SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Occupation

Date Of Driving Pass

Driving Experience

- 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

	ACCIDENT STATEMENT
Date Of Report	06/04/2020 12:46
Date Of Accident	05/04/2020 01:25
Exact Location Of Accident	LORONG 15 GEYLANG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFZ3313U
Insured/Policyholder	
Name Of Registered Owner	MOSCAN BUILDING MATERIALS SUPPLIER PTE LTD
Co Reg No	198304128C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-97514947
Vehicle Particulars	
Manufacturer	MAZDA
Model	3
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
lf 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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800054060
Cover Note Number	
Driver	
Name of Driver	TAY CHAO WEN AARON
NRIC No	S9443565Z
Date Of Birth	17/11/1994

OUTDOOR

14/08/2017

2 YEARS AND 7 MONTHS

Gender **MALE**

Mobile Number (LOCAL) +65-96474173

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 174B EDGEDALE PLAINS #09-173

Postcode 822174

Was driver an employee of the Insured's Company

If No, Relationship of the Driver with the Insured

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

2

NO

NO

NO

0

NO

YES

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

Was any body injured in the Accident?

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.

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name PUNGGOL N.P.C

Police Station Address ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT: T/20200405/2013.

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

SLP8584C Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B PRIVATE CAR Vehicle Category

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

IMPORTANT NOTICE

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- 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
- 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.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- 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:
 - 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.

11.70

A

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: 1150

06/04/2020

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

Focus Auro

Refer to Police Report No. : 7/20200405/2013

SCRIBE CIRCUMSTANCE	S OF THE ACCIDENT	
Refrair 4	to Police Report No. ? ?	1/505/00H02/5017
CLARATION e foregoing part	iculty's are true in every respect.	
yholder's Signature & Time:	Oriver's Signature (If driver is not the policyholder) Date & Time: (150 06/04/2000	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

1 of 3

Report No. T/20200405/2013

Date/Time Report Made:		Vida Danad Na	101-1' Di 11			
		Vide Report No.:	Station Diary No.:			
05/04/2020 07:23		G/20200405/0049	7			
Informa	nt's Partic	ulars	Alberta College Pro-	District Control of the Control of t		
Name of Informant:		Address:				
TAY CHAO WEN, AARON		APT BLK 174B EDGEDALE PLAINS #09-173 SINGAPORE 822174				
ID Type / ID No.:			Contact No.:			
NRIC NO / S9443565Z		65Z	Home/Office: Mobile: 96474173			
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Male	Age: 25	Date of Birth: 17/11/1994	Type of Informant: Driver			
Race: Chinese			Language:	Institution / School Name:		
Occupation: UNEMPLOYED			Driving Licence Informati Class: 3	nce Information: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drive: Acc	e/Time of ident: 04/2020 01:25	Type of Location Straight Road
Location: Along Road 1 LORONG 15 Weather:		Road Surface:	Roa	ad Speed Limit:
Clear				
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		ffic Volume:

Details of V	endrie myo	ived	HIS COUNTY OF THE PROPERTY OF	ecustion of the rest	CONTRACTOR OF THE PARTY OF THE	MA CONTRACT THE REAL PROPERTY.
/ehicle No	Type	Make	Model	Color	Condition	No of Passenge
SFZ3313U	Car	MAZDA	Mazda 3	Black	Slightly	0

Details of Person Involved	The second secon
Any Pedestrian Involved: No	:
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





Police Station Of Origin: Punggol N.P.C

21A Tebing Lane SINGAPORE 828837

Tel No: 1800-6049999

T/20200405/2013

Report No. T/20200405/2013

CONTINUATION OF REPORT

Name	TAY CHAO WEN, AARON			ID No		S9443565Z
Related Vehicle	SFZ3313U (Car)			Conta	ct No.	96474173
Hospital/Clinic	NIL			Class Drivin Licend Expin	g .	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date Dis			-	NIL	
No. of Days granted Medical Leave NIL			Degree of		NIL	

Brief Details.

On the 4th April 2020 at about 6 pm, I parked my car (SFZ3313U) at one of the parallel parking lots along Lorong 15 Geylang. I then went around the vicinity to find my friend and have my meal. On the 5th April 2020 at about 1.25 am, one of my friends namely Benson Hp: 94863229 called me and told me that someone had driven a car and hit onto my car. I then rushed back to my car and realized that there were a total of 4 cars including mine and 3 motorcycles which were hit by another car and the said car left after the accident. The other 3 cars and the 3 motorcycles were also parked at the parallel parking along Lorong 15 Geylang. Both myself and Benson did not witness the incident and we do not have the plate number of the car which was involved in the hit and run. But according to the owner of a coffeeshop nearby, the car was speeding when it hit onto the vehicles parked along the road and the car did not stop at all. I had called for police and traffic police officers came down and attended to the case. There was no one injured from the incident. Due to the collision caused by the hit and run, the rear right tail light and rear bumper of my car were damaged, and there was also damage on the front bumper.





