

## 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	21/08/2020 18:40
Date Of Accident	21/08/2020 15:40
Exact Location Of Accident	33 JALAN MAT JAMBOL S119514
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFW3104Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHONG YU SHAN, AUDREY(ZHANG YUSHAN,AUDREY)
NRIC No	SXXXX197H
Email Address	AUDREYCHONG0206@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97690206
Alternative Phone No	OFFICE-64735014

### Vehicle Particulars

Manufacturer	AUDI
Model	Q7 2.0 TFSI QU
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?	YES
If No, Please state action to be taken	
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	
Cover Note Number	

### Driver

Name of Driver	CHONG YU SHAN, AUDREY(ZHANG YUSHAN,AUDREY)
NRIC No	SXXXX197H
Date Of Birth	02/06/1978
Occupation	INDOOR
Date Of Driving Pass	20/11/1997
Driving Experience	22 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97690206
Fax Number	
Contact Number	OFFICE-64735014
Email Address	AUDREYCHONG0206@YAHOO.COM.SG

Address	33 JALAN MAT JAMBOL
Postcode	119514
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	COLLIDED INTO PARKED VEHICLE
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	3
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

PLEASE REFER TO THE SKETCH PLAN & ACCIDENT STATEMENT.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMR3124H
Vehicle Make/Model/Colour	BMW/ SILVER COLOUR
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	THAM YAOXUAN KARINA ALEXIS
NRIC/Passport Number	SXXXX907J
Contact Number	98432801
Address	APT 89, DAWSON ROAD #08-06
Postcode	142089
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJD1772J
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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

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5. Any false reporting may be referred to the Police for investigation.
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) 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: 21/8/2020  
5:55pm

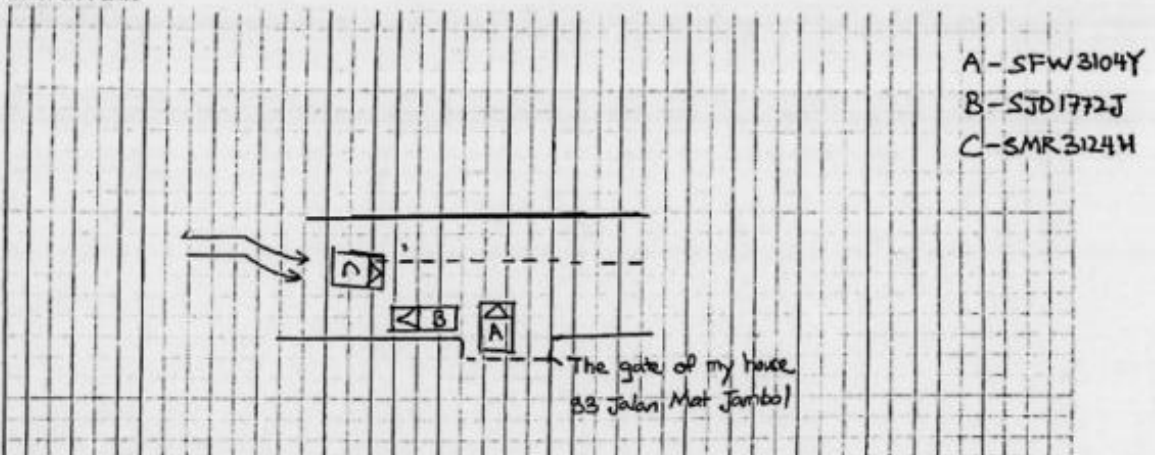
Driver's Signature  
(if driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature  
Name: WONG KHONG SEAG, George  
NRIC/FIN No.: G2987145X

## Accident Sketch Plan

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

My car was parked outside my house gate at 33 Jalan Mat Jambol. The car was stationary. Nobody was inside the vehicle. At about 3.40PM, the driver of SMR 3124 H(C) was driving along Jalan Mat Jambol. The driver of SMR 3124 H(C) hit the side of SJD 1772 J(B) Parked Along Jalan Mat Jambol and Subsequently collided with the front left side of my vehicle(A) according to the recording of accident.

## DECLARATION

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

Policyholder's Signature \_\_\_\_\_

Date & Time: 21/8/2020  
5.55 pm

1. *Chlorophyll a* and *Chlorophyll b* were determined by the method of Arar and Collins (1971).

Driver's Signature \_\_\_\_\_

(If driver is not the policyholder)

