

# 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 .....              | 21/07/2021 14:36 (SGT)                  |
| Date of Accident .....                | 19/07/2021 20:55 (SGT)                  |
| Exact Location of Accident .....      | Bras Basah Rd, Singapore                |
| Additional Location Information ..... | BRAS BASAH ROAD, RIGHT AFTER HANDY ROAD |
| Country/State of Loss .....           | Singapore                               |

## DETAILS OF OWN VEHICLE

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SMX8265U |
|-----------------------------------|----------|

### INSURED/POLICYHOLDER

|                                |                             |
|--------------------------------|-----------------------------|
| Is company? .....              | Yes                         |
| Name Of Registered Owner ..... | PREMIUM AUTOMOBILES PTE LTD |
| Company Reg No .....           | 199902271W                  |
| Email Address .....            | CLAIMS@PREMIUMAUTO.COM.SG   |
| Mobile Phone No .....          | (Phone) +65-66900280        |
| Alternative Phone No .....     | +65-66900293                |

### VEHICLE PARTICULARS

|  |             |
|--|-------------|
| Manufacturer .....   | Audi        |
| Model .....  | A3          |
| 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 .....   | 1000        |

### INSURANCE COMPANY

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

### DRIVER

|                      |             |
|----------------------|-------------|
| Name of Driver ..... | TEH QINGYIN |
| NRIC No .....        | S9480468Z   |

|  |                            |
|--|----------------------------|
| Date Of Birth .....  | 20/05/1994                 |
| Occupation .....   | Indoor                     |
| Date Of Driving Pass .....   | 10/05/2013                 |
| Driving experience .....   | 8 YEARS AND 2 MONTHS       |
| Gender .....   | Male                       |
| Mobile Number .....  | (Phone) +65-98352650       |
| Alt. Phone Number .....  | -                          |
| Email Address .....  | TEH.ALFREDLINK@HOTMAIL.COM |
| Address .....  | 33 KEPPEL BAY VIEW         |
| Address complement .....   | #21-94                     |
| Postcode .....   | 098419                     |
| Is the driver the policyholder? .....                              | No                         |
| If No, Relationship of the Driver with the Insured .....           | Paid Driver                |
| 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 vehicle or property damaged? .....  | Yes |
| Number of Passengers (Including Driver) .....   | 1   |
| 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 .....                       | 51 KILLINEY ROAD SINGAPORE 239572 |
| Was notice of intended Prosecution given? ..... | No                                |
| If yes, against whom? .....                     | -                                 |

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN & ACCIDENT STATEMENT

#### 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 ..... | SHD15S               |
| Vehicle Manufacturer .....        | -                    |
| Vehicle Model .....               | -                    |
| Vehicle Variant .....             | -                    |
| Vehicle Colour .....              | -                    |
| Vehicle Category .....            | Taxi                 |
| Name of Driver .....              | MR LIO               |
| NRIC No .....                     | S1689585G            |
| Contact Number .....              | (Phone) +65-96900474 |

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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## 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.

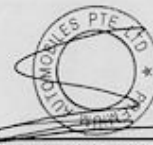


Policyholder's Signature / Date & Time  
21/7/2021 @ 10:00am

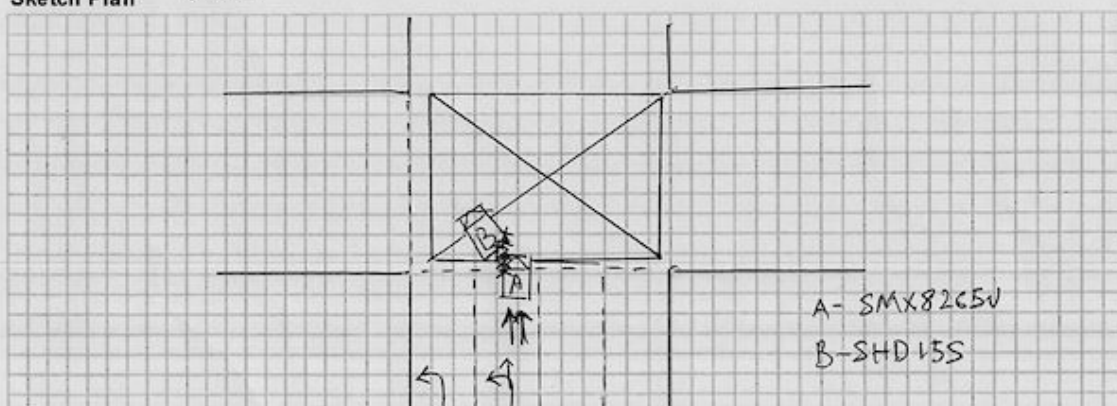
Sketch Plan

*Signature*

Driver's Signature (If driver is not the policyholder) / Date & Time  
21/7/2021 @ 10:00am