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

3 of 3 Report No. T/20200405/2013

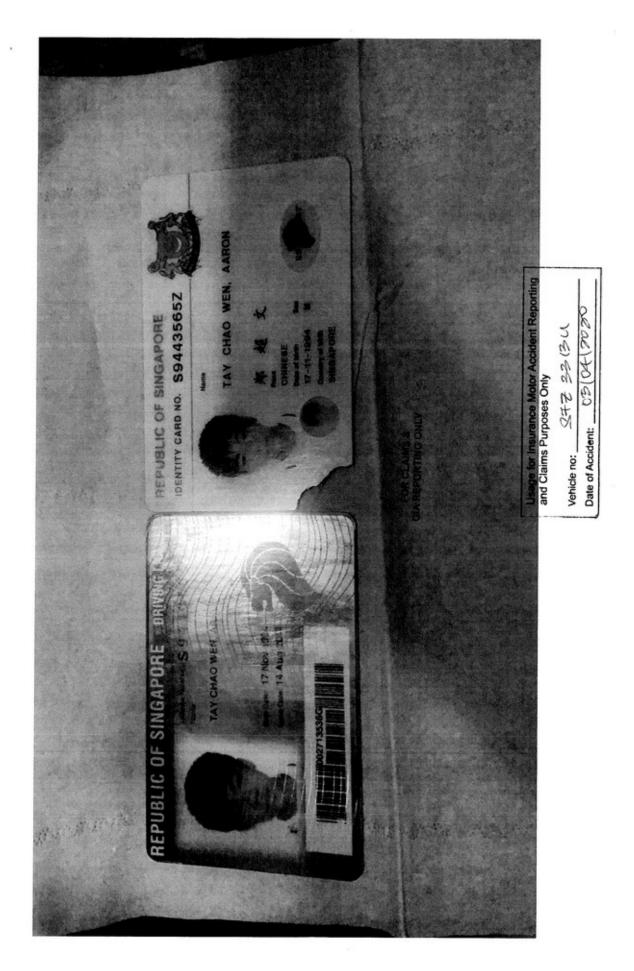
CONTINUATION OF REPORT

Sketch Plan

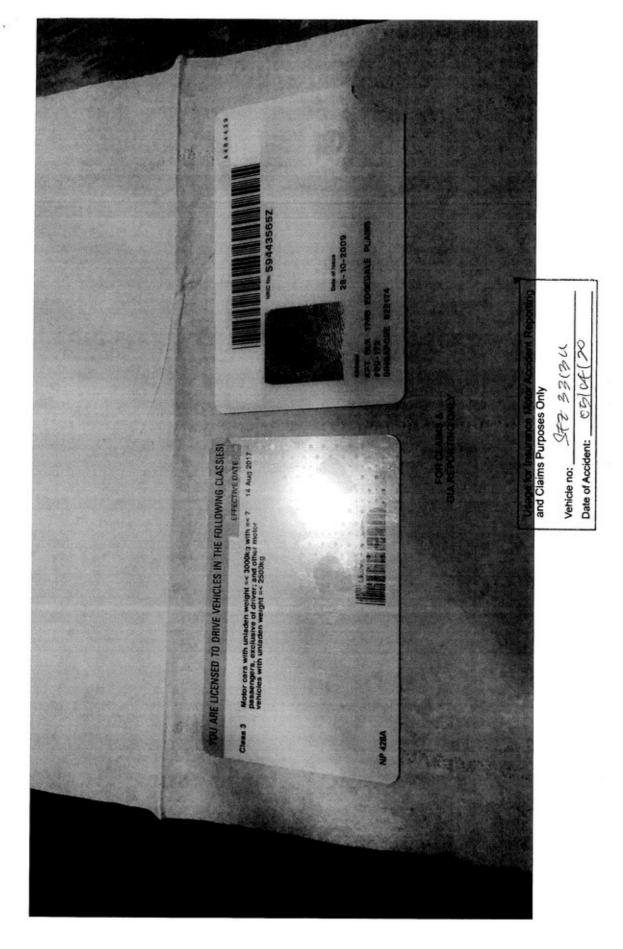
Informant is not able to provide sketch plan

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 **report number** as reference.

