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 witholding 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	29/10/2018 12:34
Date Of Accident	28/10/2018 16:00
Exact Location Of Accident	BLK 319 ANG MO KIO AVE 1 CARPARK
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLG4892L
Insured/Policyholder	
Name Of Registered Owner	TAN BUAN SHENG FREDDY(CHEN WANSHENG FREDDY)
NRIC No	S8305989C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90076616
Alternative Phone No	OTHERS-90076616
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 3
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	2100486339-02
Cover Note Number	
Driver	
Name of Driver	TAN BUAN SHENG FREDDY(CHEN WANSHENG FREDDY)
NRIC No	S8305989C
Date Of Birth	02/03/1983
Occupation	INDOOR
Date Of Driving Pass	09/07/2002
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90076616
Fax Number	
Contact Number	OTHERS-90076616
EMail Address	NOEMAIL

Address	BLK 319 ANG MO KIO AVE 1 #09-1499
Postcode	560319
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	COLLIDED INTO PARKED VEHICLE
Weather Conditions	CLEAR
Road Surface	WET

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)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)
Police Station Address	**ROAD**: 51 ANG MO KIO AVENUE 9 , **POSTCODE:** 569929 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-2180000 - **FAX NO**: 64814246
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

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	GBC7075C
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)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	UNKNOWN
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)	

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SJH4425X
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)	

SKETCH PLAN

IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

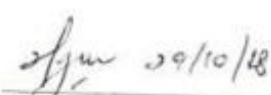
   (e) the information so collected under (d) above may be shared / disclosed:

   (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.:

Individual Statement

SKETCH PLAN

Along Ang Mokio 319 Ave1
Car park.

V. A) SLH4892L
V. B) GBC7075C
V. C) unknown Black car
V. D) unknown Blue/Grey car
V. E) SJH4425X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the Stated date and time, I vehicle 'A' was parked Stationary on the Stated venue. Before I left my vehicle, everything was intact. At around 4pm I went down to retreive my vehicle and came to realise that my vehicle was damaged. There were total 5 cars involved and police were at the scene. Based on the positions of our vehicle, I believed that vehicle 'E' SJH4425X had hit onto vehicle 'D' an unknown grey/blue car, then hit onto vehicle 'C' together with vehicle 'B' GBC7075C which caused vehicle 'B' to hit onto my vehicle front left fender, bumper, bonnet, side mirror, headlamps, rims and rear left door and ~~B~~ fender.

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:

29/10/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

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SINGAPORE POLICE FORCE

POLICE REPORT (NP299)

Report No: F/20181029/7036

Police Station Of Origin
Ang Mo Kio Police Divisional HQ
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No:1800-2160000

Date/Time Report Made	Vide Report No.	Station Diary No.
29/10/2018 16:40		

Name Of Informant	Address
TAN BUAN SHENG, FREDDY	APT BLK 319 ANG MO KIO AVENUE 1 #09-1499 SINGAPORE 560319
ID Type / ID No NRIC NO / S8305989C	Contact No Home/Office: Mobile 90076818
Nationality SINGAPORE CITIZEN	Email Address fredtan83@gmail.com

Occupation	Sex	Age	Date of Birth	Race
Police officer	Male	35	02/03/1983	Chinese

Institution/School Name	Language
	English

Date/Time Of Incident	Location Of Incident
28/10/2018 16:00 - 28/10/2018 16:00	APT BLK 319 ANG MO KIO AVENUE 1 #09-1499 SINGAPORE 560319

Brief details.

On 28.10.2018 at about 1200hrs, I parked my vehicle, SLG4892L at Blk 319 Ang Mo Kio Ave 1 open space carpark lot 469, everything was intact. On the same day at about 1600hrs, when I returned back to my vehicle, I discovered that my vehicle hit by another vehicle which was parked beside mine. My neighbour approached me and informed that about 1500hrs, there was one accident involving one vehicle: SJH4425X. The said vehicle had bang into a total of 4 vehicles including mine. There first two vehicle being knocked by the vehicle were unknown to me and the impact had hit onto the three vehicle.

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required
Not applicable	
Signature Of Interpreter: Not applicable	Date/Time: 29/10/2018 16:40
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

SINGAPORE POLICE FORCE

POLICE REPORT (NP299) CONTINUATION OF REPORT

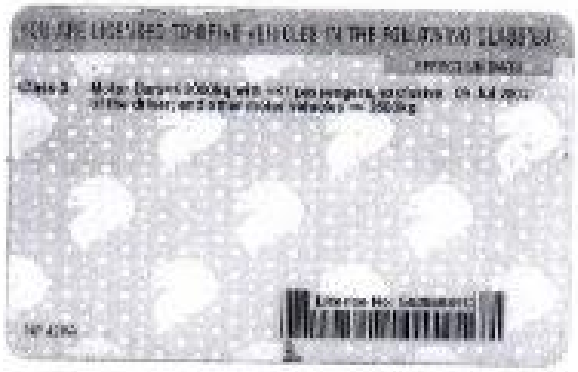
Report No: F/20181029/7036

GBG7075C which was parked at lot 470. Due to the impact, the white van, GBG7075C had hit onto the left side of my vehicle causing my vehicle to be damaged. The damages to my vehicle as follow: 1) Left front bonnet dent 2) scratches on both my left rim 3) scratches on my front and rear left side door. Police had attended to the incident vide F/20181028/0170. I am lodging this report for my insurance claim.

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: 29/10/2018 16:40
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

Identification Card



Addendum Sheet

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: 5665500200 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the **same** Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA1181349991 Vehicle Registration No: SLG4892L

Name(as shown in NRIC) : TAN RUAN SHENG (FREDDY) / CHEN WANSHENG FREDDY) NRIC/FIN/Passport No : S8203989C

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : BLK 319 ANG MO KIO AVE 1 #09-1499 Singapore(560319)

Contact (Tel) : Mobile No. : 90076616

Email Address :

Date of Accident : 28/10/18 Time of Accident : 1600

Place of Accident : BLK 319 ANG MO KIO AVE 1 CARPARK

Insurance Company : AIG

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ADD IN POLICE REPORT : YES

Policyholder / Driver's Signature
Date:

29/10/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: