

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	16/07/2018 17:45
Date Of Accident	15/07/2018 13:50
Exact Location Of Accident	BLK 132 LOR AH SOO CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SBQ6797G
Insured/Policyholder	
Name Of Registered Owner	CHUA TIAN KEONG
NRIC No	S1806078G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96273323
Alternative Phone No	OFFICE-96273323

Vehicle Particulars

Manufacturer	KIA
Model	STINGER 2.0A 2WD SUNROOF
Exact Purpose for which vehicle was being used at time of accident	PARKED
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	1800063196
Cover Note Number	-

Driver

Name of Driver	KWEK KIOK KHIANG (GUO KEQIAN)
NRIC No	S7812684A
Date Of Birth	15/05/1978
Occupation	INDOOR
Date Of Driving Pass	06/10/1997
Driving Experience	20 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90903030
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 132 LOR AH SOO #04-394
Postcode	530132
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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?	
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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GV672L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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 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' 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.

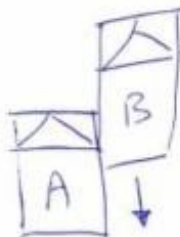
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

BIK132, Lorong Ah Soo Car Park.



Vehicle B
doing Reversing into
the lot

Accident Sketch Plan

Describe Circumstances of the Accident

Describe Circumstances of the Accident
Refer to Police Report No: T/20180715/7007

Declaration

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

Witnessed by Reporting Centre
Personnel

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180715/7007

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180715/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/07/2018 21:00	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: KWEK KIOK KHIANG			Address: APT BLK 132 LORONG AH SOO #04-394 SINGAPORE 530132	
ID Type / ID No.: NRIC NO / S7812684A			Contact No.:	Mobile: 90903030
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email: kwekstephen@gmail.com	
Sex: Male	Age: 40	Date of Birth: 15/05/1978	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Marketing and sales representative (technical)			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

General Information of the Accident:				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/07/2018 13:49	Type of Location: Car Park
Location: LORONG AH SOO Block 132 Lor Ah Soo Carpark lot				
Weather: Sunny		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two 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
GV 0672 L	Van	TOYOTA	Liteace	White	Slightly Damaged	0
SBQ6797G	Car	KIA	Stinger	White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180715/7007

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20180715/7007

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBQ6797G	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800063196	01/06/2018	31/05/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KWEK KIOK KHIANG	ID No.	S7812684A
Related Vehicle	SBQ6797G (Car)	Contact No.	90903030
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 15 Jul 2018 at about 1335hrs, i parked my vehicle SBQ 6797 G at Lor Ah Soo block 132 carpark lot.

At 1645hrs i wanted to drive my vehicle but I discovered that that my vehicle SBQ 6797 G was damaged on the front right-side portion and front right portion. I checked my in-car camera footage and found out that at around 1349hrs, a van GV 672 L, while doing reversing into the lot on my vehicle right side and it collided into my vehicle front right-side portion and front right portion.

From my vehicle in-car camera footage, the Van driver quickly sped off after collided into my car.

Please kindly look into the matter.

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police Division HQ
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20180715/7007

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Report No. T/20180715/7007

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
TAN JEOK LENG
Contact No.: 65476144

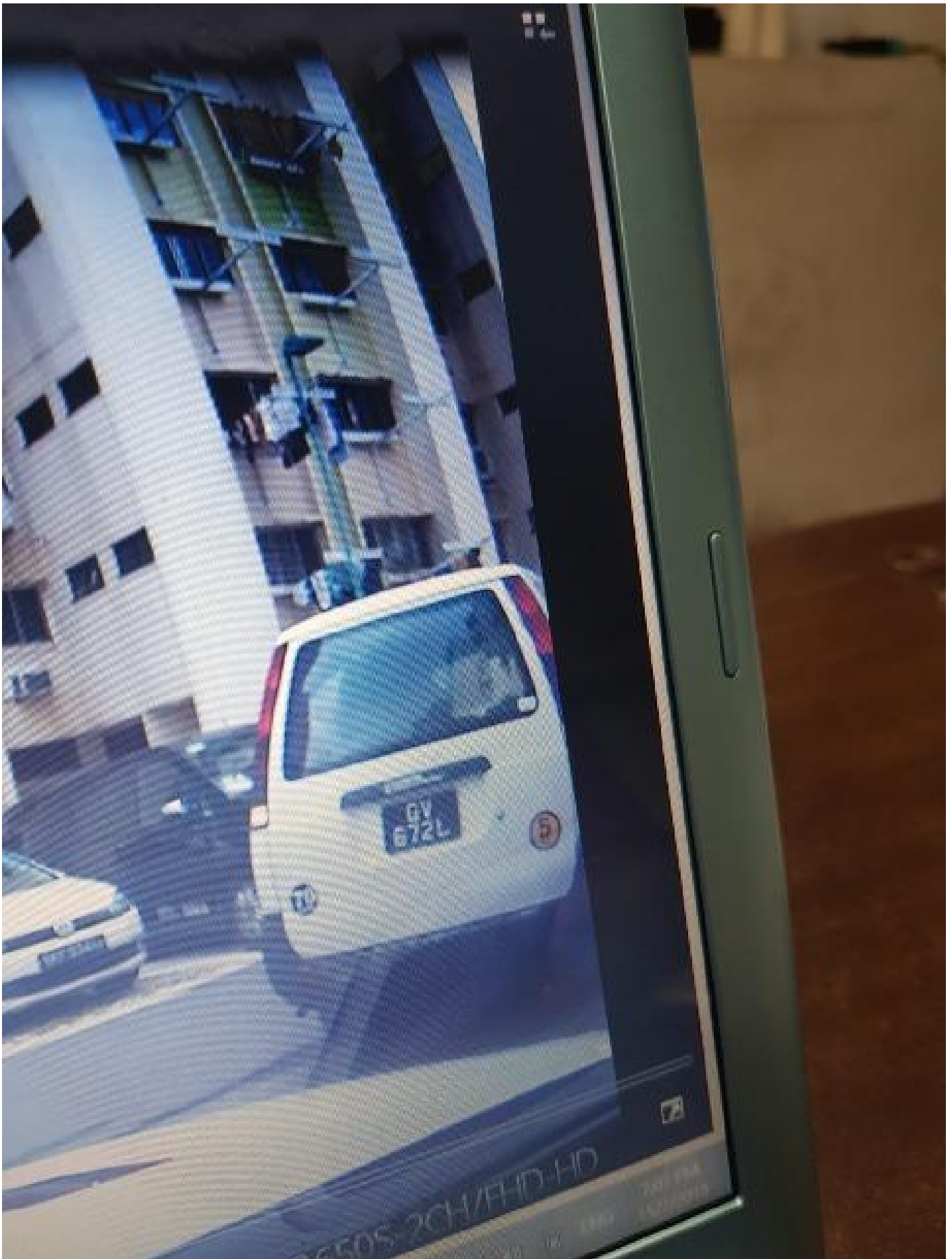
Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
15/07/2018 21:00

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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