

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	02/01/2020 10:36
Date Of Accident	31/12/2019 18:15
Exact Location Of Accident	PARKWAY EAST HOSPITAL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJB20M
Insured/Policyholder	
Name Of Registered Owner	SNG YU LIN MELISSA
NRIC No	SXXXX567Z
Email Address	SJB20M@YAHOO.COM
Mobile Phone No	(LOCAL) +65-98336446
Alternative Phone No	OFFICE-98336446

Vehicle Particulars

Manufacturer	AUDI
Model	A5 SPORTBACK 2.0 TFS
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900106948
Cover Note Number	

Driver

Name of Driver	SNG YU LIN MELISSA
NRIC No	SXXXX567Z
Date Of Birth	23/01/1987
Occupation	INDOOR
Date Of Driving Pass	20/10/2008
Driving Experience	11 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98336446
Fax Number	
Contact Number	OFFICE-98336446
Email Address	SJB20M@YAHOO.COM

Address	63A STILL ROAD
Postcode	424009
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?	NO
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?	YES
If Yes, Please state which Police Station	
Police Station Name	MARINE PARADE N.P.C
Police Station Address	ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 31 DEC 2019 AT 1835HRS MY CAR WAS HIT BY SJG4771B. MY CAR WAS STATIONARY PARKED. AFTER SJG4771B HIT MY CAR, SHE LEFT THE SCENE. I HAVE VIDEO EVIDENCE OF THIS HIT AND RUN ACCIDENT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJG4771B
Vehicle Make/Model/Colour	BMW/BLACK
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: 02 Jan 2020

Driver's Signature

(If driver is not the policyholder)

Date & Time:

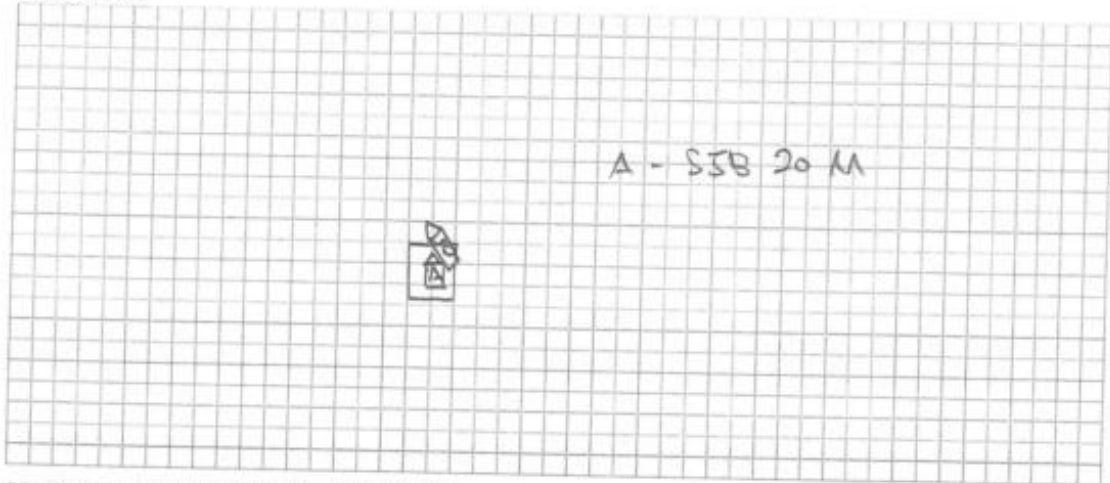
Reporting Centre Personnel's Signature

Name: Helina Oke

NRIC/FIN No.: 624050000

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 31 Dec 2019 at 1835hrs my car was hit by SJG 4771B. My car was stationary parked. After SJG 4771B hit my car, she left the scene. I have video evidence of this hit and run incident.

DECLARATION

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

Policyholder's Signature

Date & Time: 02 JAN 2020

QIARMC SketchPlanForm_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Kelvin Khoo

NRIC/FIN No.: G8268004



Police Report



**SINGAPORE
POLICE FORCE**



1/20191231/2155

Police Station Of Origin:
Marine Parade N P C
300 Marine Parade Road SINGAPORE
449206
Tel No: 1800-4428999

1 of 3
Report No: 1/20191231/2155

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/12/2019 21:13	Video Report No.:	Station Diary No.: 59
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Informant's Particulars

Name of Informant: SNG YU LIN MELISSA		Address: 83A STILL ROAD SINGAPORE 424009	
ID Type / ID No.: NRIC NO / S87015672		Contact No.: Home/Office: Mobile: 98336448	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 32	Date of Birth: 23/01/1987	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: MANAGER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 31/12/2019 18:35	Type of Location: Car Park
Location: Along Road 1 JOO CHIAT PLACE 321 Joo Chiat Place Parkway East Hospital Carpark Lot 36			
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
SJB20M	Car					0
SJG4771B	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Marine Parade N.P.C.
300 Marine Parade Road SINGAPORE
449298
Tel No: 1800-4428899



T/20191231/2155

2 of 3

Report No: T/20191231/2155

CONTINUATION OF REPORT

Vehicle Owner			
Name	SNG YU LIN, MELISSA	ID No.	S8701567Z
Related Vehicle	SJB20M (Car)	Contact No.	96338448
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

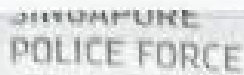
Brief Details:

On 31/12/2019 at around 1715hrs, I parked my vehicle (SJB20M) at lot 36 in Parkway East Hospital carpark and left. My vehicle was intact during then. When I returned back on the same day at around 1900hrs, I saw that the front right corner of my vehicle was damaged with dents and scratches and a part of the bumper had fell out.

I would like to inform that I have a dash camera installed in my camera and when I played the recording back, I noticed that at around 1835hrs, a black BMW vehicle bearing the license plate number, "SJG4771B" was exiting from lot 35 which was on the right of my vehicle. When the driver drove out from the lot, the vehicle had collided with the front right side of my vehicle. From the playback, the driver did not stop after the collision and continued driving off. I would like to inform that I have a picture of the driver, the passenger and the vehicle from the dash cam. I do not know the two person that was driving the vehicle.

I would like to inform that I have yet to send my vehicle for repair, and I do not know how much will the repair cost. I will be informing the incident to my insurance company later. The vehicle is still able to maneuver, but the vehicle is vibrating more than usual after the incident.

Police Report



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 85474885 stating the report number as reference.

Signature Of Officer Recording The Report
G /
Sgt 2 JEREMY GOH ZEN KIAT

Signature Of Interpreter
Not applicable

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt IRMAN BIN MOHAMAD SAID
Contact No : 85476145

Authentication Stamp
NFI 08

Signature Of Informant:

Date/Time
31/12/2019 21:13

Classification Of Case

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



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