

# 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 ..... 05/04/2021 12:24 (SGT)  
Date of Accident ..... 03/04/2021 09:20 (SGT)  
Exact Location of Accident ..... 78 Moh Guan Terrace, Singapore 162078  
Additional Location Information ..... MOH GUAN TERRACE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKT8128C

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... WONG WENG SZE  
NRIC No ..... SXXXX778E  
Email Address ..... charlynwongws@gmail.com  
Mobile Phone No ..... (Phone) +65-82288990  
Alternative Phone No ..... +65-82288990

### VEHICLE PARTICULARS

Manufacturer ..... LandRover  
Model ..... DISCOVERY SPORT 2.0P R-DYNAMIC SE 7S  
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  
Transmission ..... Auto  
CC ..... 2000

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... -  
Cover Note Number ..... 7210019810

### DRIVER

Name of Driver ..... WONG WENG SZE  
NRIC No ..... SXXXX778E

Date Of Birth .....	20/06/1968
Occupation .....	Indoor
Date Of Driving Pass .....	20/01/1995
Driving experience .....	26 YEARS AND 3 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-82288990
Alt. Phone Number .....	+65-82288990
Email Address .....	charlynwongws@gmail.com
Address .....	4 JALAN BANGAU
Address complement .....	-
Postcode .....	809349
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 .....	Collided into Parked Vehicle
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 .....	Sengkang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18003438999
Alt. Police Station Phone No .....	(Fax) +65-63438939
Police Station Address .....	2 Sengkang Square #01-02
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT.

#### 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 .....	GBE9983D
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle

Name of Driver .....	MR. ISHININ, (GEOMETRA WORLDWIDE MOVERS)
Contact Number .....	(Phone) +65-98280406
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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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 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.
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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

REFER TO VIDEO

(A) SKT 8128C


(B) GRE 9983D


Describe Circumstances of the Accident

REFR TO POLICE REPORT NO.  
T/20210403/2051

Declaration

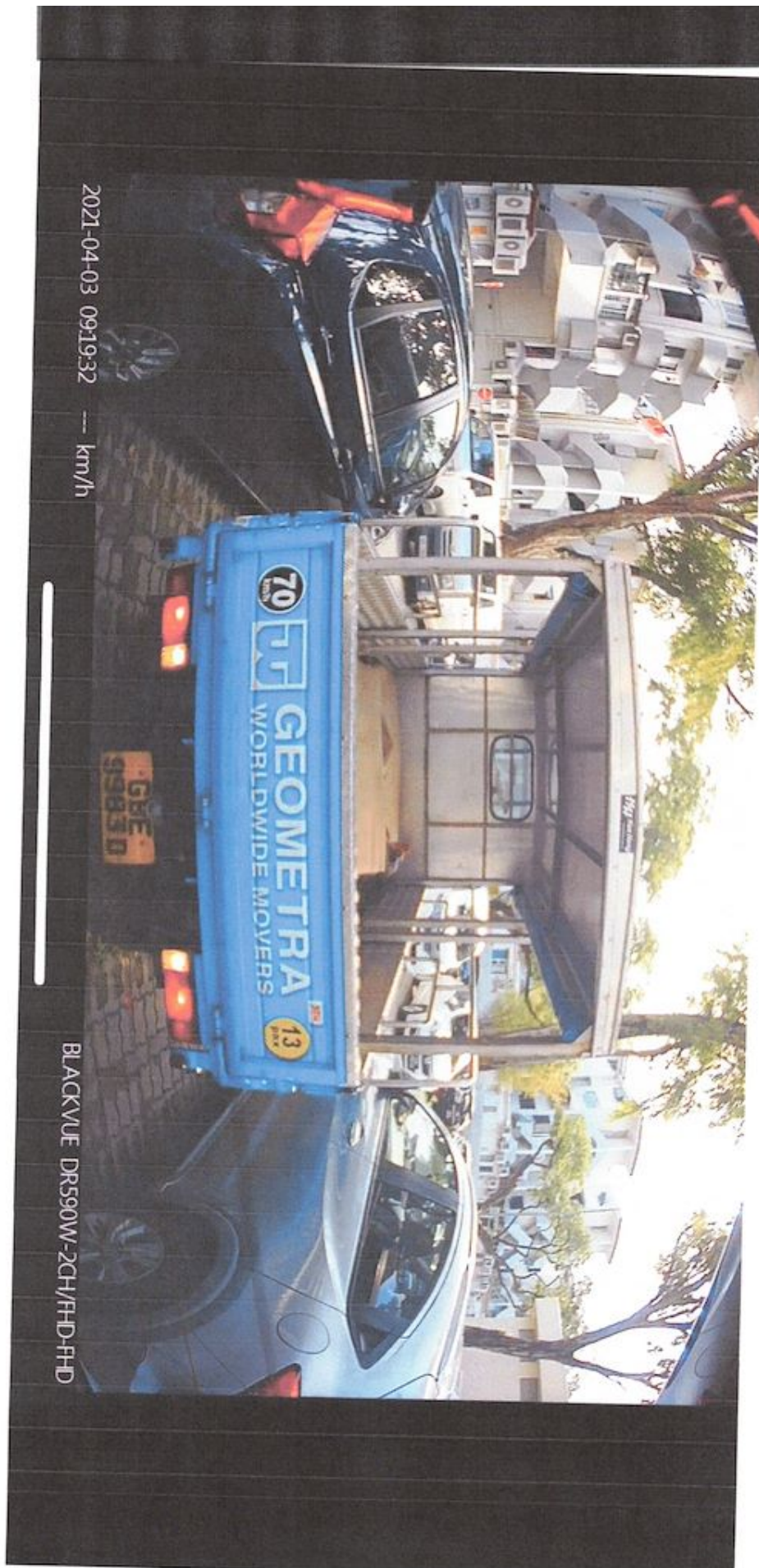
We declare the foregoing particulars are true in every respect.

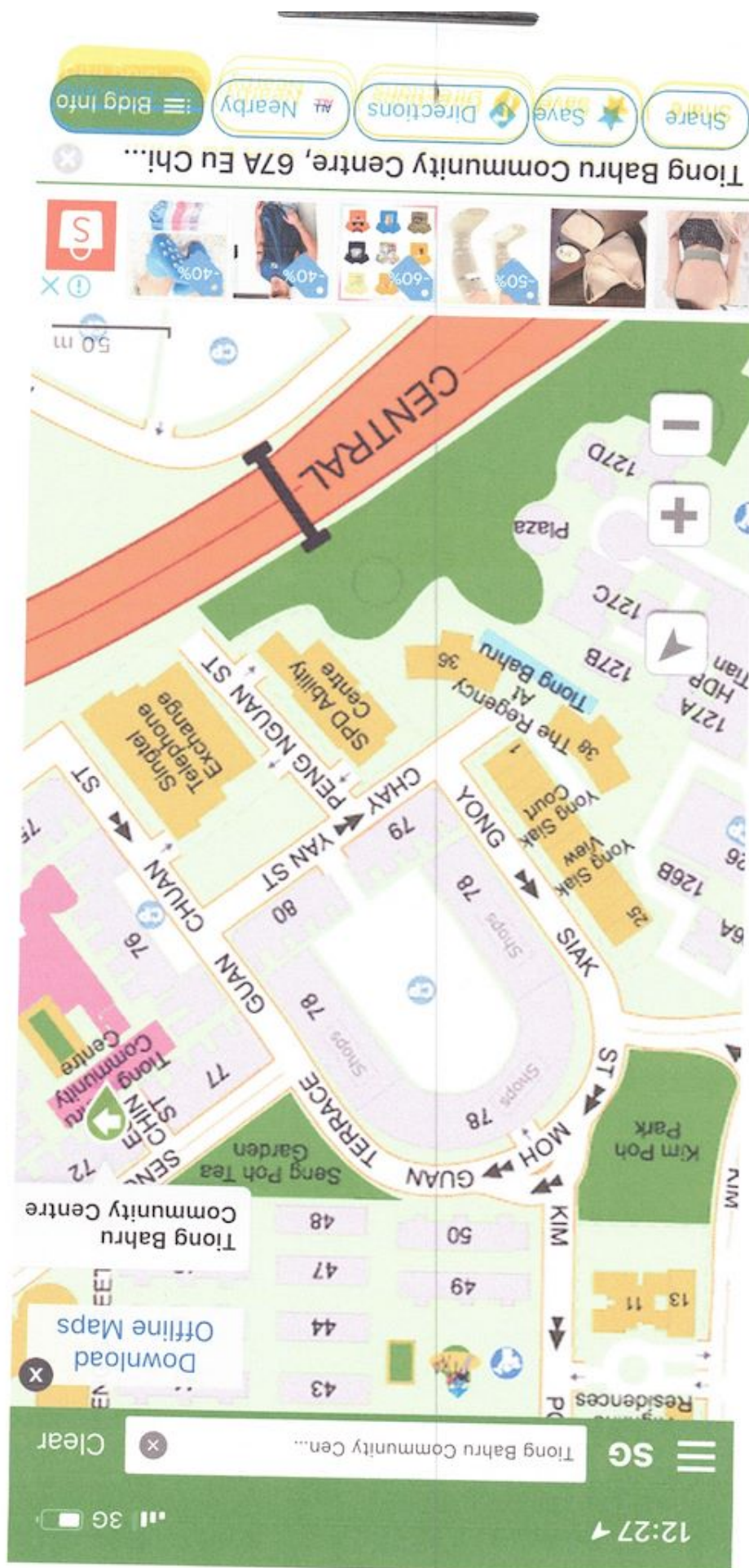
  
Policyholder's Signature / Date & Time

  
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

















































# SINGAPORE POLICE FORCE

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999



T/20210403/2051

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Report No. T/20210403/2051

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/04/2021 14:03	Vide Report No.:	Station Diary No.: 22
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### Informant's Particulars

Name of Informant: WONG WENG SZE	Address: 4 JALAN BANGAU SINGAPORE 809349		
ID Type / ID No.: NRIC NO / S6823778E	Contact No.:	Mobile: 82288990	
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Female	Age: 52	Date of Birth: 20/06/1968	Type of Informant: Driver
Race: Chinese	Language:	Institution / School Name:	
Occupation: Company director	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: 03/04/2021 09:20	Type of Location: Car Park
Location:  MOH GUAN TERRACE			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume:	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE9983D	Lorry					0
SKT8128C	Car	LAND ROVER	DISCOVERY SPORT 2.0P R-DYNAMIC SE 7S	Blue	Slightly Damaged	0

### Details of Vehicle Insurance

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

Police Station Of Origin:  
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2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999



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Report No. T/20210403/2051

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKT8128C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210019810	26/02/2021	25/02/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WONG WENG SZE		ID No. S6823778E
