

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 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. 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	19/10/2018 17:25
Date Of Accident	19/10/2018 05:55
Exact Location Of Accident	BKE (WOODLANDS) BEFORE KJE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG8721X
Insured/Policyholder	
Name Of Registered Owner	HENG YI XIANG
NRIC No	S8413731F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97114106
Alternative Phone No	OFFICE-97114106

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
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	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	2100486155-02
Cover Note Number	

Driver

Name of Driver	HENG YI XIANG (XING YIXIANG)
NRIC No	S8413731F
Date Of Birth	10/05/1984
Occupation	OUTDOOR
Date Of Driving Pass	29/04/2009
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97114106
Fax Number	
Contact Number	OFFICE-97114106
EEmail Address	NOEMAIL

Address	BLK 37 BEDOK SOUTH AVENUE 2 #15-469
Postcode	460037
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 - CHANGE/CROSS LANE
Weather Conditions	RAINING
Road Surface	WET

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?	YES
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)	4
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : FEMALE
Passenger 3	NAME: : CHUA HUI XIANG VIVIENNE GENDER: : FEMALE

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 - SINGAPORE CITY
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

REFER TO POLICE REPORT - T/20181019/7008.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP8203Z
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KON HENG SONG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF INJURED PERSON 1

Name	HENG YI XIANG (XING YIXIANG)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLG8721X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	CHUA HUI XIANG VIVIENNE
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SLG8721X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:


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

Accident Sketch Plan

SKETCH PLAN

(A) SLG 8721X

(B) YP 8203Z



BKE towards Woodlands before KJE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref refer to Police Report

NO :

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 Officer's Signature
Name:
Date & Time:

Police Report



**SINGAPORE
POLICE FORCE**



T/20181019/7008

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

1 of 3

Report No. T/20181019/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/10/2018 16:31	Vide Report No.:	Station Diary No.:
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Informant's Particulars				
Name of Informant: HENG YI XIANG			Address: APT BLK 37 BEDOK SOUTH AVENUE 2 #15-469 SINGAPORE 460037	
ID Type / ID No.: NRIC NO / S8413731F			Contact No.: Home/Office: Mobile: 97114106	
Nationality: SINGAPORE CITIZEN			Email: hengyixiang84@gmail.com	
Sex: Male	Age: 34	Date of Birth: 10/05/1984	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Marketing and sales representative (technical)			Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/10/2018 05:55	Type of Location: Straight Road
Location: BKE towards Woodland Before KJE				
Weather: Raining		Road Surface: Wet	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG8721X	Car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	White		0
YP8203Z	Lorry					0

Police Report



**SINGAPORE
POLICE FORCE**



T/20181019/7008

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

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Report No. T/20181019/7008

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG8721X	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100486155-02	17/10/2018	16/10/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	Chua Hui Xiang Vivienne		ID No.	S8607657H
Related Vehicle	SLG8721X (Car)		Contact No.	97114105
Hospital/Clinic	BEDOK MEDICAL CENTRE		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/10/2018		Date Discharge	19/10/2018
No. of Days granted Medical Leave	08		Degree of Injury	Slight
Driver				
Name	HENG YI XIANG		ID No.	S8413731F
Related Vehicle	SLG8721X (Car)		Contact No.	97114106
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 19/10/2018 at around 5.55am, I was driving on BKE towards Woodlands before KJE exit . I was driving my Vehicle SLG8721Z on the straight road at the stated expressway on Lane 1 (extreme right lane). Suddenly, Vehicle YP8203Z, that was driving on the 2nd lane skidded from lane 2 to lane 1. I stepped on my brake however my car couldn't stop in time and my car SLG8721X and YP8203Z collided. My car was seriously damage . There are 3 passengers (2 female (32 yr old & 4 yr old) , 1 male (8 yr old) . I was given 8 days Medical leave & My wife (passenger) was also given 8 days Medical leave

Police Report



**SINGAPORE
POLICE FORCE**



T/20181019/7008

3 of 3

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

Report No. T/20181019/7008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 19/10/2018 16:31
Officer In Charge Of Case: TP / TPHQ / SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476394	Classification Of Case:
Authentication Stamp NP168	