**Date & Time:**

Reporting Centre Personnel's Signature

Name: Wong Shouf Seng, George  
NRIC/FIN No.: G2987142X

NRIC/FIN No.: 62987142X



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



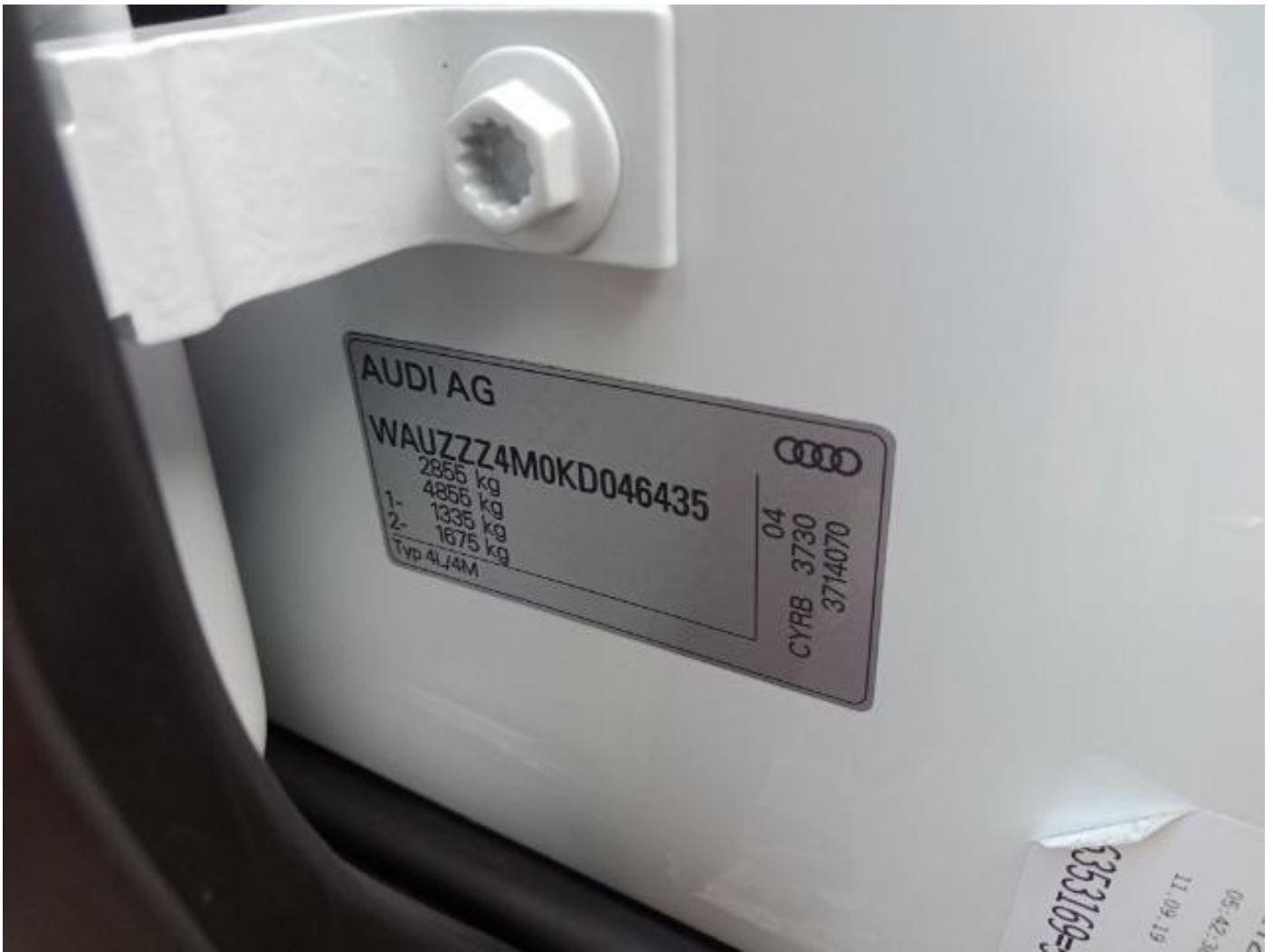
Accident Photo



Accident Photo



Accident Photo





## Addendum Sheet

ASSOCIATION  
RECORDS MANAGEMENT CENTRE

Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S66550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

#### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MPA120071623 Vehicle Registration No: SFW3104Y  
Name(as shown in NRIC) : CHONG YU SHAN, AUDREY  
(ZHANG YUSHAN, AUDREY) NRIC/FIN/Passport No : SXXXX197H  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : 33 JALAN MAT JAMBOL Singapore( 119514 )  
Contact (Tel) : 97690206 Mobile No. :  
Email Address : AUDREYCHONG0206@YAHOO.COM.SG  
Date of Accident : 21/08/2020 Time of Accident : 15:40  
Place of Accident : 33 JALAN MAT JAMBOL S119514  
Insurance Company : AIG ASIA PACIFIC INSURANCE PTE. LTD.

#### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO CONVERT FROM THIRD PARTY CLAIMS TO OWN POLICY CLAIMS AND DO RECOVERY LATER.

Policyholder / Driver's Signature

Date: 27/8/2020

Reporting Centre Personnel's Signature

Name: wong khong seng, George

NRIC/FIN No.: G2987143X

Date: 27/8/2020

ADDENDUM SHEET

ASSOCIATION  
RECORDS MANAGEMENT CENTRE

Operating Hours : Monday to Friday, 09:00 - 17:00  
UEN: S663500206 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

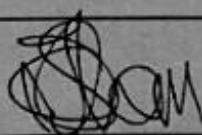
Original Report No : MPA120071623 Vehicle Registration No: SFW3104Y  
Name(as shown in NRIC) : CHONG YU SHAN, AUDREY NRIC/FIN/Passport No : SXXXX197H  
( \*Vehicle Driver / Vehicle Owner ) ( \* ) Please delete as appropriate  
Address : 33 JALAN MAT JAMBOL Singapore( 119514 )  
Contact (Tel) : 97690206 Mobile No. : \_\_\_\_\_  
Email Address : AUDREYCHONG0206@YAHOO.COM.SG  
Date of Accident : 21/08/2020 Time of Accident : 15:40  
Place of Accident : 33 JALAN MAT JAMBOL S119514  
Insurance Company: AIG ASIA PACIFIC INSURANCE PTE. LTD.


**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO CONVERT FROM THIRD PARTY CLAIMS TO OWN POLICY CLAIMS AND DO RECOVERY LATER.

To amend the date of class 3 pass date & the birth of date of Driver.

  
Policyholder / Driver's Signature  
Date: 27/8/2020

  
Reporting Centre Personnel's Signature  
Name: wong khong seng, George  
NRIC/FIN No.: G2967143X  
Date: 28/8/2020