

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 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	27/05/2017 17:15
Date Of Accident	25/05/2017 19:00
Exact Location Of Accident	PASIR PANJANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKH2533T
Insured/Policyholder	
Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	201504621K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-66944919

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
Exact Purpose for which vehicle was being used at time of accident	HIRER
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	YES
Policy Number	999995174
Cover Note Number	

Driver

Name of Driver	LOH CHEW HON
NRIC No	S2574059I
Date Of Birth	20/08/1965
Occupation	OUTDOOR
Date Of Driving Pass	29/11/1994
Driving Experience	22 YEARS AND 5 MONTHS
Gender	MALE

Mobile Number	(LOCAL) +65-91875965
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL
Address	BLK 46 OWEN ROAD #05-277
Postcode	210046
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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 MOTORCYCLIST
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Was any body injured in the Accident?	YES
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	CAIRNHILL NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 9 GLOUCESTER ROAD , POSTCODE: 210009 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2968999 - FAX NO: 63912398
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO PHOTOS AND POLICE REPORT ATTACHED.

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	FBM188A
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBM188A
Were seat belts worn?	
Was injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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.

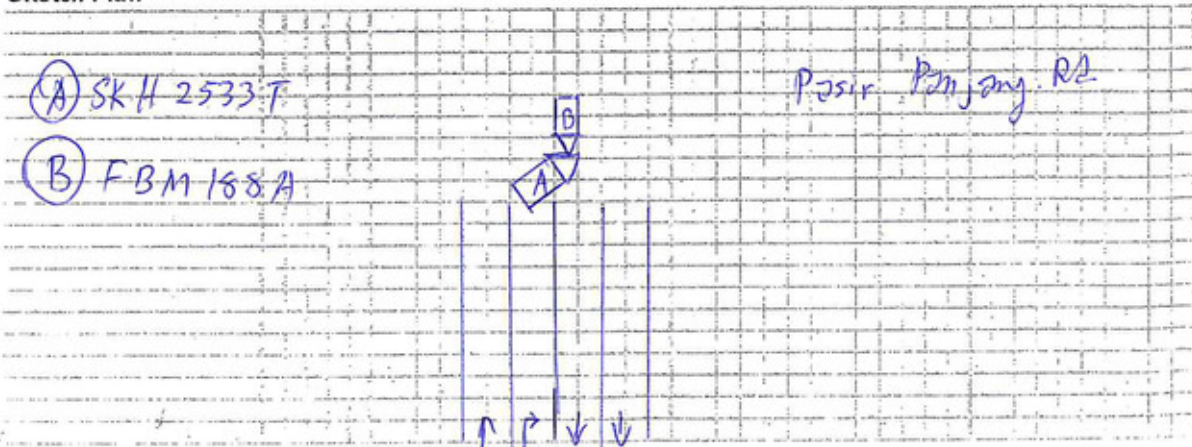


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

Please Refer as per Police Report - T/2017/0526/2118

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

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S25740591



Name
LOH CHEW HON

Race
CHINESE

Date of Birth
20-08-1965

Country of Birth
MALAYSIA

Sex
M

325740591

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number **S25740591**

Name
LOH CHEW HON

Birth Date: **20 Aug 1965**


Issue Date: **05 Dec 2003**

001038008F

8455939



NRIC No. **S25740591**



Nationality
MALAYSIAN

Blood Group **O+** Date of Issue **22-05-2002**

APT BLK 46 OWEN ROAD #05-277
 SINGAPORE 210046
 NRIC No: **S25740591** Date: **12-10-2004** No: **4935122**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class 3 **Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms**

PASS DATE
29 Nov 1994

NP 428A

Licence No: **S25740591**



**SINGAPORE
POLICE FORCE**



T/20170526/2118

1 of 3

Police Station Of Origin:
Cairnhill NPP
9 Gloucester Road #01-03 SINGAPORE
210009
Tel No: 1800-2968999

Report No. T/20170526/2118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/05/2017 17:22		Vide Report No.: T/20170525/2217		Station Diary No.: 20	
Informant's Particulars					
Name of Informant: LOH CHEW HON			Address: APT BLK 46 OWEN ROAD #05-277 SINGAPORE 210046		
ID Type / ID No.: NRIC NO / S2574059I			Contact No.: Home/Office: Mobile: 91875965		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 51	Date of Birth: 20/08/1965	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: DRIVER			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: 25/05/2017 19:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PASIR PANJANG ROAD SOUTH BUONA VISTA ROAD Along Pasir Panjang Road towards South Bouna Vista Road and I was driving on the extreme right of 2 lanes with intention of doing a U-turn towards Pasir Panjang Road at the opposite side of the road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM188A	Motorcycle				Seriously Damaged	0
SKH2533T	Car				Slightly Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20170526/2118

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Police Station Of Origin:
Cairnhill NPP
9 Gloucester Road #01-03 SINGAPORE
210009
Tel No: 1800-2968999

Report No. T/20170526/2118

CONTINUATION OF REPORT

Driver			
Name	LOH CHEW HON	ID No.	S25740591
Related Vehicle	SKH2533T (Car)	Contact No.	91875965
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.