Witnessed by Reporting Centre Personnel





**Describe Circumstances of the Accident**


Was on the left most lane, where cars may either turn left or continue straight, on orchard road towards Handy road. Toward the junction, the road splits into two lanes, where the left side turns left and right side can either turn left or continue straight. As I was going to turn left after the junction, I stayed on the right (second lane from the left). In front of me there were two taxis, all of us stationary at the red light.

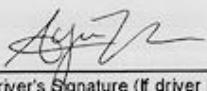
The light turned green and everyone started setting off. The cars in front turned left and continued straight. However, the cars turning left stopped, with the one most in front at the edge of the lane. By the time I saw them stop on the left side, it was too late to brake. The front left bumper of my car hit the back right corner of the taxi in front, as the taxi was mostly turned out of the lane but then stopped.

Traffic police quickly arrived and brought all cars to a safe location. No one was injured, no government property was damaged and the taxi hit was Singapore registered.

**Declaration**

We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature / Date & Time  
 21/7/2021 @ 10:00am

  
 Driver's Signature (If driver is not the policyholder) / Date & Time  
 21/7/2021 @ 10:00am

  
 Witnessed by Reporting Centre Personnel



























































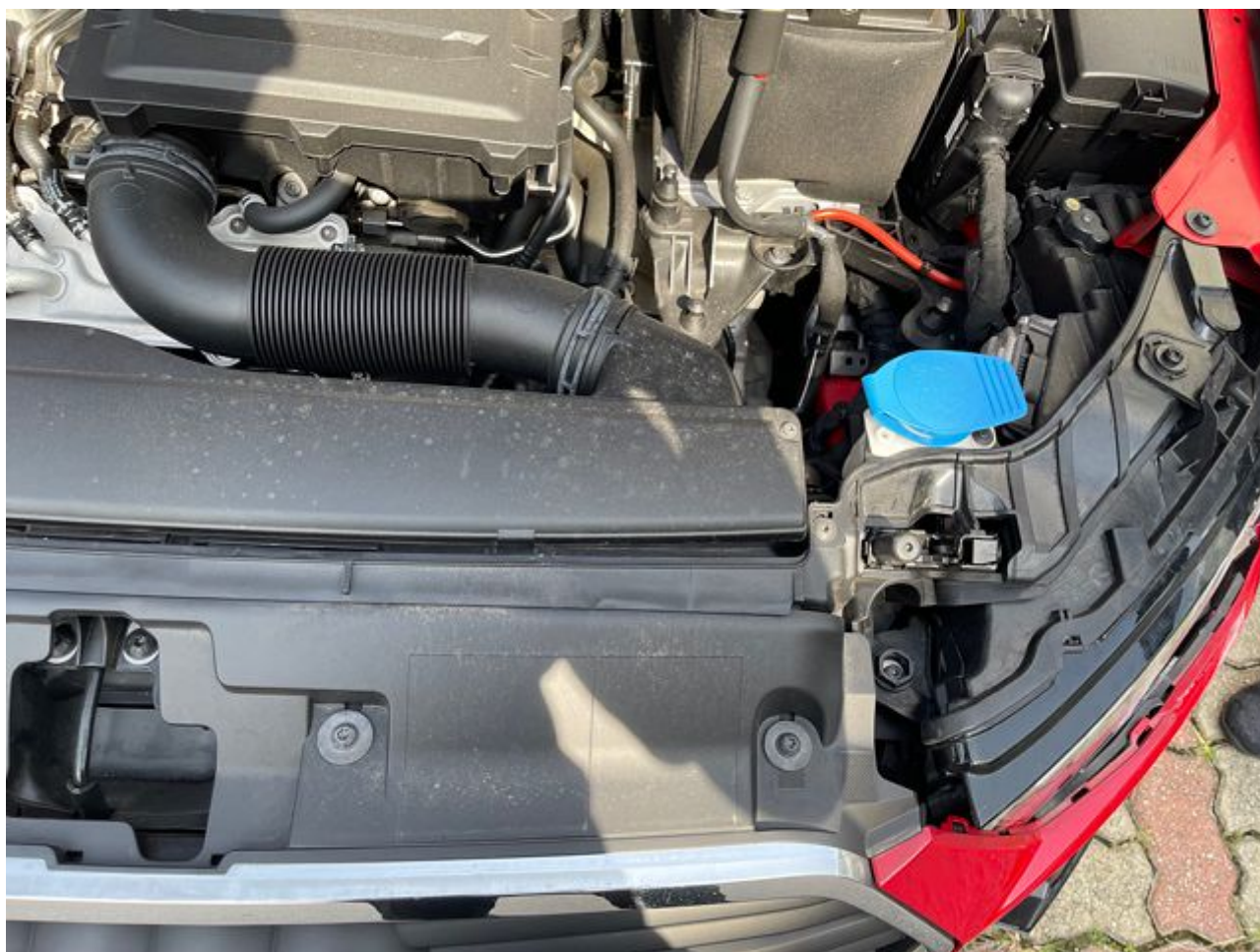
















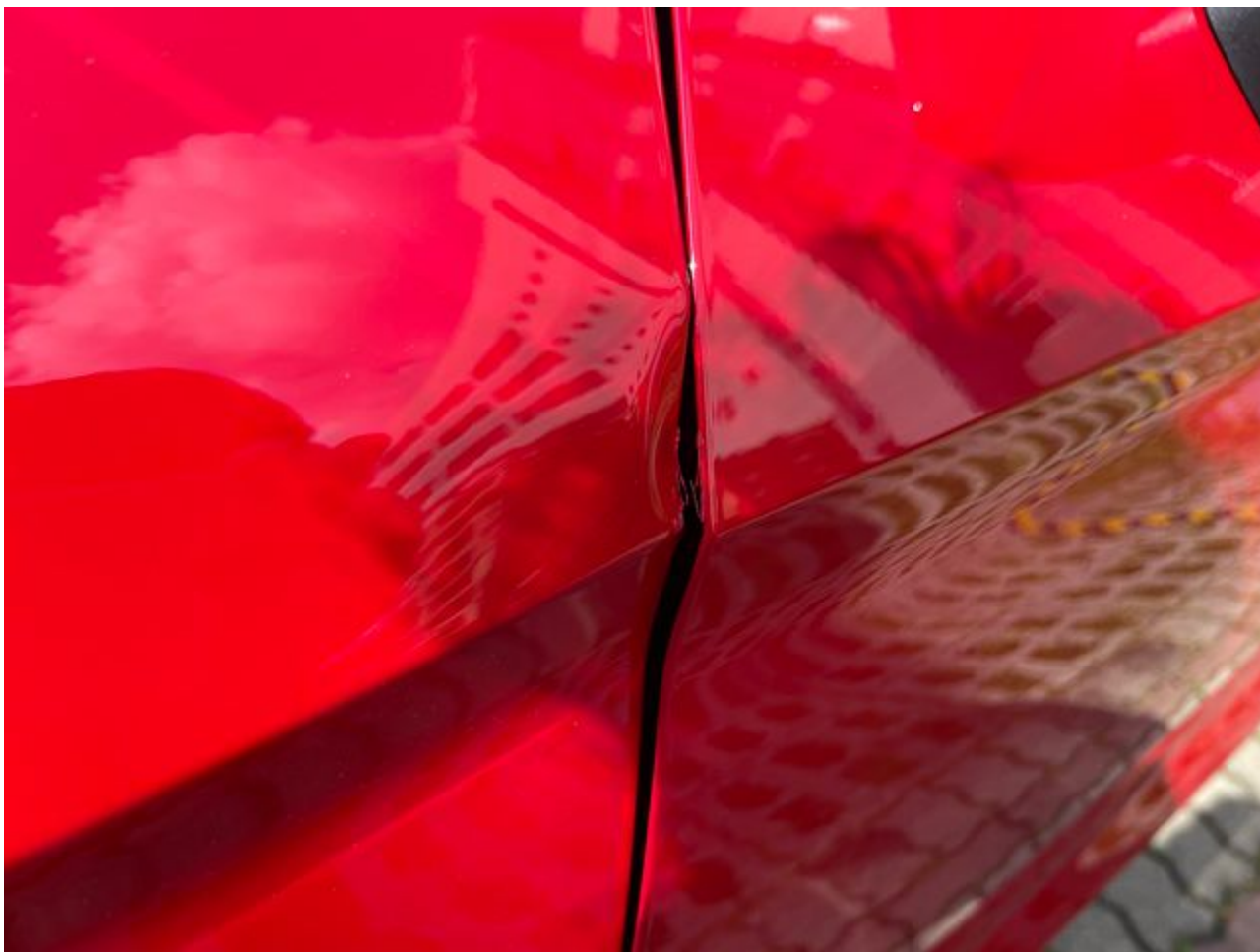


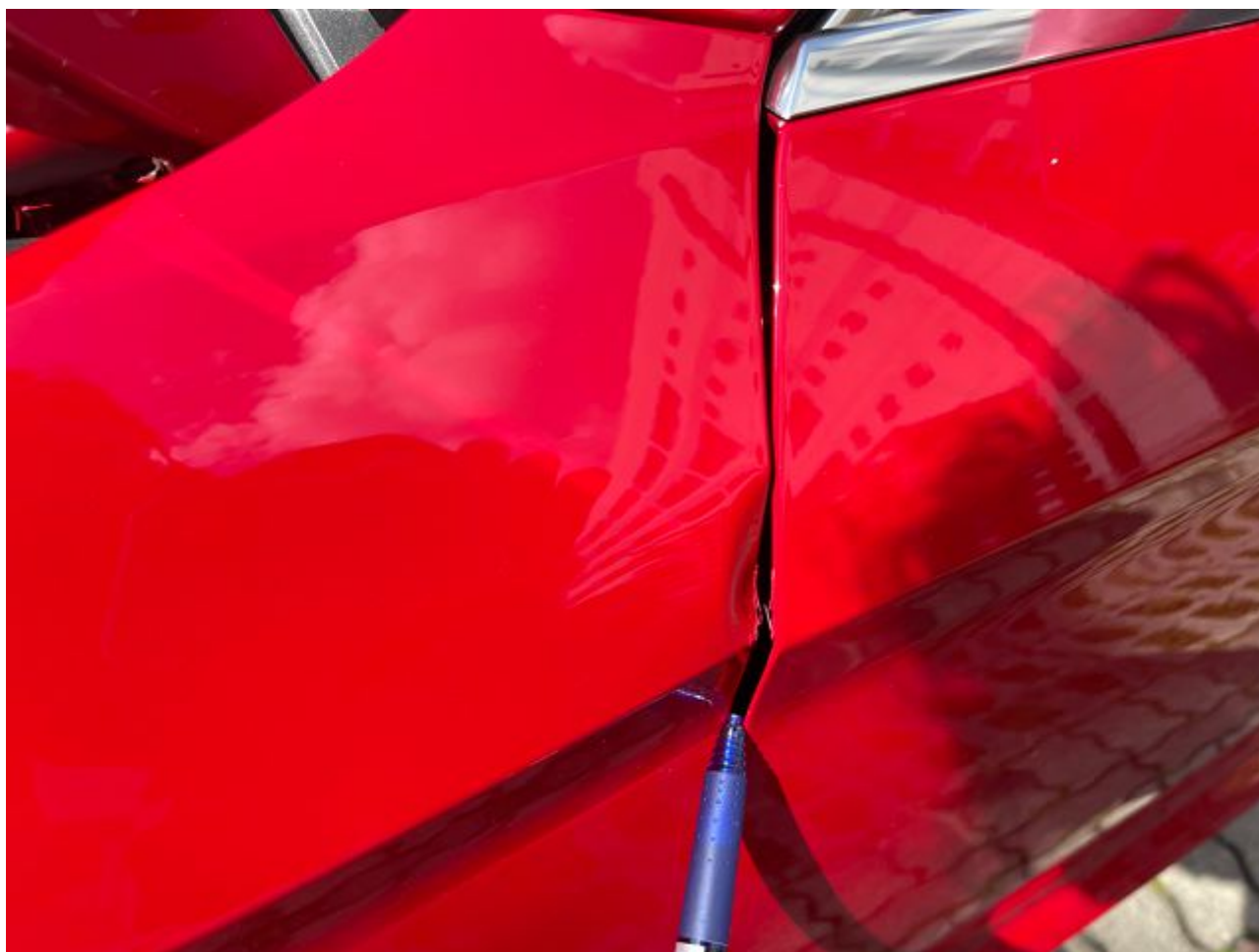












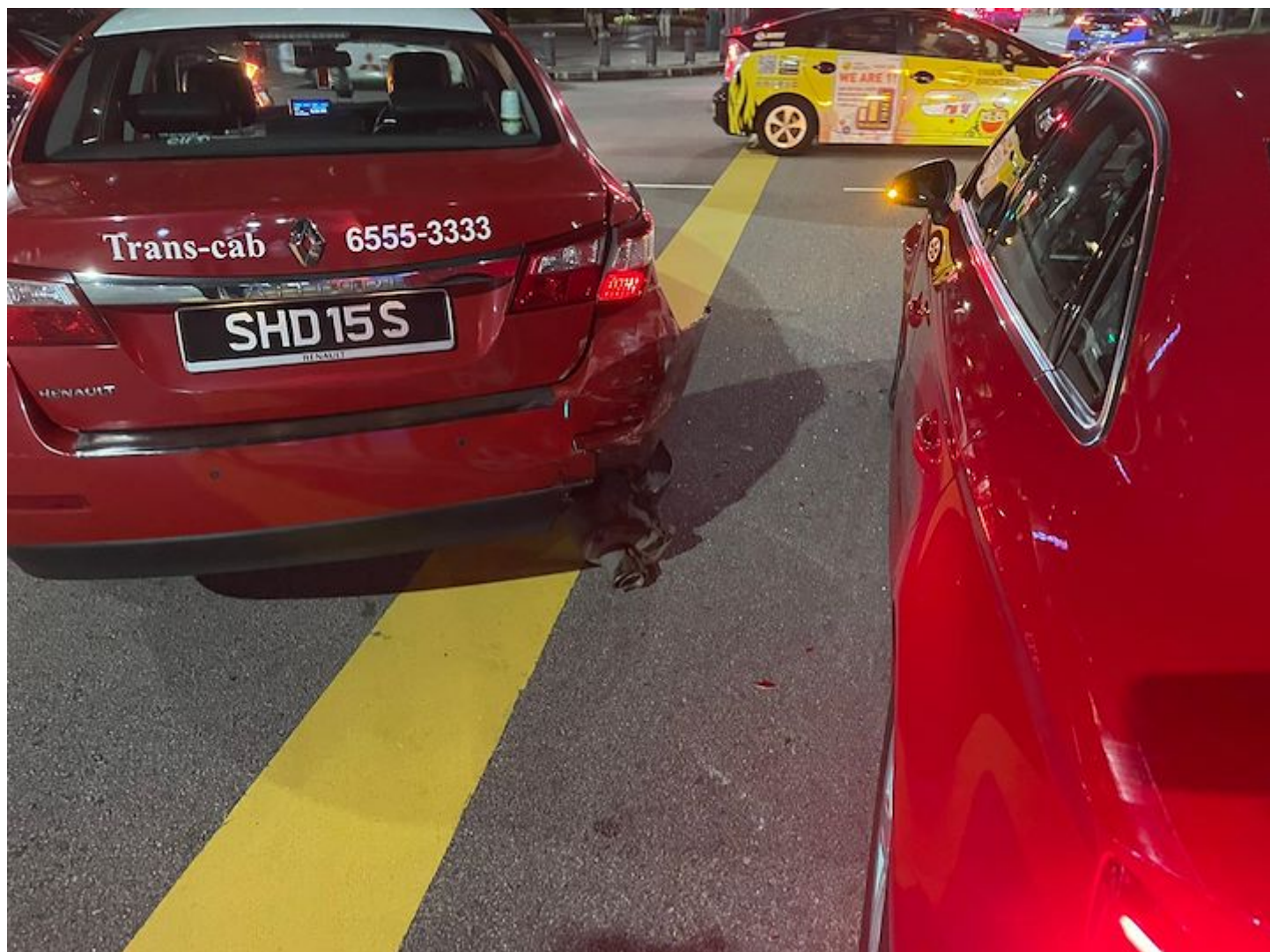


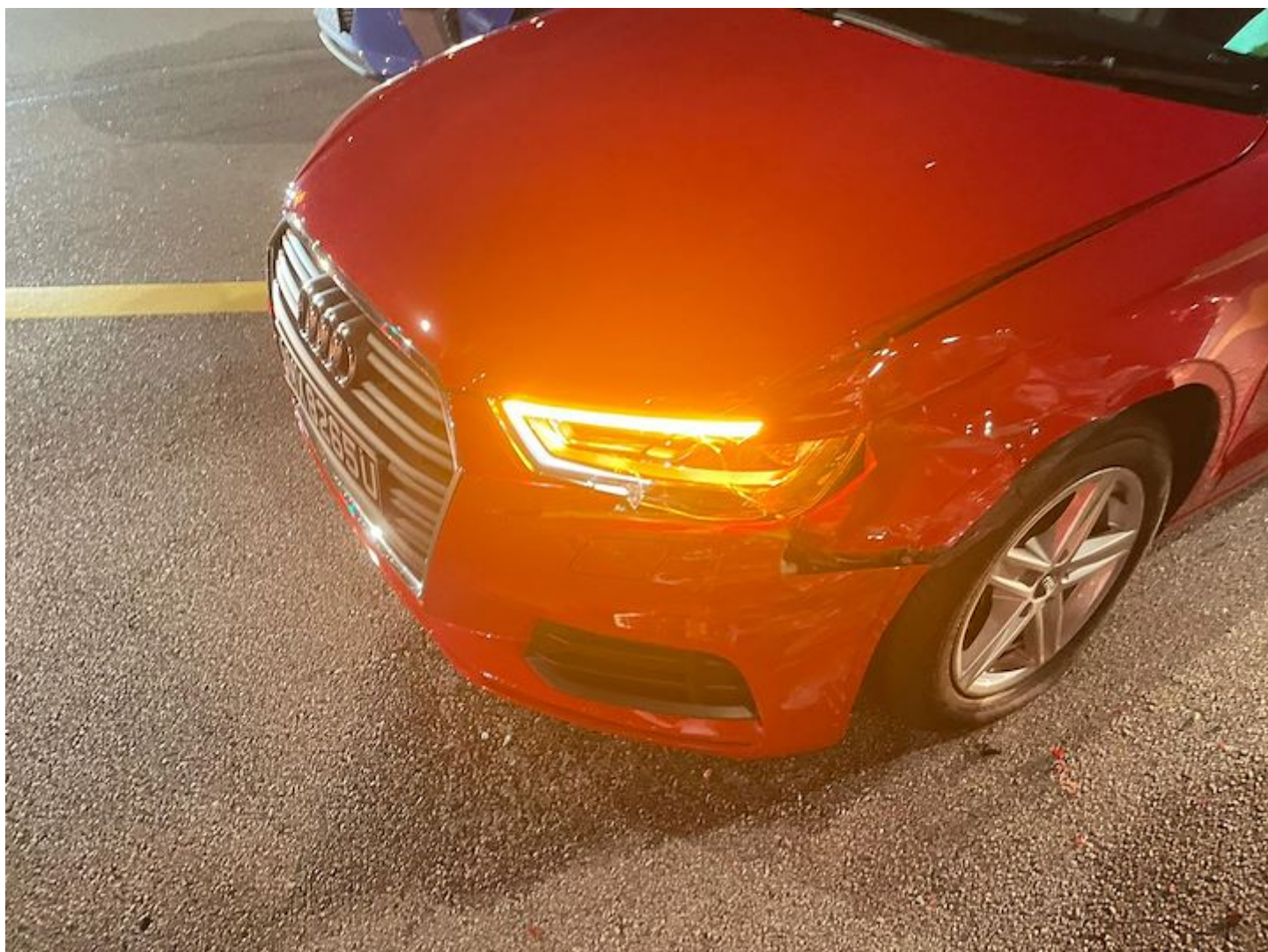




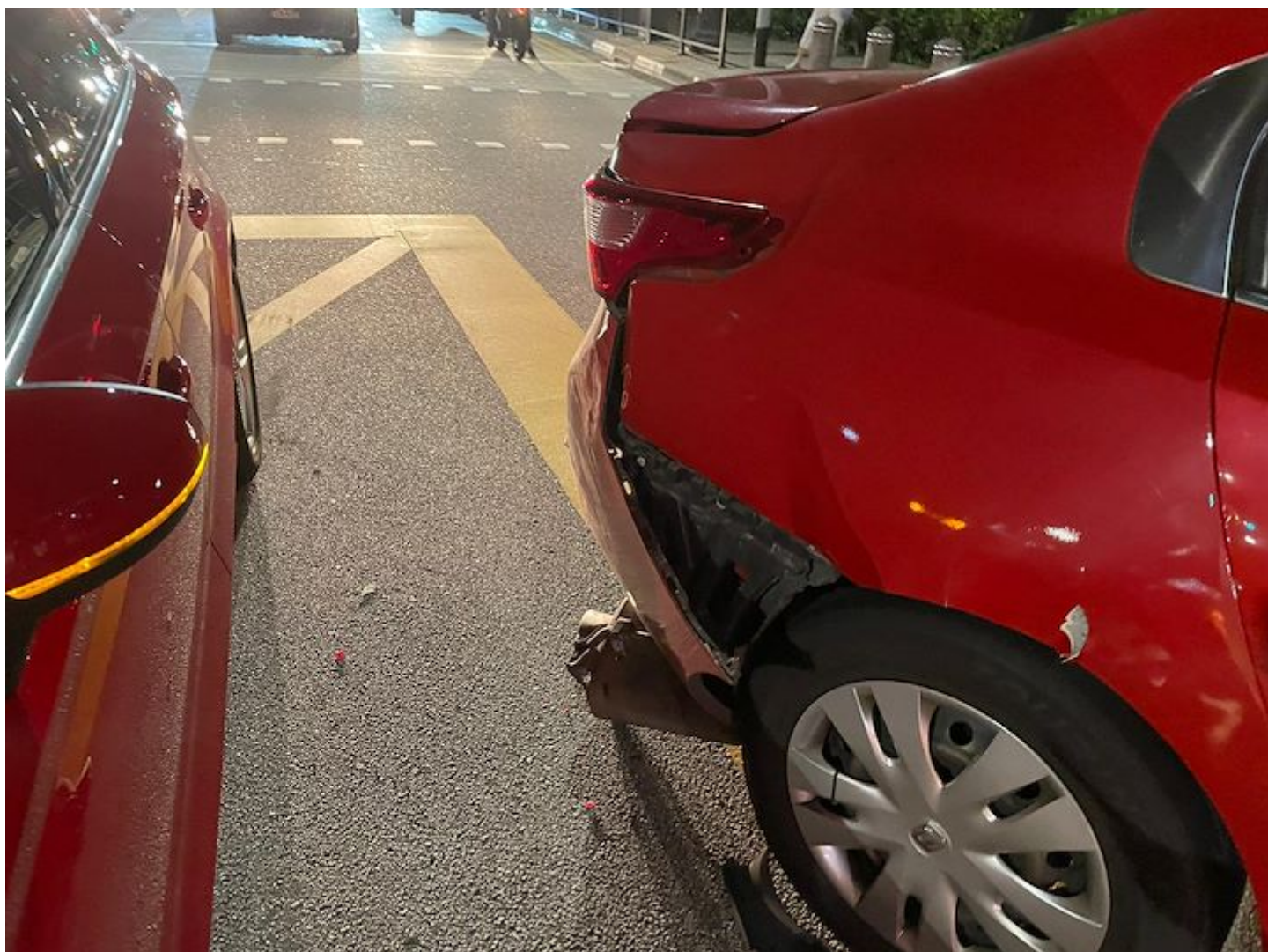




















CONFIDENTIAL

Annex E

## NOTICE OF COMPLIANCE

This is to confirm that Mr TEH QINGYIN, NRIC S9480468Z, has reported to the Police a non-injury traffic accident which occurred at Bras Basah Road, right after Handy Road on 19<sup>th</sup> July 2021 at 2055hrs involving the following vehicles:

- 1) SMX8265U (Red Audi A3) driven by Mr TEH QINGYIN *AY*
- 2) SHD15S (red Transcab vehicle) driven by Mr Lio, S1689585G, HP: 96900474

If this accident was reported to the Police within 24 hours of its occurrence,  
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT3 Chua HanRong Wilson

Date: 19<sup>th</sup> July 2021 Time: 2226hr

S/D Ref: eSD 74

Police Post/Unit: Orchard NPC

Original – to be issued to informant  
Duplicate – to be submitted to Traffic Police

*W*  
NEIGHBOURHOOD POLICE 24 22553  
ST KILLINEY ROAD  
SINGAPORE 239572  
TEL: 1800-735-9998  
FAX: 6733 1634

CONFIDENTIAL

Version as of 15 Jan 2002