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 <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	08/05/2020 11:18
Date Of Accident	05/05/2020 15:20
Exact Location Of Accident	BLK 82 MARINE PARADE CTRL OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SBA800D
Insured/Policyholder	
Name Of Registered Owner	KOW YEW SAN
NRIC No	SXXXX258A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96332800
Alternative Phone No	OTHERS-96332800
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180 AVANTGARDE (R17 LED)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If 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	1800037865-02
Cover Note Number	
Driver	
Name of Driver	KOW YEW SAN
NRIC No	SXXXX258A

Name of Driver KOW YEW SAN
NRIC No SXXXX258A
Date Of Birth 20/01/1946
Occupation INDOOR
Date Of Driving Pass 04/06/1970

Driving Experience 49 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96332800

Fax Number

Contact Number OTHERS-96332800

EMail Address NOEMAIL

Address 21A PARKSTONE ROAD

Postcode 437668

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

0

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance

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 TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

NO

Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 65470000 - **FAX NO**:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20200505/2043

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded?

Details of Witness 1

Name DANIEL
Phone Number 97226681

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKN8244G

Vehicle Make/Model/Colour TOYOTA ALTIS

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)

Accident Sketch Plan

SKETCH PLAN

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- 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
- 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)

Lunderstand, 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)
 - (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 fincluding their lawyers/faw 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.

Date & Time: 6 5 20

Collub.

Driver's Signature (if driver is not the policyholder)

Date & Time: 6/5/20

Scanned with CamScanner

Accident Sketch Plan

SKETCH PLAN

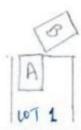
BK 82

ARRINE PARADE

CENTRAL

OPEN SPACK COLPOOK

VEHICLE A: SBA 8000 VEHICLE R: SKN 82446



	lots Date and time I vehicle A	WAS
Stationary	and Condomy I was back from	my
Suffing I to	outed my car home Dange Inform	۴,
I have vide	of the accident that is all to	c 312
party car p	Plate is SEN 87446.	
Police 84	poen 1/2020050x/2043.	
TOLI UR JUN	1/2020505/2045.	
LARATION	/	. /
declare the foregoing particul		//
	clars are true in every respect.	or/20
declare the foregoing particul	- Company of the Comp	ot /20;

Scanned with CamScanner

Police Report



T/20200505/2043

Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20200505/2043

REPORT	OF A TRAFFIC	CACCIDENT				
Date/Time Report Made: 05/05/2020 16:01		Nade:	Vide Report No.:	Station Diary No.		
Informa	nt's Partice	ulars		production of the second		
Name of Informant: Kow yew san			Address: APT BLK 21A PARKSTONE ROAD SINGAPORE 437668			
ID Type / ID No.: NRIC NO / S2136258A		58A	Contact No.: Home/Office:	Mobile: 96332800		
Nationality:			Email: kysster@gmaiil.com			
Sex: Male	Age: 74	Date of Birth:	Type of Informant: Driver			
Race:			Language:	Institution / School Name:		
Occupation: Retiree			Driving Licence Information: Class:	Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 05/05/2020 15:20	Type of Location Car Park	
	ADE CENTRAL parade central open	space carpark, lot nun Road Surface: Dry		Road Speed Limit:	
2.7		Traffic Control:		Traffic Volume: Light	
		100000000000000000000000000000000000000		Light	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SBA800D	Car	MERCEDES BENZ	C180 AVANTGAR DE (R17 LED)	Blue	Slightly Damaged	0
SKN8244G (Not Accurate)	Car					0

Details of Ve	ehicle Insurance		PARADOS ESTA	ST DATE OF
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

Police Report



T/20200505/2043

Police Station Of Origin: Traffic Police 10 Ubl Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20200505/2043

CONTINUATION OF REPORT

Vahicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SBA800D	AIG ASIA PACIFIC INSURANCE PTE.	1800037865-01	07/05/2019	08/05/2020

Details of Perso	n Involved					
Any Pedestrian II	volved; No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver						
Name	Kow yew san		ID No.		S2136258A	
Related Vehicle	SBA800D (Car)			Conta	ct No.	96332800
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Date			harge	NIL	
	No. of Days granted Medical Leave NIL			f Injury	NIL	

Brief Details.

On 05/05/2020 at 1520hrs, I parked my Mercedes C180 (blue) at marine parade central blk 82 open space carpark and went to get some groceries. When I am back from my groceries, my car was hit and I was informed by a witness name Daniel (HP 97226681) witness a car Toyota altis grey in colour hit and run. I had checked on my vehicle and there were some scratches and dents on my car bonnet. I would like to informed that my car plates was left tangling out.

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20200505/2043

CONTINUATION OF REPORT

SI	et	cl	1	PI	a	n

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 Repo	rt: Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2020 16:01
Officer In Charge Of Case: TP / HRT / SI NOR AFFENDY BIN JAFFAR Contact No.: 65476368	Classification Of Case:
Authentication Stamp	
DRIMATURE	

















