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 aforesaid.

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		ACCIDENT STATEMENT			
	Date Of Report	19/10/2020 15:05			
	Date Of Accident	16/10/2020 18:25			
	Exact Location Of Accident	JALAN BUKIT MERAH OUTSIDE NEA BUILDING			
	Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE				
	Vehicle Registration Number	SGS3446U			
	Insured/Policyholder				
	Name Of Registered Owner	LIM GEOK LIN			
	NRIC No	SXXXX677I			
	Email Address	LIMMORGAN@GMAIL.COM			
	Mobile Phone No	(LOCAL) +65-96809886			
	Alternative Phone No	OTHERS-96614671			
	Vehicle Particulars				
	Manufacturer	MITSUBISHI			
	Model	LANCER			
	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?	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	THIRD PARTY FIRE AND/OR THEFT			
	Fleet Policy	NO			
	Policy Number	2100009202-13			
	Cover Note Number				

 riv	or

Name of Driver LIM HUNG YEOW NRIC No SXXXX219F Date Of Birth 07/08/1954 Occupation **OUTDOOR Date Of Driving Pass** 25/07/1985 **Driving Experience** 35 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96809886

Fax Number

OTHERS-96614671 Contact Number

EMail Address LIMMORGAN@GMAIL.COM Address BLK 621 YISHUN RING ROAD

#09-3162

Postcode 760621

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured SPOUSE

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

2

NO

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? NO

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) 2

Passenger 1 NAME: : WIFE

GENDER: : FEMALE

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

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

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

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201016/2102

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 FBF4477B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver MOHAMAD SAFARI BIN ZAINUDIN

NRIC/Passport Number GXXXX579X
Contact Number 94655793

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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. 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
- (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 polic Date & Time:

NRIC/FIN No.

Accident Sketch Plan

SKETCH PLAN		上、110	1	
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A) 4844117B				
B)548 3446 U	1 1 1			
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DESCRIBE CIRCUMSTANCES O	F THE ACCIDENT JALAN	U BUKIT	MERAT	
REFER TO PO	lich Rupor).	T/20201016		
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DECLARATION	1			
I/We declare the foregoing particu	lars are true in overy respect.	10010	/	1/0001
Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholo	() WW	Reporting Centre P Name:	ersonner's Signature 75 B

POLICE REPORT



T/20201016/2102

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

1 of 3 Report No. T/20201016/2102

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/10/2020 21:33		Made;	Vide Report No.:	Station Diary No.	
Informa	nt's Partic	ulars		93	
Name o	f Informant NG YEOW		Address: APT BLK 621 YISHUN RING	ROAD #09-3162 SINGAPORE	
ID Type / ID No.: NRIC NO / S0232219F Nationality: SINGAPORE CITIZEN			Contact No.:		
			Email:	Mobile: 96614671	
Sex: Male	Age: 66	Date of Birth: 07/08/1954	Type of Informant: Driver		
Race: Chinese Occupation: DELIVERY DRIVER			Language:	Institution / School Name:	
			Driving Licence Information: Class:	Date of Expiry:	

Type of	Mation of the Accid	Drink	Date/Time of Type of Location		
Accident:		Drive:	Accident:	Type of Location	
Location:		No	16/10/2020 18:25	Straight Road	
Weather:					
		Road Surface:		Road Speed Limit:	
Clear Traffic Flow:		Dry Traffic Control:			
Clear Traffic Flow: One Way Type of Collis	ion:	Dry		Road Speed Limit: Traffic Volume: Heavy	

Type	Make	Made			
	- International	Model	Color	Condition	No of Passenge
Wictorcycle				No	0
Car				Damage	
Cal				Slightly	1
		Motorcycle Car	Motorcycle	Motorcycle	Motorcycle No Damage

POLICE REPORT



T/20201018/2102

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/20201016/2102

CONTINUATION OF REPORT

Brief Details.

On the 16 October 2020 at 1825hrs, I was driving my vehicle bearing plate number SGS 3446U along Jin Bukit Merah (infront of the NEA building). I wanted to make a U-turn as I wanted to enter Bukit Merah Lane 4. As the vehicle from the opposite direction were at stand still(yellow box, not sure if the traffic light was red or green), I slowly make a u turn. Suddenly a motorcycle from Sarpinos Pizza bearing plate number FBF 4477B from the opposite direction hit onto the front left side bumper of my car which caused it to dislodge. We then parked at the side and both of us were not injured. I would like to said that he managed to balance himself after hitting the front left side of my car.

Both of us then exchanged particular. We also take photos of the damages. There were also no damages on the motorcycle. We then proceed to my workshop located at Blk 1005 Jln Bukit Merah. The mechanic informed that they will fixed the bumper for me. The rider then told the mechanic that he will motorcycle outside the workshop so that his company will activate tow truck to tow his

I am lodging the Police report as the rider informed that the motorcycle that he rode was a rental one and his company need a Police report. I would like to state that I did not have any in car camera in my

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. T/20201016/2102

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 65474885 stating the **report** number as reference.

Signature Of Officer Recording The Report: L / Staff Sgt NASRI BIN JUMARI	Signature Of Informant:		
Signature Of Interpreter: Not applicable	Date/Time: 16/10/2020 21:33		
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:		
Authentication Stamp			



























