#### 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

<ol> <li>By the lodgement of this report to the insurers, you nereby consaforesaid.</li> </ol>	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	02/08/2019 13:29
Date Of Accident	01/08/2019 12:25
Exact Location Of Accident	JALAN BUKIT MERAH
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJU8811U
Insured/Policyholder	
Name Of Registered Owner	CHAN CHU HENG ROY
NRIC No	S7244242C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96869066
Alternative Phone No	OFFICE-96869066
Vehicle Particulars	
Manufacturer	AUDI
Model	Q2 1.0 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?	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	1900062841
Cover Note Number	
Driver	

 Name of Driver
 CHAN CHEOW HO

 NRIC No
 \$0049836Z

 Date Of Birth
 \$05/03/1943

Date Of Birth 05/03/1943
Occupation INDOOR
Date Of Driving Pass 19/08/1963

Driving Experience 55 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96869066

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 105 SPOTTISWOODE PARK ROAD

#18-126

Postcode 080105

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured PARENT

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

-

2

NO

YES

NO

1

**General Information of the Accident** 

Type Of Accident SIDE SWIPE
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

ambulance?

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance

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

BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE

Police Station Address

ROAD: 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX

BLOCK A, **POSTCODE:** 088762, **COUNTRY**: SINGAPORE

NO

Police Station Contact **TEL NO**: 1800-2369999 - **FAX NO**: 62268438

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT

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 SLL2106K

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)

#### Sketch Plan

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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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)

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:
  - 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.:

SKETCH PL	AN	 	
			A - \$1088114
			B + SL L 2106
		TBDV	

#### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer +	o police p	leport.		
	respondence to	he sent to	Mr Chan C	heav Ho
BIK 105	spottis woode	Rart Road	#18-126	5(080105)
			)	

#### DECLARATION

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

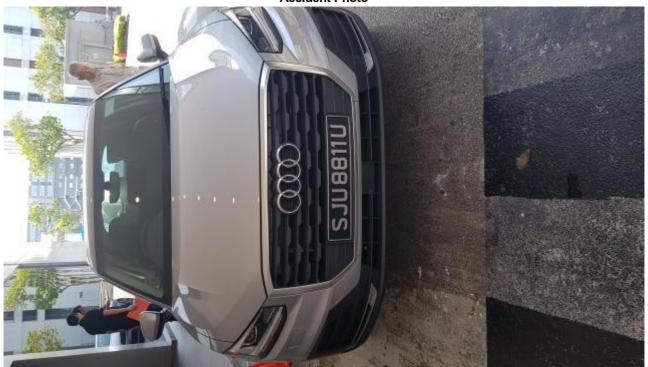
Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

























#### **Police Report**





Police Station Of Origin: Bukit Merah East N.P.C A 391 New Bridge Road Police Cantonment Complex SINGAPORE 088762 Tel No: 1800-2389999

Report No. T/20190801/2135

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.

Signature Of Informant

Date/Time: 01/08/2019 17:19

Classification Of Case

Signature Of Officer Recording The Report: A / SI FOO SHAN YI SUNNY

Signature Of Interpreter. Not applicable

Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No: 65476151

Authentication Stamp

Singapore Police Force

#### Police Report





Police Station Of Origin: Bukit Merah East N.P.C A 391 New Bridge Road Police Cantonment Complex SINGAPORE 0887\$2 Tel No: 1800-2369999 1 of 3 Report No. T/20190601/2135

REPORT OF A TRAFFIC ACCIDENT

	ne Report f 019 17:19	/lade:	Vide Report No.:	Station Diary No.: 130	
Informa	nt's Partic	ulars			
Name of Informant: CHAN CHEOW HO			Address: APT BLK 105 SPOTTISWOODE PARK ROAD #18-126 SINGAPORE 060105		
ID Type / ID No.: NRIC NO / S0049838Z			Contact No.: Home/Office:	Mobile: 96869066	
Nationality: SINGAPORE CITIZEN		EN	Email:		
Sex: Age: Date of Birth: Male 76 05/03/1943			Type of Informant. Rider		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Retiree			Driving Licence Information: Class: 2B,3	Date of Expiry	

Type of Accident	Non-Injury	Drink Drive: No	Date/Time of Accident: 01/08/2019 12:25	Type of Location Straight Road	
Lamp Post N	T MERAH erson near Lamp Post	4			
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Heavy	
One Way		Not Controlled		(164V)	

Details of V	ehicle Invo	ived				
Vehicle No.	Туре	Make	Madel	Color	Condition	No of Passenge
SJU8811U	Car	AUDI	Q2	Grey	Slightly Damaged	0
SLL2106K	Car	HONDA	Vezel	White	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA