

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 29/04/2021 12:59 (SGT)
Date of Accident 29/04/2021 08:15 (SGT)
Exact Location of Accident Montreal Dr, Singapore
Additional Location Information MONTREAL DRIVE/SEMBAWANG ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT504D

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAN HUIFANG
NRIC No S9015465F
Email Address FENETTAN@GMAIL.COM
Mobile Phone No (Phone) +65-82237309
Alternative Phone No (Home) +65-91541265

VEHICLE PARTICULARS

Manufacturer Kia
Model Cerato
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
Transmission Auto
CC 1600

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 2070056739
Cover Note Number -

DRIVER

Name of Driver CHUA HAN TONG, DOMINIC
NRIC No S9021595G

Date Of Birth	12/06/1990
Occupation	Indoor
Date Of Driving Pass	04/12/2020
Driving experience	4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91541265
Alt. Phone Number	-
Email Address	DOMINICHUA@HOTMAIL.COM.SG
Address	BLK 107B CANBERRA STREET
Address complement	#11-599
Postcode	752107
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LIAM CHUA SHENG ANG
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sembawang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005549999
Police Station Address	4 Sembawang Crescent Singapore 757633
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT
COLLISION-HEAD TO SIDE

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	FBQ9455Z
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Motorcycle
Name of Driver	MUHAMMED ROSDI BIN SAIDI
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMMED ROSDI BIN SAIDI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBQ9455Z
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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' 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

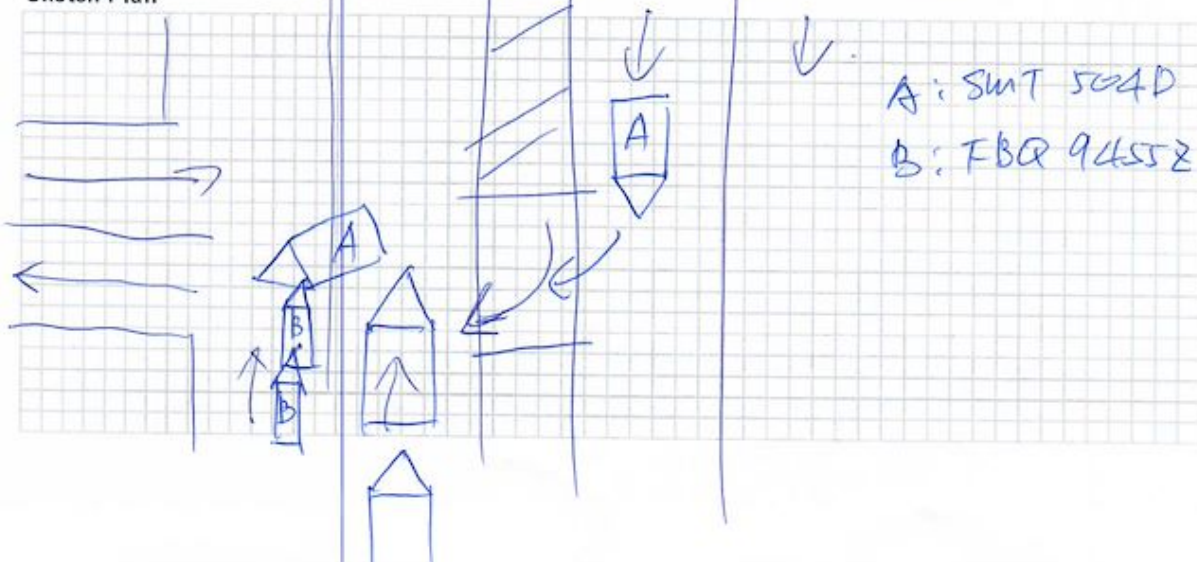
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 29/4/21 at about 0815hrs, I was driving my vehicle (SMR50410) along Leithway road when I approach the junction of Mordred link. I was going to make a right turn into Mordred link and the car from the Mordred link side had stopped to give way as it was my right of way.

As I was turning into Mordred link, a motorcycle (FDW 94552) was on the left side of the two lane road (more) forward, the middle) had come out and hit onto the front left side of my vehicle.

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



T/20210429/2026

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

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Report No. T/20210429/2026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/04/2021 11:01	Vide Report No.: L/20210429/0069	Station Diary No.: 26
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Informant's Particulars

Name of Informant: CHUA HAN TONG, DOMINIC			Address: APT BLK 107B CANBERRA STREET #11-599 SINGAPORE 752107	
ID Type / ID No.: NRIC NO / S9021595G			Contact No.: Home/Office: Mobile: 91541265	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 30	Date of Birth: 12/06/1990	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SAF Regular			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/04/2021 08:15	Type of Location: T-Junction
Location: SEMBAWANG ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBQ9455Z	Motorcycle			Red	Slightly Damaged	0
SMT504D	Car	KIA	cerato	White	Seriously Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMT504D	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070056739	26/03/2020	25/03/2022



SINGAPORE POLICE FORCE

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999



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Report No. T/20210429/2026

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	Muhammad Rosdi Bin Saidi	ID No.	S8528962D
Related Vehicle	FBQ9455Z (Motorcycle)	Contact No.	91165325
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
Driver			
Name	CHUA HAN TONG, DOMINIC	ID No.	S9021595G
Related Vehicle	SMT504D (Car)	Contact No.	91541265
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 29/04/2021 at about 0815hrs, I was driving my vehicle bearing the registration number SMT504D along Sembawang Road when I approached the junction of Montreal Link. I was going to make a right turn into Montreal Link and the cars from the Montreal Link side had stopped to give way as it was my right of way.

As I was turning in to Montreal Link, a motorcycle bearing the registration number FBQ9455Z was on the left side of the two lane road (more towards the middle) had came out and hit onto the front left side of my vehicle. I had then alighted to make a check and called for the police and ambulance. The motorcyclist was conscious however was subsequently conveyed to the hospital by the ambulance.

My son and I currently do not have any injuries that we know of. My whole front part of the car is damaged and the left side of the car also had dents.



SINGAPORE POLICE FORCE



T/20210429/2026

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Report No. T/20210429/2026

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

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: L / Staff Sgt HAZIQ HAMIZI BIN MAZURI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/04/2021 11:01
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt MOHAMMED FEROUZ BIN HUSSEIN Contact No.: 65476206	Classification Of Case:
Authentication Stamp NP168	Signature:

Singapore Police Force