

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	30/05/2019 14:33
Date Of Accident	24/05/2019 21:30
Exact Location Of Accident	BUKIT TIMAH ROAD OPEN CAR PARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ184Y
Insured/Policyholder	
Name Of Registered Owner	CHRISTOPHER ANDREW BRANDON
NRIC No	S7389275I
Email Address	CBRANDON@SHICON.COM
Mobile Phone No	(LOCAL) +65-97573597
Alternative Phone No	OTHERS-97573597

Vehicle Particulars

Manufacturer	AUDI
Model	RS 5 4.2 TFSI QU
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1581539
Cover Note Number	-

Driver

Name of Driver	CHRISTOPHER ANDREW BRANDON
NRIC No	S7389275I
Date Of Birth	10/07/1973
Occupation	INDOOR
Date Of Driving Pass	03/04/2008
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97573597
Fax Number	
Contact Number	OTHERS-97573597
Email Address	CBRANDON@SHICON.COM

Address	27 YARWOOD AVE
Postcode	587999
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

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

PLEASE REFER TO POLICE REPORT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SCM4025Z
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)	

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: 29/5/2018
Han

GIA/ME Sketch Plan Form_V3

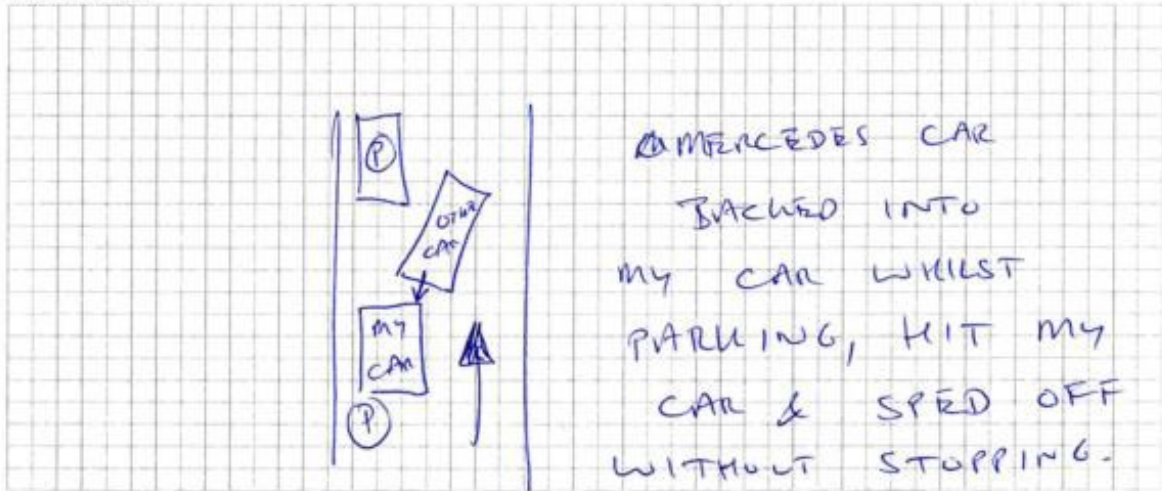
Driver's Signature
(If driver is not the policyholder)
Date & Time:



