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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	01/07/2020 09:15
Date Of Accident	23/06/2020 13:00
Exact Location Of Accident	TAY LIAN TECK RD
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SCM1919P
Insured/Policyholder	
Name Of Registered Owner	SWEE RON SHAWN
NRIC No	SXXXX009D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94510706
Alternative Phone No	OFFICE-94510706
Vehicle Particulars	
Manufacturer	LEXUS
Model	NX200T-2.0 (A)
Exact Purpose for which vehicle was being used at time of accident	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	1900099208
Cover Note Number	
Driver	
Name of Driver	SWEE RON SHAWN
NRIC No	SXXXX009D

NRIC No SXXXX009D
Date Of Birth 19/10/1984
Occupation INDOOR
Date Of Driving Pass 16/04/2003

Driving Experience 17 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-94510706

Fax Number

Contact Number OFFICE-94510706

EMail Address NOEMAIL

BLK 77 MARINE DR #19-42 Address

Postcode

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 **RAINING** Road Surface WET

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?

YES Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO

YES

0 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

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

SINGAPORE

TEL NO: 65470000 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20200626/7028

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SDS9030G

Vehicle Make/Model/Colour

Details Of Properties

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)

Accident Sketch Plan

SKETCH PLAN

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- 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 insurers) 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.

Policyholder's Signature

30/2/2010 1634415

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

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Accident Sketch Plan

7 Tay Lian Teck Road SKETCH PLAN VEHICLE A- SCHIGIG P DESCRIBE CIRCUMSTANCES OF THE ACCIDENT 9 PIPIPIPOZ) TOGSKU WASI A spirite = Handa CATC (205 9030 G) Velocio B Vehicle A's in-concornous have cophoted video due to impact Vehicle A was puried at this side of the road with no driver in-bound I have only discovered doming upon watching the in our video playbook In video, vehicle B was copyright drawing toward the right side of Uthritle 8 left side miller collided when vehicle A right tide and impact course of the dominges. Video (Rear) convers shows which 8 miles side (144) open during the drive Upon impact Front video & comer shows left ride missour of which is folded in this and him accident appared to Traffic police, # RPORT NO : T 21/200621 7029 DECLARATION I/We declare the foregoing particulars are true in every respect. Policyholder's Signature Oriver's Signature Reporting Centre Personnel's Signature Date & Time: (If driver is not the policyholder)

NRIC/FIN No.

30/6/2020 1634 ALS

Date & Time:

POLICE REPORT





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20200626/7028

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 26/06/2020 19:09		Vide Report No.:	Station Diary No.:
Informa	nt's Partic	ulars	はいまでは大きな	A SECURITION OF THE PROPERTY O
	Informant: ON SHAW		Address: APT BLK 77 MARINE I	DRIVE #19-42 SINGAPORE 440077
ID Type NRIC N	/ ID No.: D / S84330	09D	Contact No.: Home/Office:	Mobile: 94510706
National SINGAP	ty: ORE CITIZ	EN	Email: shawnswee@yahoo.co	m.sg
Sex: Age: Date of Birth: Male 35 19/10/1984		Type of Informant: Vehicle Owner		
Race: Chinese		Language: Institution / School N		
Occupation: Management executive		Driving Licence Informa Class:	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/06/2020 13:00	Type of Location Straight Road
Location: TAY LIAN TE Weather: Raining	CK ROAD	Road Surface: Wet		Road Speed Limit.
Traffic Flow: Traffic Control: Not Controlled				Traffic Volume: Light
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Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SCM1919P	Car	LEXUS	NX200T	Blue	Slightly Damaged	1
SDS9030G	Car	HONDA	CIVIC	Black	Slightly Damaged	1

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SCM1919P	AIG ASIA PACIFIC INSURANCE PTE. LTD.				
SDS9030G		nil			

POLICE REPORT





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20200626/7028

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	ns Injured: NIL		Use of Pe	destriar	Cross	sing: NA
Vehicle Owner	THE RESERVE THE PARTY OF THE PARTY.	SECONES.	STATE OF THE STATE	The second second	Manual Property of the Parks	SCHOOL BROWN DOWN
Name	SWEE RON SHAW	N		ID No		S8433009D
Related Vehicle	NIL			Conta	ct No.	94510706
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

My vehicle details: SCM1919P, Lexus NX200T - Blue

Yes, my in-car camera managed to capture the video of the offender vehicle driving past & hit my parked vehicle. Video/pictures size exceeds 2MB. Please contact me so i can furnish the video to the Police.

In the video, on 23 June 2020 (1302hrs 58sec), Offender car: Black Honda Civic (SDS9030G). There is another car driving behind the offender car owner that can potentially be a witness (SMH9856C) as he/she would have noticed the hit and run accident.

There was no accident note left behind. I seeking the traffic police assistance to contact the offender as i only have the car plate number captured in my video. Hit and Run accident happened on Tay Lian Teck Road, landed housing estate. My car was parked on

Hit and Run accident happened on Tay Lian Teck Road, landed housing estate. My car was parked on the left side of the road (when enter from east coast road). Video shows offender vehicle drove past and hit the side of my car, the impact caused the in-car video to capture the hit and run thus recorded and saved. In the video, there were 4 cars that potentially can be witness but due to the rainy weather, video only managed to capture the vehicle car plate of the vehicle (Witness) driving behind the offender's car.

Will appreciate if Traffic police will assist to contact the offender driver (SDS9030G) as well as potential witness (SMH9856C) and connect us together to investigate this case. Many thanks in advance.

POLICE REPORT





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20200626/7028

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 26/06/2020 19:09
Officer In Charge Of Case: TP / TPIB / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp	































