

## 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 21/08/2019 14:22  
 Date Of Accident 02/08/2019 08:30  
 Exact Location Of Accident KPE  
 Country/State of Loss SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number SMA6685A  
**Insured/Policyholder**  
 Name Of Registered Owner OEI KUAN DOONG LARRY (HUANG GUANDONG,LARRY)  
 NRIC No S7907437C  
 Email Address NOEMAIL  
 Mobile Phone No (LOCAL) +65-90406403  
 Alternative Phone No Office-90406403

### Vehicle Particulars

Manufacturer CITROEN  
 Model GRAND C4  
 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 1800068701  
 Cover Note Number -

### Driver

Name of Driver SNG YAN TING  
 NRIC No S7834821F  
 Date Of Birth 13/11/1978  
 Occupation INDOOR  
 Date Of Driving Pass 14/05/2009  
 Driving Experience 10 YEARS AND 2 MONTHS  
 Gender FEMALE  
 Mobile Number (LOCAL) +65-90406403

Fax Number  
 Contact Number  
 EMail Address NOEMAIL  
 Address BLK 416B FERNSVALE LINK #18-92  
 Postcode 792416  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured SPOUSE  
 Vehicle Registration Number of Driver's Own Vehicle -  
 -  
 -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

Type Of Accident NO COLLISION  
 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?  
 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) 2  
 Passenger 1 Name: : UNKNOWN  
 Gender: : Female

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name SENGKANG NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address **ROAD:** 2 SENGKANG SQUARE #01-02 SINGAPORE , **POSTCODE:** 545025  
 , **COUNTRY:** SINGAPORE  
 Police Station Contact **TEL NO:** 1800 - 3438999 - **FAX NO:**  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

PLEASE REFER TO POLICE REPORT F/20190821/2056

**Attachment(s)**

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: OVERWRITE  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SMF7899S  
 Vehicle Make/Model/Colour  
 Details Of Properties

8/29/2019

E-FILE

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)

### Accident Sketch Plan

#### SKETCH PLAN

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5. **Any false reporting may be referred to the Police for investigation.**
6. 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.
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:
  - (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:

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

  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN

Unable to Provide Sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report  
F / 2019 08 21 / 2056

DECLARATION

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

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.:

POLICE REPORT


**SINGAPORE  
POLICE FORCE**


F/20190821/2056

1 of 2

**POLICE REPORT (NP299)**

Report No. F/20190821/2056

Police Station Of Origin  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

Date/Time Report Made 21/08/2019 13:20	Vide Report No.	Station Diary No. 63	
Name Of Informant SNG YAN TING	Address APT BLK 416B FERVALE LINK #18-92 SINGAPORE 792416		
ID Type / ID No. NRIC NO / S7834821F	Contact No. Home/Office	Mobile 90406403	
Nationality SINGAPORE CITIZEN	Email Address		
Occupation Housewife	Sex Female	Age 40	Date of Birth 13/11/1978
Institution/School Name	Race Chinese		
	Language		
Date/Time Of Incident 20/08/2019 17:00	Location Of Incident 416B FERVALE LINK #18-92 FERVALE RIVERBOW SINGAPORE 792416		

**Brief details.**

On 20/08/2019 at about 1700hrs, I receive a letter from an law firm claiming that I have an accident with another vehicle bearing SMF 7899S on 02/08/2019. I tried to recall but I did not recall having an accident with another vehicle. I am driving vehicle bearing SMA 6685A. The letter was addressed to me from LKK Auto Consultants Pte Ltd. The letter says that the accident happened at KPE Tampnies Expressway.

On the day itself, I tried to retrieve my in-car camera but the video footages were already overwritten and

Signature Of Officer Recording The Report: F / Sgt 2 TAN BING REN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/08/2019 13:20
Officer In-Charge Of Case: F / Sengkang N.P.C / Sgt 2 TAN BING REN Contact No.: 63438999	Classification Of Case:

 Authentication Stamp
 **POLICE REPORT**



**SINGAPORE  
POLICE FORCE**



F/20190821/2056

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20190821/2056

I did not have the chance to retrieve it to take a look at it. I wish to affirm that I did not have any accident on the day itself and if I indeed have an accident, I would have came down from the vehicle to make a check. I wish to state that I drove my vehicle from 0830hrs to roughly 0900hrs along KPE at the point in time and I did not encounter any or met with any traffic accident along the way.

I wish to state that there are no damages to my vehicle whatsoever.

I am lodging this report for recording purposes.

Signature Of Officer Recording The Report: F / Sgt 2 TAN BING REN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/08/2019 13:20
Officer In-Charge Of Case: F / Sengkang N.P.C / Sgt 2 TAN BING REN Contact No.: 63438999	Classification Of Case:
Authentication Stamp	

Driving License



For LKK/NAC Use Only

For LKK/NAC Use Only

Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo



**Accident Photo**



**Accident Photo**



Accident Photo



Accident Photo



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Accident Photo



**Accident Photo**



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