Accident Photo



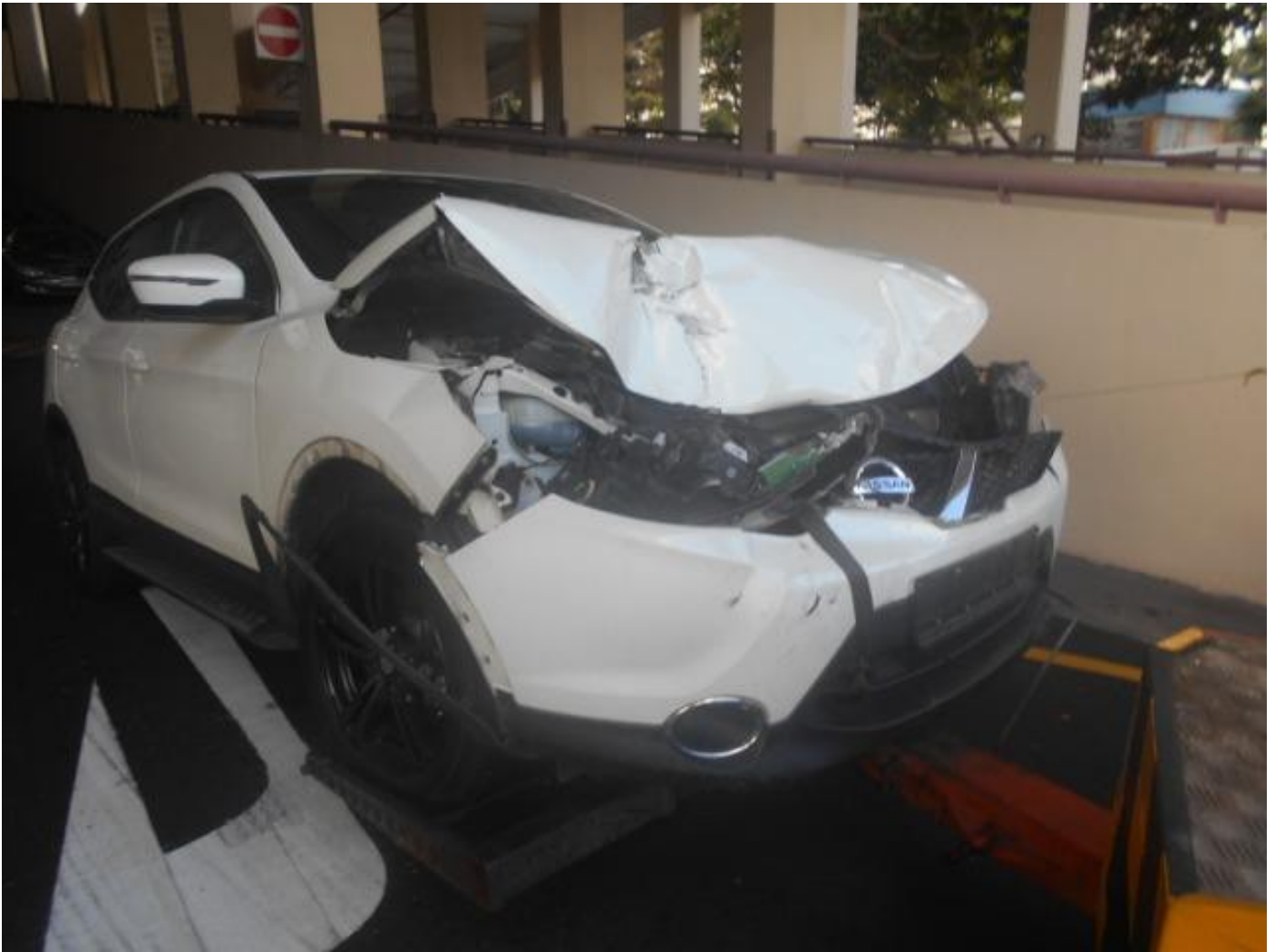
Accident Photo



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