

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	23/09/2019 11:32
Date Of Accident	27/11/2018 13:15
Exact Location Of Accident	PASIR RIS GROVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ342C
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Insured/Policyholder

Name Of Registered Owner	LIM HUEY CHUEN
NRIC No	S7311828Z
Email Address	LIMHUEYCHUEN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92388896
Alternative Phone No	Office-92388896

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA6 2.0L
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	NO
Policy Number	
Cover Note Number	

Driver

Name of Driver	WONG TIM FATT
NRIC No	S7418554A
Date Of Birth	09/06/1974
Occupation	INDOOR
Date Of Driving Pass	11/12/1995
Driving Experience	22 YEARS AND 11 MONTHS

Gender MALE
Mobile Number (LOCAL) +65-92388896

Fax Number

Contact Number

E-Mail Address NOEMAIL

Address 21 TAMPINES CENTRAL 7
#15-23

Postcode 528608

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own Vehicle -
-
-

Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION - U-TURN

Weather Conditions CLEAR

Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)
involved in the accident 2

Was any body injured in the Accident? NO

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. 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 TIONG BAHRU NEIGHBOURHOOD POLICE POST

Police Station Address **ROAD:** BLK 128 KIM TIAN ROAD #01-123/ 125, **POSTCODE:** 160128,
COUNTRY: SINGAPORE

Police Station Contact **TEL NO:** 1800-2739999 - **FAX NO:** 62785651

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHF330X

Vehicle Make/Model/Colour TOYOTA PRIUS

Details Of Properties
Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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:

20/9/19
4.20pm

Driver's Signature

(If driver is not the policyholder)

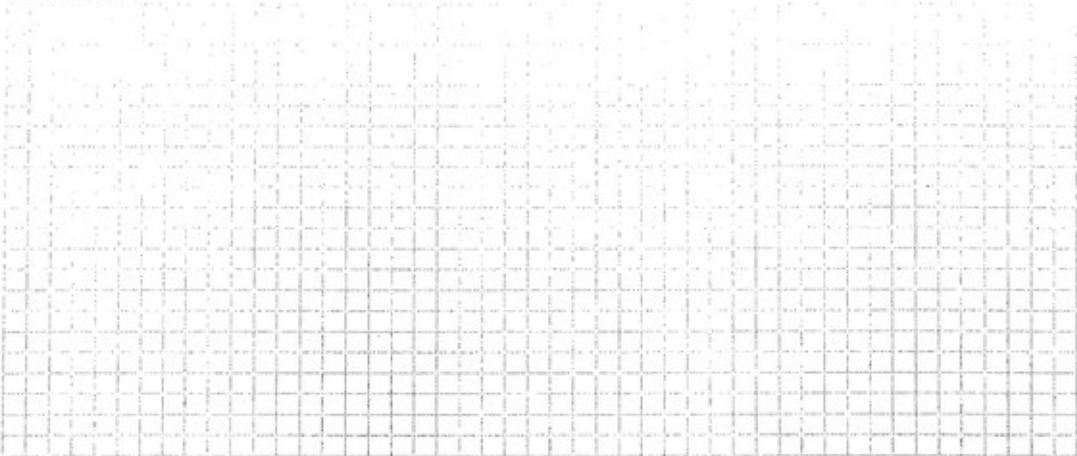
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Driver states :

I was driving along on the outer lane of Pasir Ris Grove on the above-mentioned date at around 1315hrs, as I intended to make a U-turn near the entrance of Coco Palms Condominium, I checked the rear view mirror before filtering to the left lane. As I was ~~turning~~ making a right turn to start the U-turn, I failed to notice vehicle no. SHF 330X in my blind spot. As I continued to turn right, and SHF 330X unable to stop in time, resulting in a low impact collision as both vehicles were travelling at low speed. Both drivers alighted and checked for injuries before inspecting each others' vehicles for damages. As both vehicles did not have major damages, both drivers drove off the scene after exchanging driver license information. This is the end of my account of the incident.

Version of this accident was written by Lim Huey Chuen, Owner of vehicle number SGJ 342C on behalf of driver who is overseas.

Police Report # T/20190920/2118 is attached.

DECLARATION

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

Policyholder's Signature

Date & Time:

20/9/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

4.20pm

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/09/2019 15:22		Vide Report No.:		Station Diary No.: 18	
Informant's Particulars					
Name of Informant: LIM HUEY CHUEN			Address: 21 TAMPINES CENTRAL 7 #15-23 SINGAPORE 528608		
ID Type / ID No.: NRIC NO / S7311828Z			Contact No.: Home/Office: Mobile: 92388896		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 46	Date of Birth: 28/03/1973	Type of Informant: on behalf of husband		
Race: Chinese			Language:		Institution / School Name:
Occupation: SALES EXECUTIVE			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 27/11/2018 13:15	Type of Location: Straight Road
Location: Along Road 1 PASIR RIS AVENUE Pasir ris Grove				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 10 Km/h	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGJ342C	Car	MAZDA		Grey	Slightly Damaged	0
SHF330X	Car				Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGJ342C	AIG ASIA PACIFIC INSURANCE PTE. LTD.			



SINGAPORE
POLICE FORCE



T/20190920/2118

Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

2 of 3

Report No. T/20190920/2118

CONTINUATION OF REPORT

Brief Details.

On the 27th of November 2018, my husband namely Wong Tim Fatt was driving his car SGJ342C along Pasir Ris Grove. He was stationary on the left side of 2 lane road. He wanted to make a U turn along the straight road. There was another Taxi SHF330X along the same road on the right side of his car. As he turned right, his car's right side hit onto the front side of the taxi. There was no injuries reported to both parties. Both vehicles got slight damages. That is all.



SINGAPORE
POLICE FORCE



T/20190920/2118

Police Station Of Origin:
Tiong Bahru NPP
128 Kim Tian Road #01-123 SINGAPORE
160128
Tel No: 1800-2739999

3 of 3

Report No. T/20190920/2118

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 /
Staff Sgt LETCHUMANAN PUVANESWRAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/09/2019 15:22

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168



Signature

Singapore Police Force