Reporting Centre Personnel's Signature
Name: Tony Foong
NRIC/FIN No.: 62040147X

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Attached
Police Report

DECLARATION

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


Policyholder's Signature
Date & Time: 29/1/19
GUARMC SketchPlanForm_V3
11a

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



Reporting Centre Personnel's Signature
Name: Tony Lim
NRIC/FIN No.: G2040197X

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



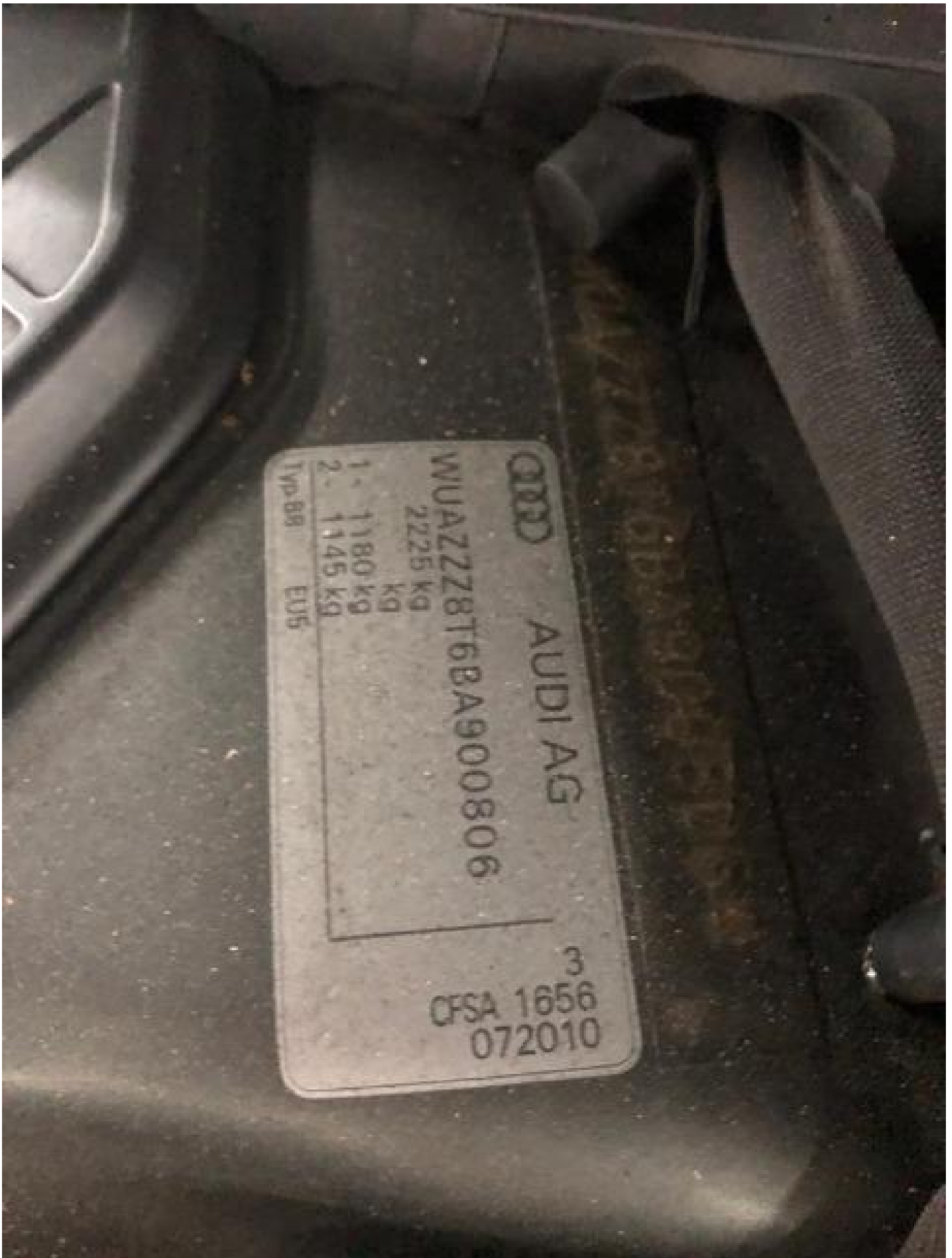
Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190525/2069

1 of 3

Police Station Of Origin:
Bukit Timah NPP
1 Teh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689899

Report No. T/20190525/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/05/2019 12:23			Video Report No.:		Station Diary No.: 10
Informant's Particulars					
Name of Informant: CHRISTOPHER ANDREW BRANDON			Address: 27 YARWOOD AVENUE SINGAPORE 587999		
ID Type / ID No.: NRIC NO / S7389275I			Contact No.: Home/Office: Mobile: 97573597		
Nationality: BRITISH			Email:		
Sex: Male	Age: 45	Date of Birth: 10/07/1973	Type of Informant: Driver		
Race: Caucasian			Language:	Institution / School Name:	
Occupation: FINANCE			Driving Licence Information: Class: Date of Expiry:		

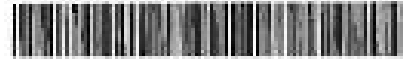
General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/05/2019 21:30	Type of Location: Car Park
Location: Along Road 1 BUKIT TIMAH ROAD				
At the open car park of Bukit Timah Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SCM4025Z	Car					0
SJZ184Y	Car				Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20180525/2058

2 of 3

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 581501
Tel No: 1800-4889999

Report No: T/20180525/2058

CONTINUATION OF REPORT

Brief Details.

I am the driver for vehicle bearing registration no: SJZ184Y.

On 24/05/2019 at about 2000hrs, I parked my vehicle at the open parallel carpark for my dinner around the corner.

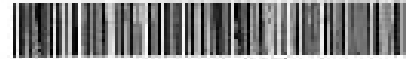
On the same day at about 2130hrs, I went back to my vehicle and was approached by a person namely Kenneth with HP 96847476 gave me a note and informed that he witnessed someone colliding into my vehicle when he was reversing but did not stop. Therefore, he took a photograph of the said vehicle.

I wish to state that my vehicle sustained a cracked at the front right of my bumper. My vehicle does not have a in car built camera too.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190525/2069

3 of 3

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4889899




Report No. T/20190525/2069

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: D / Sgt 1 WONG JUN LI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/05/2019 12:23
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476802	Classification Of Case:
Authentication Stamp NP168	 SINGAPORE POLICE FORCE  SN 38 SIGNATURE