

## 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 30/11/2018 14:36  
Date Of Accident 30/11/2018 11:20  
Exact Location Of Accident LOR 6 TOA PAYOH  
Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SGY2882T  
**Insured/Policyholder**  
Name Of Registered Owner LAU LEE CHEN (LIU LICHENG)  
NRIC No S7105562J  
Email Address HUCKFRIEND1@HOTMAIL.COM  
Mobile Phone No (LOCAL) +65-86868366  
Alternative Phone No OFFICE-86868366

### Vehicle Particulars

Manufacturer MERCEDES-BENZ  
Model E250  
Exact Purpose for which vehicle was being used at PRIVATE USE  
time of accident  
Are you claiming under your own insurance policy NO  
for repair to your vehicle?  
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 2100190957-08  
Cover Note Number -

### Driver

Name of Driver LAU LEE CHEN (LIU LICHENG)  
NRIC No S7105562J  
Date Of Birth 20/02/1971  
Occupation INDOOR  
Date Of Driving Pass 09/11/1990  
Driving Experience 28 YEARS AND 0 MONTHS  
Gender MALE  
Mobile Number (LOCAL) +65-86868366  
Fax Number  
Contact Number OFFICE-86868366  
EMail Address HUCKFRIEND1@HOTMAIL.COM

Address	6 JLN BELIBAS
Postcode	578658
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	COLLISION - HEAD TO REAR
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?	YES
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)	2
Passenger 1	NAME: : TAN SOEK KEE GENDER: : FEMALE

#### 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

I WAS TRAVELLING ALONG LOR 6 TOA PAYOH WHILE APPROACHING A BUS STOP, VEH INFRONT OF ME STOP, AS SUCH I FOLLOW TO STOP. ALL OF A SUDDEN, I FELT AN IMPACT FROM BEHIND. AFTER THE INCIDENT, I ALIGHTED FROM MY VEH AND REALIZED THE TAXI FROM BEHIND COLLIDED ONTO MY VEH REAR PORTION.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HAVENT RETRIEVE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA1020K
Vehicle Make/Model/Colour	
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)

**DETAILS OF INJURED PERSON 1**

Name TAN SOEK KEE

Approximate Age

BODY

Injuries Sustain

SGY2882T

Injured person in which vehicle?

YES

Were seat belts worn?  
Was this injured conveyed to hospital by  
ambulance?

NO

Address

Postcode

## 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.

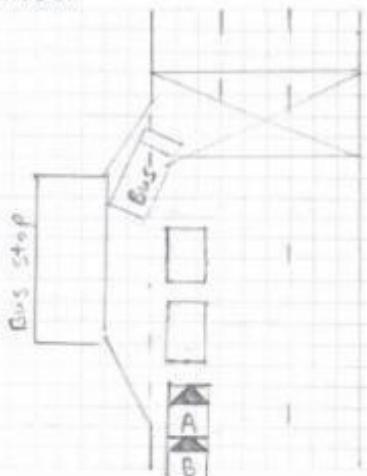
  
Policyholder's Signature  
Date & Time:

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

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

## Accident Sketch Plan

### SKETCH PLAN



A = SGY 2882T  
B = SHA 1020 K

LOR C Tiong Payoh

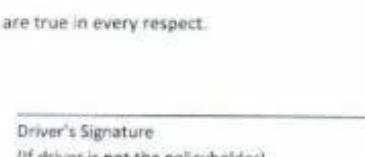
### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

### 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:

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

DRIVING DOC

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7105562J



LAU LEE CHEN  
(LIU LICHENG)

刘礼诚

Name:

CHINESE

Date of Birth:

20-02-1971

Sex:

M

Country of Birth:

SINGAPORE



0067091

Identity Card No.

