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 <u>truthful and accurate</u> 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.

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	19/11/2018 11:33
Date Of Accident	17/11/2018 10:50
Exact Location Of Accident	PIE (CHANGI) BEFORE LORNIE ROAD EXIT LANE 2
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLV8079M
Insured/Policyholder	
Name Of Registered Owner	TAN SENG POH
NRIC No	S1479100J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96799229
Alternative Phone No	OTHERS-96799229
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	ATTRAGE-1.2 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800003017
Cover Note Number	
Driver	
Name of Driver	TAN SENG POH

Name of Driver TAN SENG POH
NRIC No S1479100J
Date Of Birth 07/05/1961
Occupation OUTDOOR
Date Of Driving Pass 15/12/1978

Driving Experience 39 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96799229

Fax Number

Contact Number OTHERS-96799229

EMail Address NOEMAIL

Address BLK 330 SERANGOON AVENUE 3

#07-379

Postcode 550330

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 CHAIN COLLISION
Weather Conditions AFTER RAIN

Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Number of vehicles involved in the accident 3
Was any body injured in the Accident? YES
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.

Number of Passengers (Including Driver) 2

Passenger 1 NAME: : PASSENGER

GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name 50 SERANGOON AVE 2

Police Station Address ROAD: 50 SERANGOON AVE 2 #01-02, POSTCODE: 556129, COUNTRY:

SINGAPORE

NO

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181118/2040

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH OWNER

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJV755X

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 2

Vehicle Registration Number

SCK9988Y

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 INJURED PERSON 1

Name TAN SENG POH

Approximate Age

Injuries Sustain SLIGHT INJURY Injured person in which vehicle? SLV8079M

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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

Date & Time:

Reporting Centre Personner spignature

Name:

NRIC/FIN No.:

Accident Sketch Plan

KETCH PLAN	PIR (HAME) BREFORE GRAVIE ROOD EXIT COME 2
-	IBDIADICDIXDI Ist surge > nd Impal formed Impact
SCRIBE CIRCL	JMSTANCES OF THE ACCIDENT
	to police report No = T/2018 1118 /2040
ECLARATION We declare the f	foregoing particulars are true in every respect. M 19/u/2018
olicyholden Sigo ite & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: NRIC/FIN No.:

POLICE REPORT





Police Station Of Origin: Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

81118/2040

Report No. T/20181118/2040

	ate/Time Report Made: 8/11/2018 15:05		Vide Report No.:	Station Diary No.
informa	nt's Particu	dare 1 AS C		
	Informant: NG POH		Address APT BLK 330 SERANGOO SINGAPORE 550330	ON AVENUE 3 #07-379
ID Type NRIC NO	/ ID No.: 0 / S147910	003	Contact No.: Home/Office:	Mobile: 96799229
National SINGAP	ity: ORE CITIZ	EN	Email:	1
Sex: Male	Age: 57	Date of Birth: 07/05/1961	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupat GRAB D	N. 20 C.		Driving Licence Informatio Class: 3	n: Date of Expiry:

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/11/2018 10:50	Type of Location Straight Road
	EXPRESSWAY rards Changi before L	ornie Road Exit Road Surface: Wet	R	load Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		raffic Volume: leavy
Type of Collis chain collision				nyone conveyed by mbulance:

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SCK9988Y	Car	TOYOTA		Maroon	Slightly Damaged	0
SJV755X	Car	HYUNDAI		Grey	Slightly Damaged	0
SLV8079M	Car	MITSUBISHI	ATTRAGE 1.2 CVT	Black	Seriously Damaged	1

Details of Vehicle Insurance		A SUPPLIES OF	Contract of the last
Vehicle No. Insurance Company	Insurance No	Effective	Exply Date

POLICE REPORT





2 of 3

Report No. T/20181118/2040

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129

Tel No: 1800-4880999

CONTINUATION OF REPORT

DECIME OF A	ehicle Insurance	A PROPERTY OF THE PARTY OF THE	THE RESERVE OF THE PARTY OF THE	-
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV8079M	AIG ASIA PACIFIC INSURANCE PTE	1800003017	17/01/2018	16/01/2019

No of Pedestrian	s Injured NIL		Use of Pe	destrian	Cross	ing. NA
Name	TAN SENG POH			ID No		S1479100J
Related Vehicle	SLV8079M (Car)		Conta	ct No.	96799229	
Hospital/Clinic	MOUNT ALVERNIA	HOSPITAL		Class Drivin Licens Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	18/11/2018		Date Disc			/2018
	ted Medical Leave	05	Degree of			

Brief Details.

On 17/11/2018 at about 1050hrs, I was driving my car Black Mitsubishi bearing SLV8079M along PIE towards Changi before Lornie Road Exit on lane 2 with a passenger (relative) on-board. The traffic was heavy but moving smoothly and the road surface was also wet. A maroon Toyota bearing SCK9988Y was in-front of my which suddenly came to a stop causing to a apply jam brake. I managed to stop my car on time. Suddenly a hitting impact came from the rear of my car causing my car to hit onto the maroon car infront of my car. I made a check on my passenger and he was fine. I then came out of my car to make a check and discovered that I was involved in a chain collision involving another Grey Hyundai bearing SJV755X which hit my car from the rear. No one was injured at scene. My car's front and rear suffered damages. I exchanged particulars with the other drivers and left.

On 18/11/2018 at about 0430hrs when I woke up, I felt pain at my back. I then went to Mount Alvernia Hospital to see a doctor and was given 5 days of MC. I am lodging this report for insurance purpose.

POLICE REPORT





3 of 3

Report No. T/20181118/2040

POLICE FORCE Police Station Of Origin:

Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129 CONTINUATION OF REPORT

Tel No: 1800-4880999

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: Signature Of Informan FI Sgt 2 LOGHANATHAN S/O AYYASAMY Signature Of Interpreter: Date/Time: Not applicable 18/11/2018 15:05 Classification Of Case: Officer in Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 65476436 SN 154 Authentication Stamp NP166

ber Lucre Police Force

























