

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	14/10/2020 12:01
Date Of Accident	13/10/2020 18:15
Exact Location Of Accident	12 SIMEI RISE B1
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLQ4048E
Insured/Policyholder	
Name Of Registered Owner	TANG SOO TECK
NRIC No	SXXXX302H
Email Address	DTGYJONG@YAHOO.COM
Mobile Phone No	(LOCAL) +65-86877588
Alternative Phone No	OFFICE-86877588
Vehicle Particulars	
Manufacturer	AUDI
Model	A3 SEDAN 1.0 TFSI 8V
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	1700025408-03
Cover Note Number	
Driver	
Name of Driver	TANG SOO TECK
NRIC No	SXXXX302H
Date Of Birth	03/11/1961
Occupation	INDOOR
Date Of Driving Pass	06/12/1986
Driving Experience	33 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86877588
Fax Number	
Contact Number	OFFICE-86877588
EEmail Address	DTGYJONG@YAHOO.COM

Address	12 SIMEI RISE #08-35
Postcode	528805
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?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGI N.P.C
Police Station Address	ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED. MY CAR WAS ALSO MOVED BACKWARD DUE TO THE IMPACT AND HIT THE BICYCLES BEHIND.

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	SJV5406X
Vehicle Make/Model/Colour	MITSUBISHI/LANCER/1.6GLX
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name	INDIA INTERNATIONAL INSURANCE PTE LTD
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: 14/10/20
11:00 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

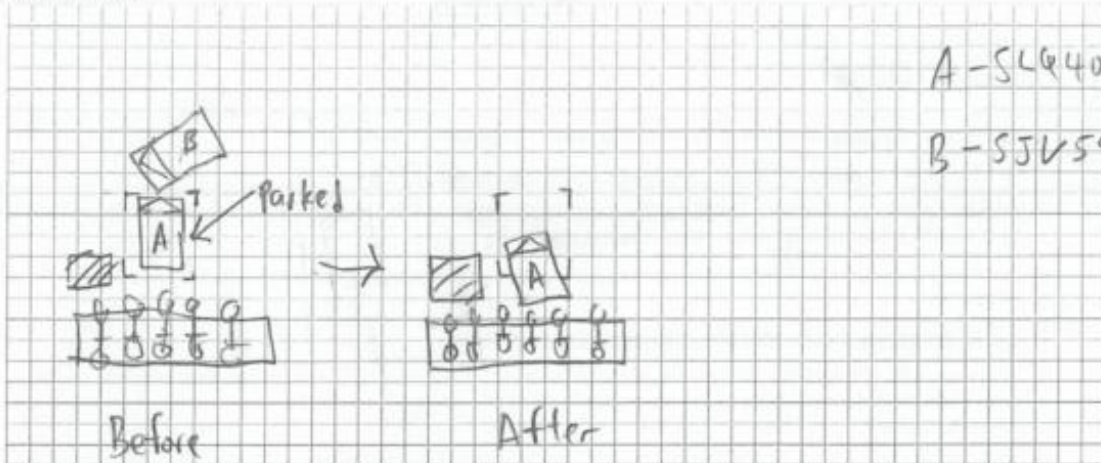


Reporting Centre Personnel's Signature

Name: Tam Fong
NRIC/FIN No.: S5000948E

Sketch Plan #2

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the Police Report Attached.
My car was also moved backward due to the impact and hit the bicycles behind.

DECLARATION

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


Policyholder's Signature
Date & Time: 14/10/20
11:00 AM
GIARMIC SketchPlanForm_V3

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



Reporting Centre Personnel's Signature
Name: Tony Foong
NRIC/FIN No.: SLQ4048E

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



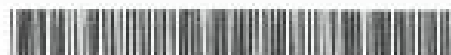
Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



G/20201013/2164

1 of 2

POLICE REPORT (NP299)

Report No. G/20201013/2164

Police Station Of Origin
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872989

Date/Time Report Made 13/10/2020 22:48	Vide Report No. G/20201013/0141	Station Diary No. 89
Name Of Informant TANG SOO TECK	Address 12 SIMEI RISE #08-35 SINGAPORE 528805	
ID Type / ID No. NRIC NO / S1497302H	Contact No. Home/Office	Mobile 86877589
Nationality SINGAPORE CITIZEN	Email Address dtgyjong@hotmail.com	
Occupation SELF EMPLOYED	Sex Male	Age 58
Institution/School Name	Date of Birth 03/11/1961	Race Chinese
Date/Time Of Incident 13/10/2020 18:50	Location Of Incident 12 SIMEI RISE CHANGI RISE CONDOMINIUM SINGAPORE 528805 Lot 98 Basement carpark	

Brief details.

On 13/10/2020 at 1850hrs, while I was at home at Blk 12 Changi Rise condominium, I received a call from the condo management informing me that someone had hit my car, Red Audi (SLQ4048E). He inform me to go down to talk a look. I parked my car at lot 98 at Blk 12 basement carpark. When I arrive I saw my vehicle had been hit on the front left side and had been moved backwards due to the impact of the collision. The vehicle that hit me was a white Mitsubishi (SJV5406X). I am lodging this report for insurance purposes. The person that was driving the other vehicle was Krishnamoorthy Venkatesh.

Signature Of Officer Recording The Report:	Signature Of Informant:
G / Insp KHALIF ADAM MALIK TIMBOEL MANIK	Date/Time: 13/10/2020 22:48
Signature Of Interpreter: Not applicable	Classification Of Case:
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Insp CHAN JUN AN, GERALD Contact No.: 62440000	

Authentication Stamp



Police Report



SINGAPORE
POLICE FORCE





G/20201013/2164

2 of 2

POLICE REPORT (NP289)

CONTINUATION OF REPORT

Report No. G/20201013/2164

Signature Of Officer Recording The Report:  G / Insp KHALIF ADAM MALIK TIMBOEL MANIK	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 13/10/2020 22:48
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Insp CHAN JUN AN, GERALD Contact No.: 62440000	Classification Of Case:

Authentication Stamp