With the reference to the previous report T/20170525/2217, I wish to amend the details in which I was turning right into Science Park Road. I was actually doing a U-Turn on the extreme right lane towards the opposite side of Pasir Panjang Road.

On 25/05/2017 at about 1900hrs, I was driving my vehicle (SKH2533T) along Pasir Panjang Road Towards South Bouna Vista Road and I was driving on the extreme right of 2 lanes with the intention of doing a U-Turn on the extreme right lane towards the opposite side of Pasir Panjang Road. The traffic light was in green and is in my favour without arrow. I inched out slightly and I saw one oncoming unknown car. All of the sudden a motorcycle (FBM188A) came head on to my front bumper of my car but the rider manages to evade slightly to the left side. Side swipe my vehicle and the rider skidded.

I alighted my car and a passerby called for police and ambulance. The ambulance came and conveyed the rider to the nearest hospital. The traffic police gave me a case card D/20170525/0101 and required to lodge a traffic report.

I wish to state that I do have an in built camera but unsure if it records the accident. That is all.



**SINGAPORE
POLICE FORCE**



T/20170526/2118

Police Station Of Origin:
Cairnhill NPP
9 Gloucester Road #01-03 SINGAPORE
210009
Tel No: 1800-2968999

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Report No. T/20170526/2118

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:

A /

Sgt MUHAMMAD AL-BA'ITH BIN MOHAMED
GAZALI

Signature Of Informant:

Date/Time:

26/05/2017 17:22

Signature Of Interpreter:

Not applicable

Classification Of Case:

Officer In Charge Of Case:

TP / GIT /

Sgt KAMALIAH BINTE KAMIS

Contact No.: 65476435

Authentication Stamp
NP168

SN 06



Signature: _____

Singapore Police Force



**SINGAPORE
POLICE FORCE**



T/20170525/2217

Police Station Of Origin:
Cairnhill NPP
9 Gloucester Road #01-03 SINGAPORE
210009
Tel No: 1800-2968999

1 of 3

Report No. T/20170525/2217

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/05/2017 22:09		Vide Report No.:		Station Diary No.: 46	
Informant's Particulars					
Name of Informant: LOH CHEW HON			Address: APT BLK 46 OWEN ROAD #05-277 SINGAPORE 210046		
ID Type / ID No.: NRIC NO / S2574059I			Contact No.: Home/Office: Mobile: 91875965		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 51	Date of Birth: 20/08/1965	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/05/2017 19:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PASIR PANJANG ROAD SOUTH BUONA VISTA ROAD Along Pasir Panjang Road Towards South Bouna Vista Road and I was driving on the extreme right of 2 lanes with the intention of turning right into Science Park Road.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM188A	Motorcycle	HONDA	CB4008J M	Silver	Seriously Damaged	0
SKH2533T	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	White	Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20170525/2217

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Report No. T/20170525/2217

Police Station Of Origin:
Cairnhill NPP
9 Gloucester Road #01-03 SINGAPORE
210009
Tel No: 1800-2968999

CONTINUATION OF REPORT

Driver			
Name	LOH CHEW HON	ID No.	S2574059I
Related Vehicle	SKH2533T (Car)	Contact No.	91875965
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 25/05/2017 at about 1900hrs, I was driving my vehicle (SKH2533T) along Pasir Panjang Road Towards South Bouna Vista Road and I was driving on the extreme right of 2 lanes with the intention of turning right into Science Park Road. The traffic light was in green and is in my favour without arrow. I inched out slightly and I saw one oncoming unknown car. All of the sudden a motorcycle (FBM188A) came head on to my front bumper of my car but the rider manages to evade slightly to the left side. Side swipe my vehicle and the rider skidded.

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T/20170525/2217

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Report No. T/20170525/2217

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:

A /
Cpl MUHAMMAD ALIF BIN ALIAS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /
Sgt KAMALIAH BINTE KAMIS
Contact No.: 65476435

Signature Of Informant:

Date/Time:

25/05/2017 22:09

Classification Of Case:

Authentication Stamp

NP168



Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

