

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	23/08/2019 12:33
Date Of Accident	10/08/2019 12:00
Exact Location Of Accident	PARK ROYAL HOTEL CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH1880Z
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	FRANK.YEH@HEINEKEN.COM
Mobile Phone No	(LOCAL) +65-90188895
Alternative Phone No	OFFICE-90188895

Vehicle Particulars

Manufacturer	AUDI
Model	A3 SEDAN 1.0 TFSI S TRONIC (LED)
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?	YES
If No, Please state action to be taken	
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	999994188/100870256
Cover Note Number	

Driver

Name of Driver	YEH, CHANG-CHING
Passport No/FIN	308699060
Date Of Birth	16/06/1977
Occupation	INDOOR
Date Of Driving Pass	16/01/1999
Driving Experience	20 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90188895
Fax Number	
Contact Number	OTHERS-90188895
Email Address	FRANK.YEH@HEINEKEN.COM

Address	BLK 11 LEEDON HEIGHTS #30-32
Postcode	267955
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	COLLIDED INTO PROPERTY
Weather Conditions	INDOOR
Road Surface	CARPARK(DARK)

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
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?	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 SKETCH PLAN

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



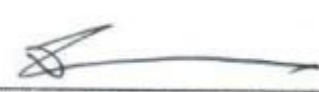
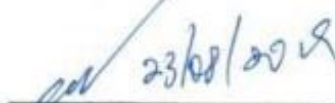
Vehicle Registration Number	
Vehicle Make/Model/Colour	
Details Of Properties	PILLAR
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

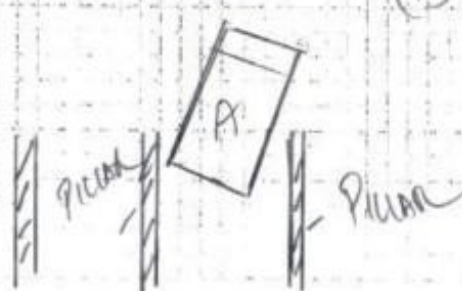
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 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 5. Any false reporting may be referred to the Traffic Police Department for investigation.
 6. This report 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/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' 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 / Date & Time _____ Date _____
 Driver's Signature (if driver is not the policyholder) / Date & Time _____ Date _____
 Witnessed by Reporting Centre Personnel _____ Date 23/08/2019

Sketch Plan → PARK ROYAL HOTEL COMPLEX

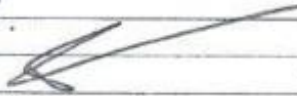


(A) SMH 180Z

Sketch Plan #2

Describe Circumstance of the Accident *

Was driving backward in a car park trying to get out.
It was dark and the pillar behind was not being detected
by rear radar. So hit the pillar damaging ~~the~~ rear
bumper + rear light.




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


Witnessed by Reporting Centre Personnel

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



	中華民國 REPUBLIC OF CHINA 國際汽車交通 INTERNATIONAL MOTOR TRAFFIC
	國際駕駛執照 International Driving Permit
For LKK/NAC Use Only	照牌字號 03707638 號 International Driving Permit No. 1968 年 11 月 8 日 頒發 交通部 Issued on 8 November 1968 under the Traffic Act of 8 November 1968
	有效日期 Valid until Oct. 01, 2019 Oct. 01, 2023
	發照日期 Date of issue Oct. 01, 2018
	國內牌照號碼 No. of Domestic 8124422401 舊小・舊機車類 Driving Permit 國際執照
	交通部 MINISTRY OF TRANSPORTATION AND COMMUNICATIONS

For LKK/NAC Use Only

... ..	1
... ..	2
... ..	3
... ..	4
... ..	5

[illegible]

La nuova "voce" nazionale, secondo il
valore designa la parte del mondo, si
muove da quella di un luogo fisico
in una "voce" nuova, designa la
parte di un mondo fisico, nuovo.

and therefore, compared to the 1991 population, the 1996-1997 survey reports that 44% of the 1996 population moved to different regions.

● 2010年10月10日

La section va d'allo de dret de l'interior del
sistema de juges.


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Author's address: Department of Mathematics, University of Illinois at Chicago, Chicago, IL 60607, U.S.A.
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Experiments
Pages 1-108

張長青
TEL. CHUNG-CHING
WATSON
Jun 15 1977
TALPE: TALWAT



藏骨寫狀機存圖

梅蘭人妻聖

[illegible]

Driving License

Section 1: Personal Information

Full Name: _____
 Date of Birth: _____
 Sex: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Section 2: License Information

License Number: _____
 Expiration Date: _____
 Class of License: _____

Section 3: Medical Information

Do you have any medical conditions that may affect your ability to drive? _____
 If yes, please specify: _____

Section 4: Driver's History

Year	Points	Notes
2018	0	
2017	0	
2016	0	
2015	0	
2014	0	
2013	0	
2012	0	
2011	0	
2010	0	
2009	0	
2008	0	
2007	0	
2006	0	
2005	0	
2004	0	
2003	0	
2002	0	
2001	0	
2000	0	

Section 5: Signature and Date

Signature: _____
 Date: _____

Section 6: Official Use

Issued by: _____
 Date of Issue: _____
 Validity: _____

For LKX/MAC Use Only