

## 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 Submission ..... 21/12/2020 15:49 (SGT)  
Date of Accident ..... 20/12/2020 12:20 (SGT)  
Exact Location of Accident ..... Near 410 Ang Mo Kio Ave 10, Singapore 560410  
Additional Location Information ..... ANG MO KIO AVE 10 NEAR BLK 409 CARPARK  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLX816U

#### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LIM TENG TIN ROCHELLE(LIN TINGZHEN)  
NRIC No ..... SXXXX479H  
Email Address ..... ROCHELLETT168@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-83831618  
Alternative Phone No ..... +65-83831618

#### VEHICLE PARTICULARS

Manufacturer ..... Audi  
Model ..... Q2  
Variant ..... -  
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  
Vehicle Category ..... Private car

#### INSURANCE COMPANY

Name of Insurance Company ..... AIG  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 1900080799  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... LIM TENG TIN ROCHELLE(LIN TINGZHEN)  
NRIC No ..... SXXXX479H  
Date Of Birth ..... 16/08/1978  
Occupation ..... Indoor

Date Of Driving Pass .....	30/07/1998
Driving experience .....	22 YEARS AND 5 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-83831618
Alt. Phone Number .....	+65-83831618
Email Address .....	ROCHELLETT168@GMAIL.COM
Address .....	BLK 1 LIEW LAN VALE
Address complement .....	#01-08
Postcode .....	537016
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
Does Driver Own Other Vehicles? .....	No
Vehicle Registration Number of Other Vehicle Owned by Driver .....	-
Insurance Company of Other Vehicle Owned by Driver .....	-

#### 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 the accident? .....	No
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Ang Mo Kio Division Headquarters
Police Station Phone No .....	(Phone) +65-18002180000
Alt. Police Station Phone No .....	(Fax) +65-64814246
Police Station Address .....	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given? .....	No
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 .....	-
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-

Address ..... -  
Address complement ..... -  
Postcode ..... -  
Insurance Company Name ..... -  
Nature Of Damage ..... -  
Details of property damaged in accident ..... -  
No. Of Passenger (Including Driver) ..... -


**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 signing 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.

 21 Dec 2020 12:40pm  
 Policyholder's Signature  
 Date & Time:

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

  
 Reporting Centre Personnel's Signature  
 Name: Lim Kee Seng  
 NRIC/FIN No.: XXXXXXXXXX

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SINGAPORE POLICE FORCE		F/2020/1220/7047		1 of 2	
<b>POLICE REPORT (NP295)</b> Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No: 1800-2180000			Report No. F/2020/1220/7047		
Date/Time Report Made		Vide Report No.		Station Diary No.	
20/12/2020 20:16					
Name Of Informant		Address			
LIM TENG TIN ROCHELLE		11 LEW LIAN VALE #01-08 SINGAPORE 537016			
ID Type / ID No.		Contact No.			
NRIC NO / S7824479H		Home/Office: Mobile: 83831618			
Nationality		Email Address			
SINGAPORE CITIZEN		rochellott168@gmail.com			
Occupation		Sex	Age	Date of Birth	Race
bank officer		Female	42	16/08/1978	Chinese
Institution/School Name		Language			
		English			
Date/Time Of Incident		Location Of Incident			
20/12/2020 12:20 - 20/12/2020 14:50		ANG MO KIO AVENUE 10			
<b>Brief details.</b>					
<p>I parked my car (Audi Q2, SLX816U, Orange colour) at the public parking space (lot 30) near Blk 409 Ang Mo Kio Market and Food Centre at 12.21pm today. When I returned to my car after lunch at 2.50pm, I discovered scratch marks on the front left of my bumper. My car paint had come off, and I saw some white paint where the scratches were. I spoke with the lorry driver parked at Lot 31 whether he saw any car parked at his lot before he came, but he said the lot was empty when he arrived and he had already parked there for 5 minutes, waiting for his workers.</p> <p>I did not notice any scratch marks on my car before today. Hence, the accident was likely to have</p>					
Signature Of Officer Recording The Report:		Signature Of Informant:			
Not applicable		The identity of the person making this report has been authenticated by SingPass. No signature is required.			
Signature Of Interpreter:		Date/Time:			
Not applicable		20/12/2020 20:16			
Officer In-Charge Of Case:		Classification Of Case:			
Authentication Stamp					





SINGAPORE  
POLICE FORCE



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20201220/7047

happened between 12.21pm and 2.45pm today. Unfortunately, some of the videos in the SD card of my car camera had been overwritten and I only managed to capture (1) the car that was parked there when I first arrived, and (2) the arrival and departure of the lorry. I was unable to retrieve videos of other cars that came within that timeframe.

<b>Subjects Involved</b>			
<b>Suspect</b>			
Person Name	Unknown		
Gender	Unknown		
<b>Victim</b>			
Person Name	LIM TENG TIN ROCHELLE		
ID Type	NRIC NO	ID No	S7824479H
Gender	Female	Age	42
Race	Chinese	Language	English
Occupation	bank officer	Address	1 LEW LIAN VALE #01-08 SINGAPORE 537016
Mobile No	83831618	Is Informant A Victim?	Yes
Person Name: LIM TENG TIN ROCHELLE (Informant)			

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter:	Date/Time:
Not applicable	20/12/2020 20:16
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	