## 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 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	13/07/2020 14:45
Date Of Accident	16/02/2020 12:50
Exact Location Of Accident	FUNAN IT MALL LVL B3 CARPARK
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SGW479Z
Insured/Policyholder	
Name Of Registered Owner	DANNY BUAY ENG KIT
NRIC No	SXXXX588E
Email Address	DANNY.BUAY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83183183
Alternative Phone No	OTHERS-83183183
Vehicle Particulars	
Manufacturer	SUBARU
Model	IMPREZA
Exact Purpose for which vehicle was being used at time of accident	PARKED VEH
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	2100373440-06
Cover Note Number	
Driver	
Name of Driver	DANNY BUAY ENG KIT

NRIC No SXXXX588E Date Of Birth 09/03/1978 Occupation **INDOOR Date Of Driving Pass** 26/07/2003

16 YEARS AND 6 MONTHS **Driving Experience** 

Gender MALE

Mobile Number (LOCAL) +65-83183183

Fax Number

Contact Number OTHERS-83183183

**EMail Address** DANNY.BUAY@GMAIL.COM

BLK 699C HOUGANG ST 52 Address

#13-35 533699

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

2

#### **General Information of the Accident**

HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

#### Other Information

Postcode

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 NO

ambulance?

YES Was any other material or property damaged?

I have been approached by unknown person(s)

NO 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 YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE

NO

0

Police Station Address ROAD: 32 YISHUN ST 81, POSTCODE: 768456, COUNTRY: SINGAPORE

TEL NO: 1800-8522999 - FAX NO: 68522239 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

#### **Circumstances of Accident**

PLS REFER TO THE POLICE REPORT:T/20200216/2089

#### Attachment(s)

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

# **Details of Witness 1**

Name **KER** Phone Number 97566688

**Email Address** 

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SMH450M Vehicle Make/Model/Colour BMW X3

**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

#### IMPORTANT NOTICE

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- 5. 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:
  - (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:

NRIC/FIN No.:

## **Accident Sketch Plan**

SKETCH PLAN			FUNAN IT MALL BS
	Reverse	B #	SWHOZOW.
	0 -6		WITNESS
A-5GW4792		1	, will
3- SM4450M	4	B1	
		A Sen4792	
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
pris regio di	, ru pru	i rigioni.	720200216/2089

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

Policyholder's Signature
Date & Time: 13 1/2020

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

Name: NRIC/FIN No.:

#### Individual Statement





Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

2 of 3 Report No. T/20200216/2089

#### CONTINUATION OF REPORT

#### Brief Details.

On 16/02/2020 at about 1245hrs, I parked my car (SGW479Z) at B3 Funan IT Mall and left to do my shopping.

On the same day at about 1545hrs, I returned to my car to find some damages that includes cracked number plate, scratched and misaligned/loose bumper. Subsequently, I check my in-car camera to investigate.

Upon checking my camera recording, it was seen that at about 1253hrs on the same day, a BMW X3 SDRIVE 20I LED SR NAV (SMH450M) reversed from his parking lot and collided into the front bumper of my car. Subsequently, the driver did not alight to make a check and drove off.

I would like to inform that at the moment of the incident, another car was in the vicinity and witnessed the incident. The driver of the said car namely, Ker (c/n: 97566688), subsequently left a note on my windscreen stating that he witnessed the incident.

I would also like to inform that no one was injured.





















## **Police Report**





Police Station Of Origin: Yishun South N.P.C

32 Yishun Street 81 SINGAPORE 768456

Tel No: 1800-8522999

T/20200218/2089

Report No. 1/20200216/0089

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made. 16/02/2020 21:11		Vlade:	Vide Report No.:	Station Diary No.: 65	
Informa	nt's Partic	ulars	Source Contract of the		
DANNY	f Informant BUAY EN		Address: APT BLK 699C HOUGANG S 533899	STREET 52 #13-35 SINGAPORE	
ID Type / ID No. NRIC NO / S7805588E			Contact No.: Home/Office	Mobile: 83183183	
National SINGAR	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 41	Date of Birth: 09/03/1978	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Project Manager			Driving Licence Information: Class: 3	Date of Expiry	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/02/2020 12:50	Type of Location Car Park
Location: Along Road 1 NORTH BRID	IGE ROAD Lyl B3 carpark			
Weather		Road Surface: Dry	F	coad Speed Limit
Traffic Flow:		Traffic Control  Not Controlled	1	raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SGW479Z	Car	SUBARU	2.5 WRX	Gray	Slightly Damaged	D
SMH450M	Car					0

Details of Vi	chicle Insurance	and the second	F. Consuler	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGW479Z	AIG ASIA PACIFIC INSURANCE PTE.	2100373440-05	29/06/2019	28/06/2020

#### **Police Report**





Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768455 Tel No: 1800-8522999 2 of 3 Report No. T/2020021e/20e9

CONTINUATION OF REPORT

## Brief Details.

On 16/02/2020 at about 1245hrs, I parked my car (SGW479Z) at B3 Funan IT Mail and left to do my shopping.

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Upon checking my camera recording, it was seen that at about 1253hrs on the same day, a BMW X3 SDRIVE 20LLED SR NAV (SMH450M) reversed from his parking lot and collided into the front bumper of my car. Subsequently, the driver did not alight to make a check and drove off.

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I would also like to inform that no one was injured.

## **Police Report**





Police Station Of Origin: Yishun South N.P.C. 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

3 of 3 Report No. 7/20200216/2039

CONTINUATION OF REPORT

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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 55474885 stating the report number as reference.

Signature Of Officer Recording The Report: L / Sgt 2 MUHAMMAD NAFIIS BIN ISKANDAR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/02/2020 21:11
Officer in Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp	



Traffic Police 10 UB: Avenue 3 Singapore 406365 Tel +66 esser 2000 Pax +65 6547 4483 Week, poeco, you ag

Our Ref

: TP/IP/12703/2020

Date

: 14 April 2020

Danny Buay Eng Kit Blk 699C Hougang Street 52 #13-35 Singapore 533699

Dear Sir / Madam.

# TRAFFIC ACCIDENT INVOLVING SGW479Z AND SMH450M ALONG NORTH BRIDGE ROAD ON 16/02/2020 AT ABOUT 1250 HRS

I refer to the above accident.

- Pleass be informed that we have completed our investigations which revealed that the driver of <u>SMH450M</u> had committed the following offence:
  - Careless Driving under Sec 65(1)(a) of the RTA Cap 276 P/U Sec 65(5)(a) of the RTA.

Action has been initiated against the driver for the said offence.

- If you have any clarification, you may contact the Investigation Officer, SI Kaleswari at office number, 6547 6902.
- Thank you.

Yours faithfully,

HEAD INVESTIGATION TRAFFIC POLICE SINGAPORE POLICE FORCE

This is a computer-generated letter. No signature is required.

A FORCE FOR THE NATION.