# 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	29/05/2019 16:56
Date Of Accident	28/05/2019 21:00
Exact Location Of Accident	BLK 345 ANG MO KIO AVE 3
Country/State of Loss	SINGAPORE

# DETAILS OF OWN VEHICLE

Vehicle Registration Number SJE7691P

)sured/Policyholder

Name Of Registered Owner KWONG MUN FAI AARON

NRIC No S7637167I

Email AddressAKWONG3@MMM.COMMobile Phone No(LOCAL) +65-90885707Alternative Phone NoOFFICE-90885707

Vehicle Particulars

Manufacturer HONDA

Model CROSSROAD-1.8 (A)

Exact Purpose for which vehicle was being used at

time of accident

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

AIG ASIA PACIFIC INSURANCE PTE, LTD.

Type Of Coverage THIRD PARTY FIRE AND/OR THEFT

Fleet Policy NO

Policy Number 2100509198-02

Cover Note Number

Driver

Name of Driver KWONG MUN FAI AARON

 NRIC No
 \$76371671

 Date Of Birth
 21/11/1976

 Occupation
 INDOOR

 Date Of Driving Pass
 07/03/2003

Driving Experience 16 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90885707

Fax Number

Contact Number OFFICE-90885707

EMail Address AKWONG3@MMM.COM

Address BLK 308A ANG MO KIO AVE 1#18-417

Postcode 561308

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

COLLISION - HEAD TO REAR Type Of Accident

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

Vas 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

2

Number of Passengers (Including Driver)

Passenger 1

NAME: : PASSSENGER 1

GENDER: : FEMALE

**Details of Police Action** 

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE

ROAD: 81 ANG MO KIO AVE 3, POSTCODE: 569929, COUNTRY: Police Station Address

**SINGAPORE** 

Police Station Contact TEL NO: 1800-4519999 - FAX NO: 65535679

NO

√as notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

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 Witness 1** 

Name MR SENTHIL Phone Number 94604885

**Email Address** 

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

EM21L Vehicle Registration Number Vehicle Make/Model/Colour BMW X3

**Details Of Properties** 

Vehicle Category PRIVATE CAR Name of Driver

GARY

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Sketch Plan Pg. 1

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SKETCH PLAN		s.
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DECLARATION		1 .
	on the other and and an	1 1/18
I/We declare the foregoing particulars ar	e true in every respect.	1 - 991314-
1 _	b -	/ [ "[' ]
	Driver's Signature	Reporting Centre Personnel's Signature
	(If driver is not the policyholder) Date & Time: 2호 VV ~ 구역	Name: NRIC/FIN No.:
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1 of 2

Report No. F/20190529/2063

# POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

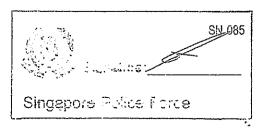
Date/Time Report Made	Vide Report No.		Station Diary No.	
29/05/2019 11:48				37
Name Of Informant	Address			
KWONG MUN FAI AARON	APT BLK 308A ANG MO KIO AVENUE 1 #18-417			
`	SINGAPORE 561308			
ID Type / ID No.	Contact	Contact No.		
NRIC NO / S7637167I	Home/Office Mobile		Mobile	
			90885707	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation	Sex	Age	Date of Birth	Race
LOGISTIC	Male	42	21/11/1976	Chinese
Institution/School Name	Language English			
Date/Time Of Incident	Location Of Incident			
28/05/2019 21:00	345 ANG MO KIO AVENUE 3 TECK GHEE			
	EVERGREEN SINGAPORE 560345			
	Pickup/ Drop off point			

# Brief details.

On 28/5/2019 at about 2100hrs, I was waiting in my car bearing registration plate (SJE7691P) at Blk 345 Ang Mo Kio Pick up and drop off point. Suddenly, a Black BMW bearing registration plate (EM21L) drove into the pick up point and started reversing. I sounded my horn however, the other driver continued to reverse. As a result, the rear of his car collided into the front portion of my car. I immediately stepped out of my vehicle, however, the driver started to drive off. I chased on foot and managed to stop him at a

Signature Of Officer Recording The Report:	Signature Of Informant:	
F / Sgt 2 JEREMY KHOO WEI LIANG		
Signature Of Interpreter: Not applicable	Date/Time: 29/05/2019 11:48	
Officer In-Charge Of Case: F / Ang Mo Kio South N.P.C / Sgt 2 JEREMY KHOO WEI LIANG Contact No.: 64519999	Classification Of Case:	

Authentication Stamp







70529/2063

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190529/2063

dead end. I then told the driver that he had reversed into my car. However, he denied doing so. I then told him that there was an eye witness who saw the entire accident. The other driver than proceeded back to the pickup point where we took photo of the damages and exchange phone number(Gary, Hp: 92741170).

On 29/5/2019 in the morning, I brought my car to the workshop. The staff told me that there are cracks on the front bumper and the grill. The Workshop then told me that they needed a police report as the other party was in denied. They will then give the report to the insurance company for them to take action.

The witness provided his name and contact details: Senthil, Hp: 94604885.

Signature Of Officer Recording The Report:

F / Sgt 2 JEREMY KHOO WEI LIANG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio South N.P.C /
Sgt 2 JEREMY KHOO WEI LIANG
Contact No.: 64519999

Authentication Stamp

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#### Sketch Plan Pg. 4

#### SKETCH PLAN

# **IMPORTANT NOTICE**

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- 5. Any false reporting may be referred to the Police for investigation.
- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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  interested parties.
- 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:
  - 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: 29 N

Driver's Signature

(If driver is not the policyholder)

Date & Time: 29 May

Son Wil

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# EDITINGUICHTIEO ETREO ETRE

Issued Date

# PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder : Kwong Mun Fai Aaron (Kuang Wenhui) Period of Insurance : 07 May 2019 To 06 May 2020

Engine No. : R18A3010516 Chassis No. : RT11007731

: SJE7691P Policy No. : 2100509198-02 Endorsement No. : 000000000267273

: 27 Mar 2019

ABOUT THE COVER

Make/Model : HONDA CROSS ROAD

Engine Capacity/Tonnage : 1,800.00 CC Sum Insured : Market Value First Year of Registration : 2008 Driver Restriction : NA Insuring with COE/PARF : Yes Off Peak Car : No

Person or Classes of Persons Entitled to Drive\*:

a) The Policyholder
b) Any other person who is diving on the Policyholder's order or with his/her permission.
This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

Age Condition : 35 years old and above

Limitation as to use\*

Use only for social, demostic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, diming tuition, driving test, racing, pace-making, reliability trief or speed-testing, the compage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

\* Limitations rendered inoparative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cop. 189) and Section 95 of the Rood Transport Act, 1997 (Malaysia), are not to be included under these headings.

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Section 1 Fire - SO Thatt - SO

Section 2 Property Demoge - \$0

Windscreen : NA

Named Driver and Excess (where applicable)

Kwong Mun Fal Alvin Agren

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotine at +65 6338 6200. Alternatively, you may refer to AIG wabsite www.aig.com.sg or AIG SG Mobile App. Simply search and download "AIG SG" from Trunes or Geogle Play.

Hire Purchase Company/Employer's Loan: NA

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in eccordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cop. 189), Part IV of the Read Transport Act, 1987 (Actoria) and Motor Vehicles (Third Party Risks) Rules, 1659 (Actoria).

0503181000

NG SHIH PING GERALDINE BLK 154 YISHUN STREET 11 #05-80 SINGAPORE 760154 SP-LAWRENCE Underwritten by AIG Asia Pacific Insurance Pte, Ltd.

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