S7105562J

Residence Address:

0 JALAN BELIBAS

SINGAPORE 570658

SIHC No.:

S7105562J

Date of Issue:

01-09-1991

Date:

29/03/2009

No.:

833528H

REPUBLIC OF SINGAPORE DRIVING LICENCE

License No. S7105562J

LAU LEE CHEN  
(LIU LICHENG)

Date of Birth: 20 Feb 1971

Issue Date: 04 Nov 2003



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

09 Nov 1996

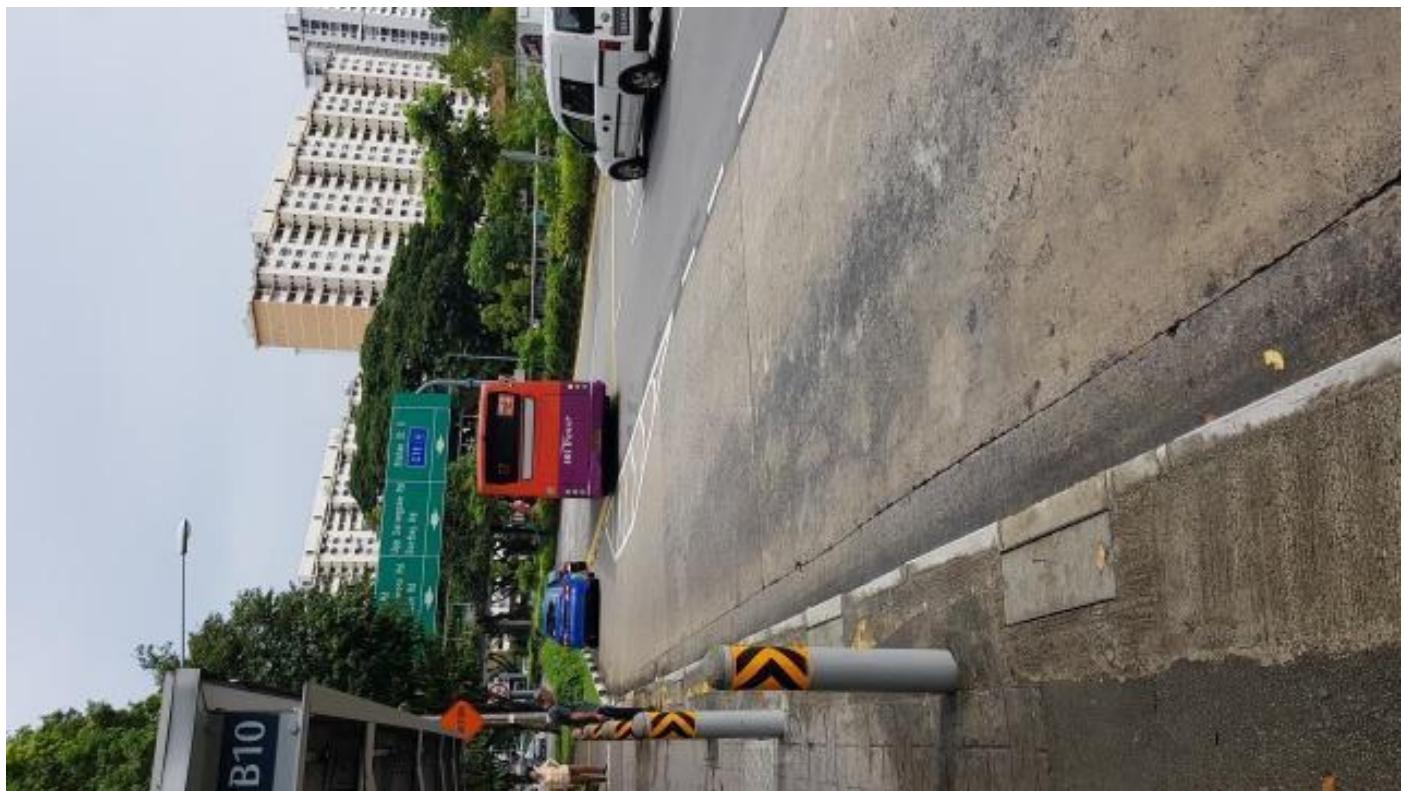
License No. S7105562J

NP 4204

Accident Photo



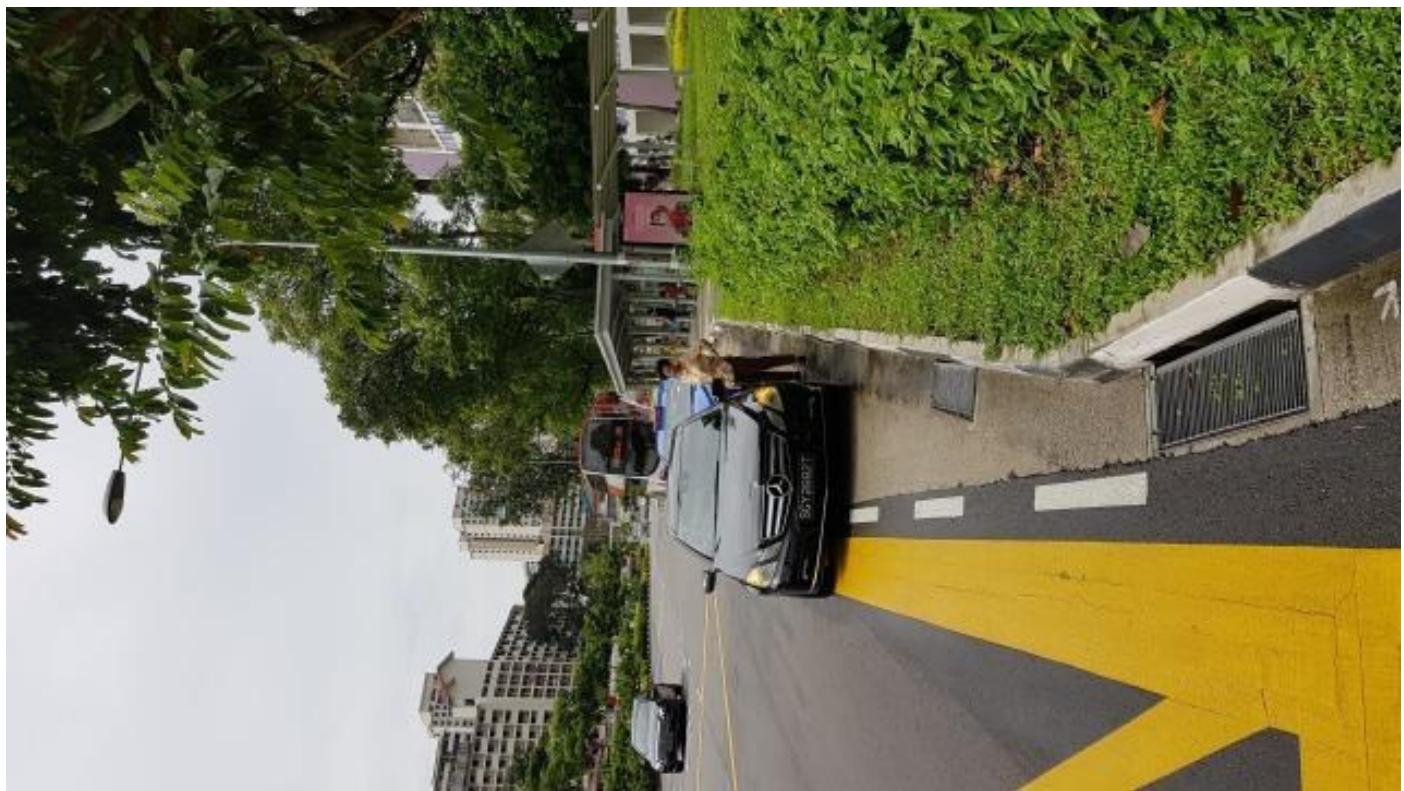
Accident Photo



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