Related Vehicle	NIL		Contact No. 82288990
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 03/04/2021 at about 0916hrs, I had parked my vehicle (SKT8128C) at Blk 78-80 Moh Guan Terrace carpark in lot 119, and saw that everything was intact. I then returned back to my vehicle at about 1040hrs, and discovered that there were some dents in the door of my boot. When I checked my in car camera and saw that at about 0918hrs, there was a lorry bearing license plate GBE9983D was reversing into the lot directly behind my vehicle. While reversing his vehicle had knocked into the rear of my vehicle. The lorry left at about 1016hrs, and the driver did not leave any note or informing about the damage. From the video, there was a company name (Geometra Worldwide Movers) and contact number which my husband then called and managed to get the name and he also managed to contact of the driver, Mr Ishinin HP: 98280406, but the driver has not responded on compensation.

I wish to state that my vehicle had suffered some dents on the boot door and it caused some issues to the closure of my boot, also I have an in car camera which recorded the incident.



**SINGAPORE  
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Tel No: 1800-343 8999



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Report No. T/20210403/2051

**CONTINUATION OF REPORT**

**Sketch Plan**

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:

F /  
Staff Sgt WEE JUN WEI, MOSES

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
03/04/2021 14:03

Officer In Charge Of Case:  
TP / HRT /  
Insp GOH GEOK LYE  
Contact No.: 65476148

Classification Of Case:

Authentication NP168	 SINGAPORE POLICE FORCE SAFEGUARDING EVERY DAY	SN 159  SIGNATURE
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