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.

	ACCIDENT STATEMENT
Date Of Report	17/08/2020 11:07
Date Of Accident	15/08/2020 09:00
Exact Location Of Accident	MEI LING STREET WET MARKET
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YM693K
Insured/Policyholder	
Name Of Registered Owner	CHNG SUAN KHIM
NRIC No	SXXXX202A
Email Address	ASKIVANNG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94385482
Alternative Phone No	OTHERS-94385482
Vehicle Particulars	
Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	LORRY WAS PARK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	0100542489-15
Cover Note Number	
Driver	
Name of Driver	CHNG SUAN KHIM

Name of Driver

CHNG SUAN KHIN

NRIC No

SXXXX202A

Date Of Birth

27/04/1954

Occupation

INDOOR

Date Of Driving Pass

23/08/1978

Driving Experience 41 YEARS AND 11 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-94385482

Fax Number

Contact Number OTHERS-94385482

EMail Address ASKIVANNG@GMAIL.COM

Address BLK 104 GANGSA ROAD

#07-55

Postcode 670104

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

NO

NO

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?

Was any injured conveyed to hospital by NO

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) 0

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT PANJANG

Police Station Address ROAD: 1 SEGAR ROAD , POSTCODE: 677738 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-8929999 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200815/2079

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 Witness 1

Name CONNIE
Phone Number 91829997

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKR3054A

Vehicle Make/Model/Colour

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

IMPORTANT NOTICE

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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
- 7. 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)
 - (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
- 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.
- 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:

NRIC/FIN No.:

Accident Sketch Plan

ETCH PLAN			
		LORRY WE	OBEK.
	MKNINN		
	CES OF THE ACCIDENT	1	
Suffer to	bouch lupory -	1/20200815/	NOTE OF PROX
		7	/
		/	
		/	
CLARATION Ve declare the foregoing pa	articulars are true in every respect.	11	10/08/2000
licyholdens Signature ste & Time.	Driver's Signature (If driver is not the policyholde Date & Time:	Reporting Name: NRIC/FIN I	Centre Personnel's Signature

POLICE REPORT





Police Station Of Origin:

Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738

Tel No: 1800-8929999

Report No. T/20200815/2079

REPORT OF A TRAFFIC ACCIDENT

15/08/202	e Report N 20 19:35	/lade:	Vide Report No.:	Station Diary No.: 103	
Informan	t's Partic	ulars	CHICAGO CONTRACTOR	CONTRACTOR AND THE SECOND	
	Informant: JAN KHIN		Address: APT BLK 104 GANGS/	A ROAD #07-55 SINGAPORE 670104	
ID Type / NRIC NO	ID No.: / S01292	02A	Contact No.: Home/Office: Mobile: 94385482		
Nationalit SINGAPO	y: ORE CITIZ	EN	Email:		
Sex: Female	Age: 66	Date of Birth: 27/04/1954	Type of Informant: Driver		
Race: Chinese		Language:	Institution / School Name:		
Occupation: SELF EMPLOYED		Driving Licence Informa Class: 3	ation: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 15/08/2020 09:00	Type of Location Car Park	
Location: MEI CHIN RO Weather: Clear	DAD	Road Surface:		Road Speed Limit:	
Traffic Flow: Tra		Traffic Control:		Traffic Volume:	
Traffic Flow:		Not Controlled		Light	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SKR3054A	Car					0
YM693K	Lorry	NISSAN	CABSTAR	Gold	Slightly	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
YM693K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	0100542489-15	12/07/2020	11/07/2021

POLICE REPORT





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

2 of 3 Report No. T/20200815/2079

CONTINUATION OF REPORT

Brief Details.

On the 15/8/2020, at about 0900hrs, I was attending to my shop at Mei Ling Street Wet Market. When suddenly, the flower stall owner came to my shop and told us that our lorry YM693K was hit by another car. My husband went out to take a look and saw the driver of vehicle SKR3054A. The driver approached my husband and informed that he had hit onto our lorry. The driver of vehicle SKR3054A then claimed that it was just a minor hit, and then walked into the wet market.

My husband then approached him to ask for some compensation amount, as we wanted to settle the matter personally. However, he turned aggressive and claimed that our lorry only suffered minor damages, and he does not want to compensate. He then challenged us to lodge a police report, and then

He did not provide us his personal particulars. We took a photo of his car license plate number. The witness is a female "Connie", the shop owner of the flower stall.

My lorry suffered some scratches on the rear left, metal frame.

POLICE REPORT





Police Station Of Origin: Bukit Panjang N.P.C 1 Segar Road #01-05 SINGAPORE 677738 Tel No: 1800-8929999

3 of 3 Report No. T/20200815/2079

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.

SC2 KOH KAI YAN		Signature Of Informant:		
Signature Of Interpreter, Not applicable	7 0 6	Date/Time: 15/08/2020 19:35		
Officer In Charge Of Case: TP / HRT /		Classification Of Case:		
SI TAN JEOK LENG Contact No.: 65476144	1000			
Authentication Stamp NP168	- 96	hite -		















