

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	22/10/2020 16:05
Date Of Accident	22/10/2020 13:45
Exact Location Of Accident	AYE(JUST BEFORE NORMANTON PARK EXIT 7A)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMG2416E
Insured/Policyholder	
Name Of Registered Owner	CHAO LYNNE MAREE @ BEASLEY LYNNE MAREE
NRIC No	SXXXX781A
Email Address	LYNNEMCHAO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81510637
Alternative Phone No	OTHERS-81510637

Vehicle Particulars

Manufacturer	AUDI
Model	A5 SB 2.0 TFSI S TRONIC (DESIGN)
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	1800142787-01
Cover Note Number	

Driver

Name of Driver	CHAO LYNNE MAREE @ BEASLEY LYNNE MAREE
NRIC No	SXXXX781A
Date Of Birth	21/08/1959
Occupation	INDOOR
Date Of Driving Pass	20/06/2000
Driving Experience	20 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81510637
Fax Number	
Contact Number	OTHERS-81510637
Email Address	LYNNEMCHAO@GMAIL.COM

Address	335 BUKIT TIMAH ROAD #28-01
Postcode	259718
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)	3
Passenger 1	NAME: : JOSEPH CHAO GENDER: : MALE
Passenger 2	NAME: : JORDAN CHAO GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

DRIVING IN LEFT MOST LANE ON AYE AND LARGE TRUCK DROVE INTO MY LANE SIDE SWIPE MY SIDE MIRROR/CAR. UNABLE TO SEE THE TRUCK NUMBER PLATE THROUGH THE VIDEO FOOTAGE, BUT CAN SEE 'RTC GROUP' ON THE SIDE OF THE TRUCK.

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	UNKNOWN
Vehicle Make/Model/Colour	TRUCK
Details Of Properties	

Vehicle Category	COMMERCIAL VEHICLE
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

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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)**

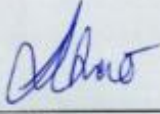
I understand, acknowledge, agree and consent that:

- (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: 22/10/2020 @ 14:45



Driver's Signature

(If driver is not the policyholder)

Date & Time: 22/10/2020 @ 14:45



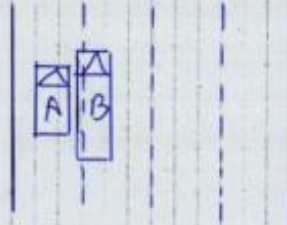
Reporting Centre Personnel's Signature

Name: Raymond Sing Sing Wei

NRIC/FIN No.: 6xxxx100x

Sketch Plan #2

SKETCH PLAN



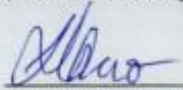
A= SMG2416E
B= Truck / Unknown

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DRIVING IN LEFT MOST LANE ON AVE AND LARGE TRUCK DROVE INTO MY LANE SIDESWIPING MY SIDE MIRROR / CAR. UNABLE TO SEE THE TRUCK NUMBER PLATE THROUGH THE VIDEO FOOTAGE, BUT CAN SEE "KTC GROUP" ON THE SIDE OF THE TRUCK.

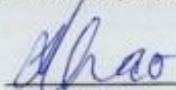
DECLARATION

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



Policyholder's Signature

Date & Time: 22/10/2020 @ 14:45



Driver's Signature

(If driver is not the policyholder)

Date & Time: 22/10/2020 @ 14:45

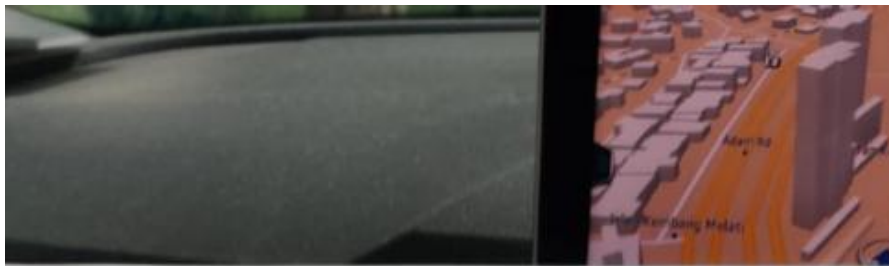


Reporting Centre Personnel's Signature

Name: Raymond Ting Jing Wei

NRIC/FIN No.: 6xxxxxx00x

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T:20201022/7021

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No: T:20201022/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/10/2020 15:58	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: CHAO LYNNE MAREE			Address: 335 BUKIT TIMAH ROAD #28-01 WING ON LIFE GARDEN SINGAPORE 259718		
ID Type / ID No.: NRIC NO / S2892781A			Contact No.: Home/Office: Mobile: 81510637		
Nationality: AUSTRALIAN			Email: lb464lb464@gmail.com		
Sex: Female	Age: 61	Date of Birth: 21/08/1959	Type of Informant: Driver		
Race: Caucasian			Language: English		Institution / School Name:
Occupation: Housewife			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury: Hit and Run	Drink Drive: No	Date/Time of Accident: 22/10/2020 13:43	Type of Location: highway
Location: AYER RAJAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
-	Dump Truck			Multi-Colored		0
SMG2416E	Car	AUDI	A5	Grey		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201022/7021

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20201022/7021

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG2416E	AIG ASIA PACIFIC INSURANCE PTE. LTD.			

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	CHAO LYNNE MAREE		ID No.	S2692781A
Related Vehicle	SMG2416E (Car)		Contact No.	81510637
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Driver				
Name	-		ID No.	-
Related Vehicle	NIL		Contact No	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

Today on 22/10/20 at 13:43 I was driving in the left most lane on AYE just before exit 7A and a large truck cut into my lane (side swiping side of my car). The truck kept driving without stopping. My vehicle has an in car camera which captured the incident. I'm driving an Audi A5 (grey colour) SMG2416E. I did not see the plate no. of the truck, but we can see the company name of the truck, which is KTC Group.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20201022/7021

3 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000

Report No. T/20201022/7021

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
NEO ZHI YUAN
Contact No.: 65476079

Authentication Stamp
SP158

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
22/10/2020 15:56

Classification Of Case:

Accident Photo



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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