

## 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	06/07/2020 23:05
Date Of Accident	06/07/2020 22:55
Exact Location Of Accident	28A JALAN LEMPENG 128808
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN587H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	WANG YILI
NRIC No	SXXXX513I
Email Address	WYILIQQ@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90175685
Alternative Phone No	OFFICE-90175685

### Vehicle Particulars

Manufacturer	AUDI
Model	A4 SEDAN 1.4 TFSI S TRONIC
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?	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	2100507480-03
Cover Note Number	

### Driver

Name of Driver	WANG YILI
NRIC No	SXXXX513I
Date Of Birth	04/07/1981
Occupation	INDOOR
Date Of Driving Pass	10/02/2017
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90175685
Fax Number	
Contact Number	OFFICE-90175685
EEmail Address	WYILIQQ@GMAIL.COM

Address	28 A JALAN LEMPENG TRILINQ #03-15 SINGAPORE
Postcode	128808
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?	YES
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

THE CAR WAS PARKED AT THE BASEMENT CARPARK OF OUR CONDO. AROUND 21:50 OF 6 JULY 2020, I RECEIVED A CALL FROM CONDO SECURITY OFFICE TELLING MY CAR WAS HIT BY ONE OF NEIGHBOUR. AROUND 22:20 THE NEIGHBOUR CALLED ME AND TOLD THAT HE HIT MY CAR WHEN HE PULLED OUT FROM HIS PARKING SPACE.

#### 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	SLF6857G
Vehicle Make/Model/Colour	MERCEDES/BROWN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	HOO YEE MENG
NRIC/Passport Number	SXXXX055F
Contact Number	97676657
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.

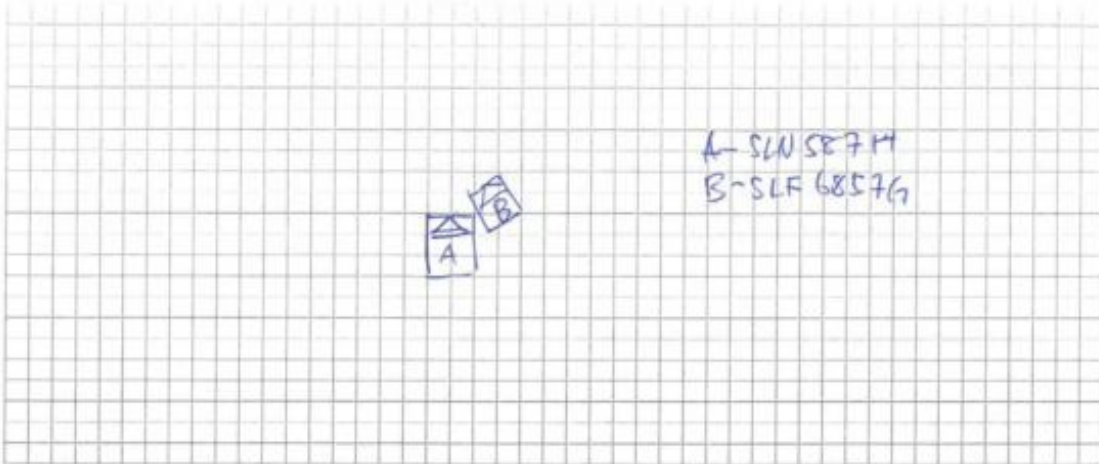
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name: Brian Tan  
NRIC/FIN No.:

## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

The car was parked at the basement carpark of our condo. Around 21:50 of 6 July 2020, I received a call from condo security office telling my car was hit by one of neighbor. Around 22:20 the neighbor called me and told ~~his car~~ that he hit my car when he pulled out from his parking space.

### DECLARATION

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

Policyholder's Signature  
Date & Time:

GIARMC SketchPlanForm\_V3:

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



Reportable Centre Personnel's Signature  
Name: *Torrena Tan*  
NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



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Accident Photo



Accident Photo



Accident Photo





A close-up photograph of the vehicle's chassis, showing the white-painted metal frame. A silver-colored metal plate is bolted to the frame, containing the following information: "AUDI AG", "WAUZZZF45HA126031", "1945 kg", "3345 kg", "1 - 1075 kg", "2 - 1000 kg", "Vary 50/90", the Audi logo, and "CVNA 9087 022017". To the right of the plate is a black metal bracket with a bolt. Below the plate, a black corrugated flexible hose is visible, connected to a metal fitting. The background shows the dark, textured interior of the vehicle's body panels.

Accident Photo



Accident Photo



Accident Photo

