

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	28/02/2019 12:39
Date Of Accident	24/02/2019 20:40
Exact Location Of Accident	ECP NEAR CHANGI AIRPORT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ5451S
-----------------------------	----------

Insured/Policyholder

Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	LIXUEWAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92298709
Alternative Phone No	OFFICE-92298709

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
Exact Purpose for which vehicle was being used at time of accident	TO PICK UP WIFE FROM AIRPORT
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	999994316
Cover Note Number	

Driver

Name of Driver	WAN LUXIE
Passport No/FIN	G5068375W
Date Of Birth	04/01/1977
Occupation	INDOOR
Date Of Driving Pass	18/07/2011
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92298709
Fax Number	
Contact Number	OTHERS-92298709
Email Address	LIXUEWAN@GMAIL.COM

Address	BLK 85 JURONG WEST CENTRAL 3 #16-45
Postcode	648342
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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 (including own vehicle) involved in the accident	2
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?	YES
If Yes, Please state which Police Station	
Police Station Name	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20190225/2181

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?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD1214C
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)

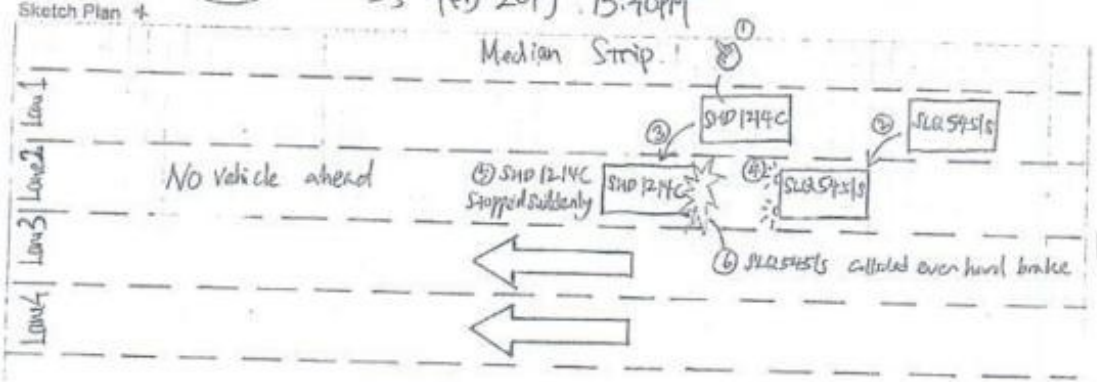
Accident Sketch Plan

SKETCH PLAN

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 Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to renege on 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.
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' law firms/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/small 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' law firms/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 law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


 Policyholder's Signature: [Signature] & Time: 25-Feb-2019 13:40PM
 Driver's Signature (if driver is not the policyholder) / Date: [Signature] / 25-Feb-2019 13:40PM
 Witnessed by Reporting Centre Personnel: [Signature] / 28/02/2019

Sketch Plan: 

ECP NEAR CTAHANGI AIRPORT

Accident Sketch Plan

Describe Circumstance of the Accident *

Around 20:40, in the evening of 24-Feb, I was on the way to Changi Airport. Just in front of the entrance of airport, I found a taxi behind me always using high beam. I thought it was dangerous and not allowed. So, I flashed the taxi twice when it was in front of me later.

However, it looked the flash irritated the taxi driver. He shown me his middle finger. And I decided to ignore the provocation. I changed lane from inner lane to middle lane.

The taxi, again, cut in front of me from inner lane to middle lane as well. Also, the taxi stopped suddenly in middle lane. (From attached footage, It is clear show the taxi cut in and stopped, although, there is no vehicle in front of Taxi.)

I high beam the taxi and step brake immediately. However, the bang still happened, due to short distance.

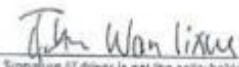
After the bang / collision, both of us got off car, took pictures and left. No other conflicts. Minor damages on bumper of both cars. POLICE REPORT T/20190225/2681

Declaration

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


Policyholder's Signature



* 
Driver's Signature (if driver is not the policyholder) / Date
& Time 25-Feb-2019

13:40

 28/02/2019
Witnessed by Reporting Centre Personnel

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190225/2181

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 3

Report No. T/20190225/2181

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2019 18:56		Vide Report No.:		Station Diary No.: 175
Informant's Particulars				
Name of Informant: WAN LIXUE		Address: APT BLK 85 JURONG WEST CENTRAL 3 #16-45 THE CENTRIS SINGAPORE 648342		
ID Type / ID No.: FIN NO / G5068375W		Contact No.: Home/Office: Mobile: 92298709		
Nationality: CHINESE		Email:		
Sex: Male	Age: 42	Date of Birth: 04/01/1977	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Civil engineer (general)		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 24/02/2019 20:40	Type of Location: Straight Road
Location: Along Road 1 EAST COAST EXPRESSWAY				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD1214C	Car				Slightly Damaged	0
SLQ5451S	Car				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190225/2181

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 3

Report No. T/20190225/2181

CONTINUATION OF REPORT

Driver			
Name	WAN LIXUE	ID No.	G5068375W
Related Vehicle	SLQ5451S (Car)	Contact No.	92298709
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I was driving SLQ5451S along East Coast Parkway towards Changi airport on 24/02/2019 at 2040 hours. Suddenly a taxi SHD1214C cut in front of me from my left. He pointed the middle finger at me. I did not want to get involve in any argument as such I changed to the lane on my left. The taxi cut into my left lane as well and did a hard brake. I did a hard brake but did not manage to stop on time. I collided into the rear of SHD1214C. My front license plate got a slight dent while his rear bumper was also dented in slightly. There was no vehicle in front of taxi SHD1214C and it is clearly he brake on purpose with intention to cause an incident.

I alighted and took photos of the damage on both vehicles involve in the incident. I wish to state I have an in car camera that captured the incident.

I am lodging this report for my insurance company follow up action

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190225/2181

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

Report No. T/20190225/2181

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:

J/

Sgt 2 KOH ZHI ZHONG ABRAM

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Authentication Stamp

NP168



Signature:

Singapore Police Force

Signature Of Informant:

T/42

Date/Time:

25/02/2019 18:56

Classification Of Case:

REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number: **G 5068375 W**
Name: **WAN LIXUE**

Birth Date: **04 Jan 1977**
Issue Date: **09 Jun 2016**
Valid Till **17/07/2021**





 002575972H

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	18 Jul 2011

NP 428A



ID

EMPLOYMENT PASS
Employment of Foreign Manpower Act (Chapter 21A)
Republic of Singapore

Employer:
DREDGING INTERNATIONAL ASIA PACIFIC PTE LTD

 Name:
WAN LIXUE
Occupation:
PROJECT ENGINEER

FEI:
G5068375W

Date of Application:
24-08-2016
Date of Issue:
01-09-2016
Date of Expiry:
15-11-2019



 L7177731

VISIT PASS
Immigration Regulations

Name:
WAN LIXUE



Date of Birth: 04-01-1977 Sex: M Nationality: CHINESE
FEI: G5068375W Date of Issue: 01-09-2016 Date of Expiry: 15-11-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

