SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

EMail Address

Fax Number
Contact Number

- 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 <u>truthful and accurate</u> 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	23/07/2019 10:38
Date Of Accident	14/05/2019 13:30
Exact Location Of Accident	BEDOK NORTH AVE 4 CARPARK LOT 78
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLX8053B
Insured/Policyholder	
Name Of Registered Owner	CHAN CHAK SOON
NRIC No	S2171663D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98342115
Alternative Phone No	OFFICE-98342115
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	E200
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	1800036220-01
Cover Note Number	-
Driver	
Name of Driver	CHAN CHAK SOON
NRIC No	S2171663D
Date Of Birth	21/12/1958
Occupation	INDOOR
Date Of Driving Pass	07/04/1997
Driving Experience	22 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-083/2115

(LOCAL) +65-98342115

OFFICE-98342115

NOEMAIL

BLK 91 BEDOK NORTH ST 4 #03-1519 Address

Postcode

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 **COLLIDED INTO PARKED VEHICLE**

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?

YES

NO

2

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : UNKNOWN

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes.Please state which Police Station

YES

Police Station Name BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

ROAD: 30 BEDOK NORTH ROAD, POSTCODE: 469676, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 1800-2449999 - FAX NO: 62447258

Was notice of intended Prosecution given?

If Yes, against whom?

NO

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 **SLT9777K**

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

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Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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:
 - (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

CH PLAN				
	A B		A = 51× 9 B = 517 9	
		Brdok M	lorth Ave 4 Car	park
RIBE CIRCUMSTANCES	OF THE ACCIDENT			
Please	Refer	to	Police Rep	ort
			/	
PATION				
RATION sclate the foregoing partic	rulars are true in every r	respect.	the	
older Signature	Driver's Signature (if driver is not th		Reporting Centre Personn Name:	el's Signature

POLICE REPORT





1 of 3

Report No. T/20190604/2176

Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

REPORT OF	A TRAFFIC	ACCIDENT		Station Diary No.	
Date/Tim 04/06/20	Date/Time Report Made: 04/06/2019 17:00		Vide Report No.:	96	
Informar	t's Particu	lars			
Name of	Informant: HAK SOON		Address: APT BLK 91 BEDOK NORTH SINGAPORE 460091	H STREET 4 #03-1519	
ID Type	ID Type / ID No.: NRIC NO / S2171663D		Contact No.: Home/Office:	Mobile: 98342115	
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 60	Date of Birth: 21/12/1958	Type of Informant: Driver	La Walter / School Name:	
Race: Chinese	Race:		Language: English	Institution / School Name:	
Occupat	Occupation: SELF-EMPLOYED		Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 14/05/2019 13:30	Type of Location Car Park	
	RTH AVENUE 4	Road Surface.	F	toad Speed Limit:	
Clear Traffic Flow:		Traffic Control: Not Controlled	1	Traffic Volume: No Traffic	
Two Way Type of Colli Unsure	sion:	HOI SOMMOND	8	Anyone conveyed by ambulance:	

MANAGER AND STREET		Model	Color	Condition	No of Passenge
Type	Control of the Contro	CE SANDAM PARTY	Cilver	No	0
Car			Silver	Damage	
	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TW	E200 AVG	Black	No	1
Car		THE RESERVE OF THE PARTY OF THE	Didon	Damage	123
	Type Car	Car MERCEDES BENZ	Type Make Model Car MERCEDES BENZ Car MERCEDES E200 AVG	Type Make Model Color Car MERCEDES BENZ Silver Car MERCEDES E200 AVG Black	Type Make Model Color Color Car MERCEDES BENZ Silver Damage No Damage Car MERCEDES E200 AVG Black No Damage

	ehicle Insurance	Insurance No	Effective	Expiry Date
Charles and the same of the sa	AIG ASIA PACIFIC INSURANCE PTE.		12/04/2019	11/04/2020
SLX8053B	AIG ASIA FACIFIC INCOTOTION	140000000000000000000000000000000000000		

POLICE REPORT





Police Station Of Origin: Bedok North N.P.C

Report No. T/20190604/2176

2 of 3

30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

CONTINUATION OF REPORT

Any Pedestrian In	volved: No					
No. of Pedestrian			Use of Pe	destriar	Cross	ing: NA
Driver.						
Name	CHAN CHAK SOON	N		ID No	la.	S2171663D
Related Vehicle	SLX8053B (Car)		Conta	ct No.	98342115	
Hospital/Clinic	NIL			Class Drivin Licene Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	200000000	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 14/5/2019 at around 130pm, I was driving Black Mercs E200 bearing registration number SLX8053B. I was attempting to reverse into a lot next lot 78 where SLT9777K was parked. As there were road works beside and behind the lot, it took me multiple maneuvers to get into the lot.

While making the maneuver, my vehicle beeped suggest that I was extremely near an object/vehicle. I alighted from my vehicle and made a check at SLT9777K but discovered no damages to the vehicle. However, I recall that I did not collided onto the said vehicle. I did take multiple images of the said vehicle.

A few days ago, I received a letter from Traffic Police, TP/IP/32917/2019 informing me to lodge a Traffic Accident report. I showed IDAC the picture of SLT9777K and after much effort then they realised that there were two small brackets protruding out at SLX8053B's engine grill.

POLICE REPORT





Police Station Of Origin: Bedok North N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999 Report No. T/20190604/2176

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 <u>report number</u> as reference.

Signature Of Informant:
Date/Time: 04/06/2019 17:00
Classification Of Case:















