact Number	
E-Mail Address	GUILDALEO@GMAIL.COM
Address	BLK 502 JELAPANG ROAD #03-404
Postcode	670502
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	BUKIT PANJANG
Police Station Address	ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

SEE ATTACHED POLICE REPORT.

#### 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	SLN9201L
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) 0

## Sketch Plan

### SKETCH PLAN

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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:

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

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

**SKETCH PLAN**

The sketch plan shows a horizontal road with several vertical lines. A rectangular area is labeled 'SCH 9201L' and a diamond-shaped area is labeled 'SSR 98245'. An arrow points to a specific location on the horizontal line.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

SEE ATTACHED POLICE REPORT

## 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:

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



**SINGAPORE  
POLICE FORCE**



T/20180426/2031

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

1 of 3

Report No. T/20180426/2031

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 26/04/2018 10:20		Vide Report No.:		Station Diary No.: 33	
<b>Informant's Particulars</b>					
Name of Informant: LEO AH LEONG			Address: APT BLK 502 JELAPANG ROAD #03-404 SINGAPORE 670502		
ID Type / ID No.: NRIC NO / S2551179D			Contact No.: Home/Office: Mobile: 92749338		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 63	Date of Birth: 07/07/1954	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Shop sales assistant		Driving Licence Information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 22/02/2018 13:40	Type of Location: Carpark
Location: Along Road 1 JELAPANG ROAD  Inside Blk 505A Jelapang Road MSCP				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJR9824S	Car				No Damage	0

**Details of Person Involved**

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

Sketch Plan #4





**SINGAPORE  
POLICE FORCE**



T/20180426/2031

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Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Report No. T/20180426/2031

**CONTINUATION OF REPORT**

Driver			
Name	LEO AH LEONG	ID No.	S2551179D
Related Vehicle	NIL	Contact No.	92749338
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 22nd February 2018 at 1342hrs, I was driving my husband's vehicle, SJR9824S, inside Blk 505A Jelapang Road, I was reversing my vehicle to park inside the parking lot when suddenly I heard a scratching sound, however I was unsure what it was. I got down from my vehicle and check onto my own vehicle and saw that there was a slight scratch on the left bumper however I was rushing back home and could not report about the matter. There were vehicles parked on the left and right side of my vehicle however I did not realize if there was any damage to the vehicles parked beside me.



**SINGAPORE  
POLICE FORCE**



T/20180426/2031

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1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

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Report No. T/20180426/2031

**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:  
J /  
Sgt 3 NUR SABRINA BINTE ABU HUSSAIN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
26/04/2018 10:20

Officer In Charge Of Case:  
TP / HRT /  
SI ABDUL KAREEM BIN ABDUL HAGUE  
Contact No.: 65476079

Classification Of Case:

X SN 117

Authentication Stamp  
NP168

Singapore Police Force



Accident Photo



**Accident Photo**



Accident Photo



Accident Photo





Accident Photo





Accident Photo

