

## 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	16/10/2018 17:19
Date Of Accident	15/10/2018 12:15
Exact Location Of Accident	BLK 202 HOUGANG ST 21 OPEN CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKL2976C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	THANG RONA(TANG RUONA)
NRIC No	S7628022C
Email Address	RTHANG@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91074856
Alternative Phone No	Others-91074856

<b>Vehicle Particulars</b>	
Manufacturer	TOYOTA
Model	WISH
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

<b>Insurance Company</b>	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100435821-02
Cover Note Number	

<b>Driver</b>	
Name of Driver	FAN PO YU @ HELEN FAN ZI XIANG
NRIC No	S2019227E
Date Of Birth	01/01/1948
Occupation	INDOOR
Date Of Driving Pass	24/04/1968
Driving Experience	50 YEARS AND 5 MONTHS

Gender	FEMALE
Mobile Number	(LOCAL) +65-98678826
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	17 SIRAT ROAD
Postcode	545774
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	NO
If Yes,Please state which Police Station	
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	SBV1398G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	

No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

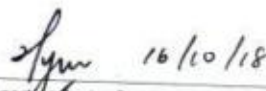
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

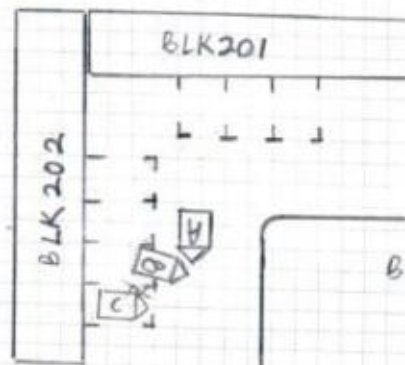


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
16/10/18

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

# SKETCH PLAN



A = SKL 2976C

B = SBV 139BG

C = SBR 162BP

BLK 202 Hougang Street 21  
Open Carpark

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attach

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

*Ran Shun*

Policyholder's Signature  
Date & Time:

*[Signature]*

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

*Sym 16/10/18*

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

On 15.10.18 at about 12:15 hours at BLK 202 Hougang Street 21 Open Carpark. I was leaving from lot 215 at the above mentioned open carpark, while I was completely on the major road, suddenly vehicle (B) coming out from lot 186 without checking the oncoming traffic and collided onto front right hand side portion of my vehicle (A). It was a chain collision of total 3 vehicles involved. When I alighted, driver of vehicle (B) has admitted that she was at fault and asked me to claim against her insurance.

Vehicle (A): SKL 2976C

Vehicle (B): SBV 1398G

Vehicle (C): SBR 1628P

  
Rachana



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



# Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2019227E



NAME  
FAN PO YU  
SHELEN FAN ZI XIANG  
范子湘  
Race  
CHINESE  
Date of Birth  
01-01-1958 Sex F  
Country of Birth  
INDONESIA

AGE 500075

SKL2976C  
Driver.



200x100



REF: S2019227E

17 SERAT ROAD  
SINGAPORE 345774  
MNO No: S2019227E

Date of issue  
11-02-2005

Date: 08/08/12

Mn: 0928744



# Driving License



SKLJ976C

DRIVER