Signature Of Officer Recording The Report:	Signature Of Informant:
Staff Sgt ALZRIN SHAFIQ BIN AHMAD	A
Signature Of Interpreter: Not applicable	Date/Time: 05/04/2020 07:23
Officer In Charge Of Case: TP / HRT Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp Signature: NP168 Singapore Police Force	



Driving License





ENDORSEMENT SCHEDULE

MAZDA AUTO PROTECTOR PRIVATE VEHICLE

Policy No. : 1800054060

Endorsement No.

: 000000000226944

Period of Insurance : 30 Apr 2018 to 29 Apr 2020

Issued Date

: 10 Sep 2018

ABOUT THE POLICYHOLDER

Name of Policyholder

: MOSCAN BUILDING MATERIALS SUPPLIER PTE LTD

Address

: 5055 ANG MO KIO INDUSTRIAL PARK 2

#01-1161

SINGAPORE 569558

Occupation/Nature of Business: Transport, Logistic and Storage

ABOUT THE VEHICLE

Registration No. : SFZ3313U Chassis No.

: JM6BN22A8J0200289

Engine No.

Engine Capacity/Tonnage: 1,496.00 CC : P520491653

Seating Capacity: 5

First Year of Registration : 2018

Body Type

: Sedan

Make/Model

: MAZDA 3 1.5 SKYACTIV

Purchase Company/Employer's Loan : HONG LEONG FINANCE LTD

CONTRACT OF SCHOOLSE

ABOUT THE COVER

Sum insured

: Market Value

Driver Restriction: NA

Person or Classes of Persons Entitled to Drive :

Insuring with COE/PARF : Yes

son who is driving on the Policyholder's order or with their permission. Soy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unsumed) is under the age of 23 and/or has loss than 2 years' driving experience.

* Report No: G/20200405/0049

Age Condition : All Age Condition

Limitation as to use

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

This Policy does not cover use for hire or reward, driving fastion, driving test, racing, pero-making, reliability trial or speed-testing, the carriage of goods other than eamples in connection with any trade or business or use for any purpose in connection with Motor Trade.

er Key Policy Benefits :

Aux of God, Strike, Rich and Chill Commotions, PA to Authorised Driver / Unnermed Passengers-\$10000, Dealer + AVG Authorised Workshops, PA Insured-\$10000, Fedure and Accessories (Cosmetic)-\$5000, Solar Film-\$1150, Loss of Use 1500cc - 1600cc Optional, New For Old (36 months), In-Car Camera Excess Walver, Glass Roof/ Moon Roof/ Paneromic Glass Roof, NCD

ENDORSEMENT REMARK

It is hereby declared and agreed that with effect from 30/04/2018

Driver Details : Update Claims Details
 NGD Details : Update NCD on Policy with AIG

Declared Previous Insurer: NTUC INCOME INSURANCE CO-OPERATIVE LTD

Declared NCD: 50%

Verified NCD: 50%

With the update in Claims/NCD details, premium and/or excess are revised. Refer to details stated above.

Subject otherwise to the Terms, Exclusion and Conditions of this Policy.

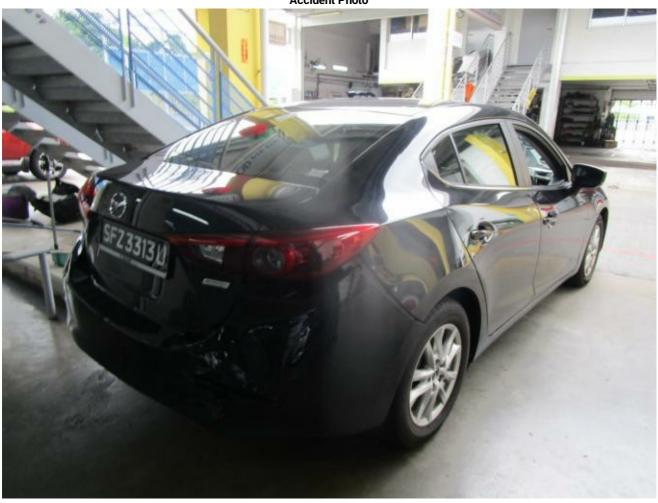
Endorsement effective from: 30-Apr-2018. All other terms and conditions remain unchanged.

1001485398MC4









Accident Photo

