MNA118160680 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 13/12/2018 10:29 SUBMITTED BY: Jackson Ho Zhao Tian

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 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.	
	ACCIDENT STATEMENT
Date Of Report	13/12/2018 10:29
Date Of Accident	10/12/2018 02:00
Exact Location Of Accident	JB TWDS WOODLANDS CHECKPOINT
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLS6781Y
Insured/Policyholder	
Name Of Registered Owner	GUO XIAOLAN
NRIC No	S7862917G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96272617
Alternative Phone No	OFFICE-96272617
Vehicle Particulars	
Manufacturer	TOYOTA
Model	C-HR HYBRID 1.8 ICON CVT
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	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	1800113571
Cover Note Number	
Driver	

LANNY XIAOLAN GUO Name of Driver

NRIC No S7862917G 07/05/1978 Date Of Birth Occupation **INDOOR Date Of Driving Pass** 23/06/2011

Driving Experience 7 YEARS AND 5 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-96272617

Fax Number

Contact Number OFFICE-96272617

EMail Address NOEMAIL Address BLK 278B COMPASSVALE BOW

#12-561

Postcode 542278

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

NO

General Information of the Accident

Type Of Accident COLLISION - CHANGE/CROSS LANE

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles 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.

Number of Passengers (Including Driver) 4

Passenger 1 NAME:

GENDER: : MALE

Passenger 2 NAME: : -

GENDER: : MALE

Passenger 3 NAME: : -

GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name HOUGANG NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 60 HOUGANG AVE 9, POSTCODE: 538775, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-4890999 - **FAX NO**: 63128989

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - F/20181212/2103.

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

SLV757S

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) 2

Passenger 1 NAME:

GENDER:

Accident Sketch Plan

SKETCH PLAN

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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 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

KETCH PLAN			
T.		A: SUSG7814	
isa .		B: SEVANAS.	
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SCRIBE CIRCUMSTANC	ES OF THE ACCIDENT		
refer to the	ce report = F/20181212	Inol.	
To have			
		/	
CLARATION			
Ve declare the foregoing par	rticulars are true in every respect.		
and	Driver Communication	Jan Jan	
icyholder's Signature te & Time:	Driver's Signature (If driver is not the policyh Date & Time:	Reporting Centre Personnel's Sig Name; NRIC/FIN No.:	nature



POLICE REPORT (NP299)

Police Station Of Origin Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No. 1800-4890999



Report No. F/20181212/2103

Date/Time Report Made 12/12/2018 21:49	Vide Report No.			Station Diary No.	
Name Of Informant LANNY XIAOLAN GUO	Address APT BLK 278B COMPASSVALE BOW #12-561 SINGAPORE 542278				
ID Type / ID No. NRIC NO / S7862917G	550000000000000000000000000000000000000	Contact No. Home/Office		Mobile 96272617	
Nationality SINGAPORE CITIZEN	Email Address				
Occupation	Sex	Age	Date of Birth	Race	
TMANAGER	Female	40	07/05/1978	Chinese	
nstitution/School Name	Language English				
Date/Time Of Incident 0/12/2018 02:00	At the immigrations checkpoint at Malaysia MALAYSIA				

Brief details.

On 10/12/2018 at about 0200hrs, I was at the Malaysia customs going back to Singapore. I was waiting for my passport to get checked at the Malaysian customs. I was in my car (white Toyota, SLS6781Y) with my husband and 2 children and we were waiting in line for our turn. There are 3 lanes and my car was in the middle lane.

As I was waiting, a car (black Subaru, SLV757S) in the right lane beside me suddenly hit my car on the

Signature Of Officer Recording The Report F / Insp JUSTINA PANG BI XUE

SN 085

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: F / Hougang N.P.C / SI WEE KIM HUAT, LEONARD Contact No.: 64890999

Authentication Stamp

Signature:

Singapore Police Force

Signature Of Informant:

Date/Time:

12/12/2018 21:49

Classification Of Case:



2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20181212/2103

driver's side. My husband got off the car to talk to the driver and the driver did not want to get out of his car, however, he did lower his window and started shouting at my husband. After a while, my husband came back and the car overtook us and went in front of us

No one was injured and my car has an approximately 30cm scratch on the driver's side of the car.

I am lodging a report for record purposes.

Signature Of Officer Recording The Report:

F / Insp JUSTINA PANG BI XUE

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: F / Hougang N.P.C / SI WEE KIM HUAT, LEONARD Contact No.: 64890999

Authentication Stamp

Signature:

SN 085

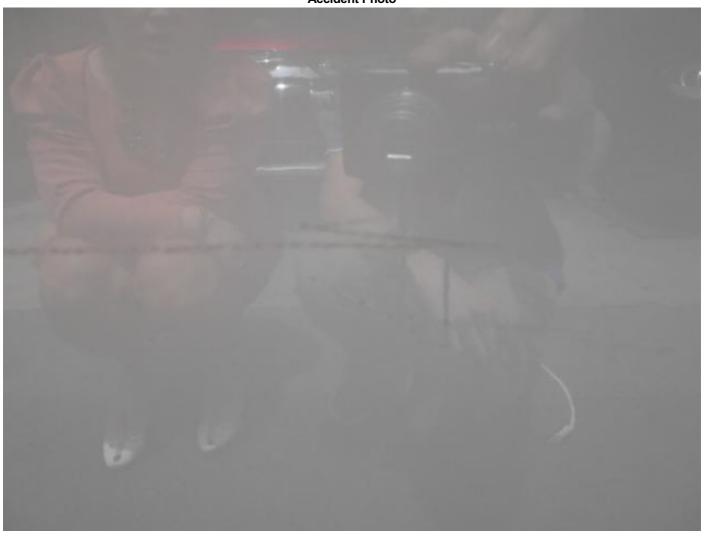
Singapore Police Force

Signature Of Informant:

Date/Time: 12/12/2018 21:49

Classification Of Case:

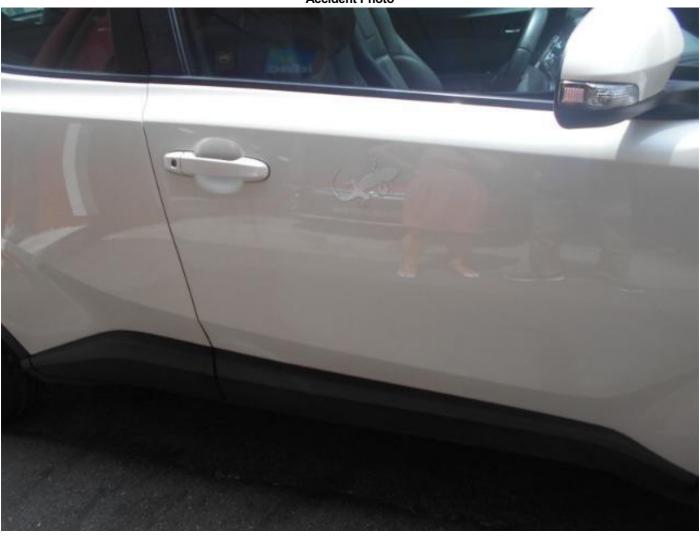


















Accident Photo

