

SS1Y21150009 / SME MOTOR PTE LTD  
 ENTRY DATE & TIME: 05/01/2021 16:45 (SGT)  
 SUBMITTED BY: Chia Pei Ying  
 VERSION: 1 (05/01/2021 16:45 (SGT))

 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	05/01/2021 16:45 (SGT)
Date of Accident	04/01/2021 09:30 (SGT)
Exact Location of Accident	3 Simei Street 3, Singapore 529891
Additional Location Information	SIMEI STREET 3 TWDS SIMEI STREET 4
Country/State of Loss	Singapore

**DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMG4877U

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LI MINGJIE
NRIC No	SXXXX848D
Email Address	li_mj_82@hotmail.com
Mobile Phone No	(Phone) +65-96638244
Alternative Phone No	+65-96638244

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
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?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	AIG
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800151381-02
Cover Note Number	-

DRIVER

Name of Driver	LI MINGJIE
NRIC No	SXXXX848D
Date Of Birth	02/11/1982
Occupation	Indoor

Date Of Driving Pass	10/06/2004
Driving experience	16 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96638244
Alt. Phone Number	+65-96638244
Email Address	li_mj_82@hotmail.com
Address	121 COMPASSVALE BOW #12-24
Address complement	-
Postcode	544818
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	Collision - Head to Rear
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	UNKNOWN
Gender	Female

#### PASSENGER 2

Name	UNKNOWN
Gender	Female

#### PASSENGER 3

Name	UNKNOWN
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20210105/7006.

#### 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	SKT9249E
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	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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) 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:

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

\_\_\_\_\_  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

GIA/SA's Vehicle Information #2

 I authorized SME to Email the GIA Report  
 to admin@nhrtmotor.com | yunli@nhrtmotor.com





**SINGAPORE  
POLICE FORCE**



T/20210105/7006

1 of 3

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

Report No: T/20210105/7006

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 05/01/2021 10:23	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: LI MINGJIE			Address: 121 COMPASSVALE BOW #12-24 SINGAPORE 544818		
ID Type / ID No.: NRIC NO / S8234848D			Contact No.: Home/Office: Mobile: 96638244		
Nationality: SINGAPORE CITIZEN			Email: li_mj_82@hotmail.com		
Sex: Male	Age: 38	Date of Birth: 02/11/1982	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Management executive			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/01/2021 21:30	Type of Location: Straight Road
Location:  SIMEI STREET 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKT9249E	Car					0
SMG4877U	Car	SUBARU	FORESTER 2.0I-L CVT AWD SR	Brown		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE  
POLICE FORCE**



T/20210105/7006

2 of 3

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

Report No. T/20210105/7006

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG4877U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800151381-02	21/12/2020	20/12/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LI MINGJIE		ID No.	S8234848D
Related Vehicle	SMG4877U (Car)		Contact No.	96638244
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.

I (SMG4877U) was stopped with stationary position at Simei Street 3 towards Simei Street 4 at 3rd lane of 4 lanes as the traffic light was red. Suddenly, I felt an impact. Vehicle B (SKT9249E) collided into the rear portion of my vehicle and caused damages. After the accident, I was alighted had a wave hand to Vehicle B (SKT9249E) but Vehicle B (SKT9249E) driver did not came out and drove off.



**SINGAPORE  
POLICE FORCE**



T/20210105/7006

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

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Report No. T/20210105/7006

**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 / TPIB / GOH GEOK LYE Contact No.: 65476148

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 05/01/2021 10:23
Classification Of Case:

Authentication Stamp  
NP168