

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	01/09/2021 15:18 (SGT)
Date of Accident	01/09/2021 07:40 (SGT)
Exact Location of Accident	1 Zubir Said Dr, Singapore 227968
Additional Location Information	SCHOOL OF THE ARTS ROUNDABOUT ENTRANCE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDZ612A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN SZE TONG
NRIC No	SXXXX389C
Email Address	TANSF@YMAIL.COM
Mobile Phone No	(Phone) +65-96806828
Alternative Phone No	+65-96806828

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A4
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	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	1800073045-03
Cover Note Number	-

DRIVER

Name of Driver	CHIA SOCK LIM
NRIC No	SXXXX349J

Date Of Birth	08/08/1968
Occupation	Indoor
Date Of Driving Pass	01/12/1998
Driving experience	22 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97979005
Alt. Phone Number	-
Email Address	SOCKLIM08@GMAIL.COM
Address	8 ANG MO KIO AVENUE 2 #10-03
Address complement	-
Postcode	567695
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	Side Swipe
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 vehicle 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	MABEL TAN
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

PLEASE REFER TO THE TRAFFIC POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLT6446K
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MABEL TAN SING JOO
Gender	Female
Phone No	(Phone) +65-93252997
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SDZ612A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

INJURED 2

Name of injured person	CHIA SOCK LIM
Gender	Female
Phone No	(Phone) +65-97979005
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

WITNESS DETAILS

WITNESS 1

Name	VIVEK
Phone	(Phone) +65-81613031
Email	-

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.

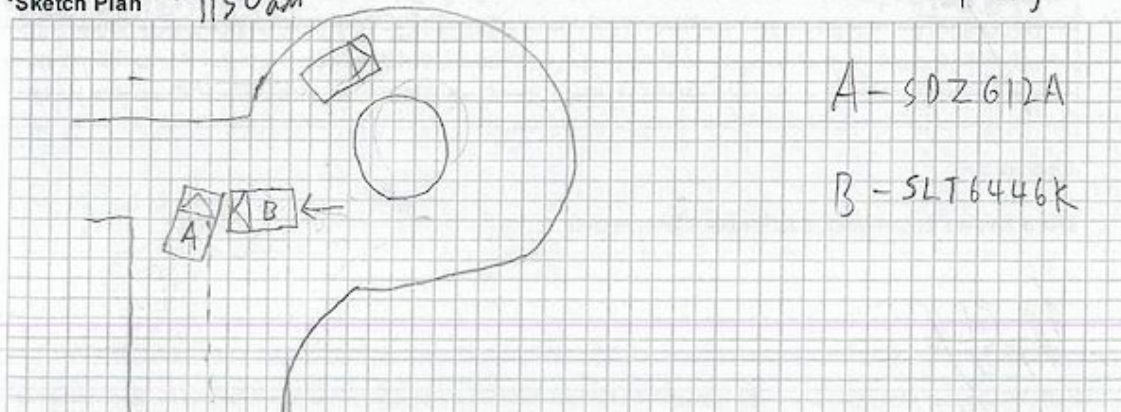
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

Tony Foong




Describe Circumstances of the Accident

Please Refer to the traffic Police Report

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date &
Time 1/9/2021
1150am

 01/09/2021
Driver's Signature (If driver is not the policyholder) / Date
& Time


Witnessed by Reporting Centre
Personnel Tony Foong

















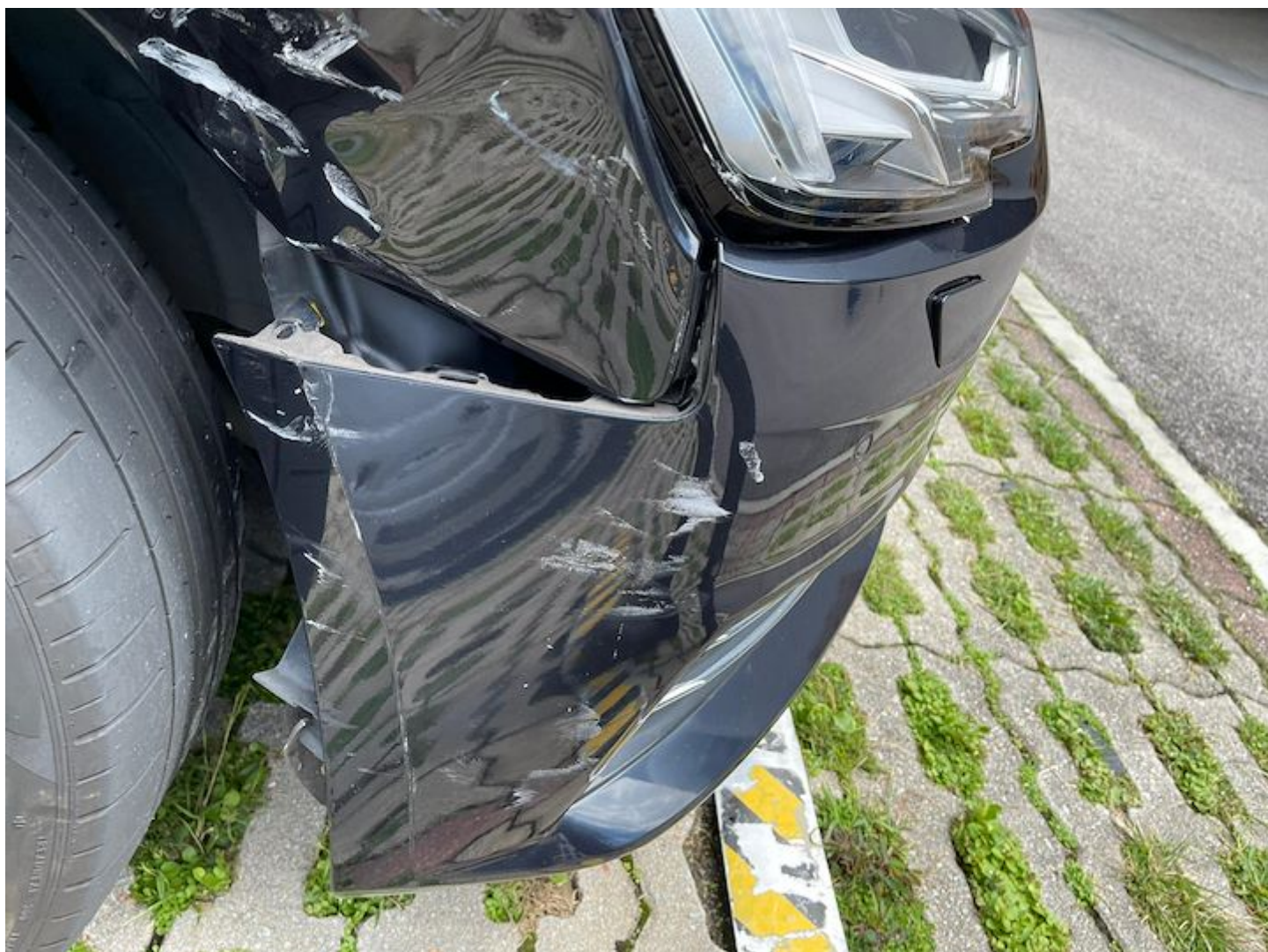


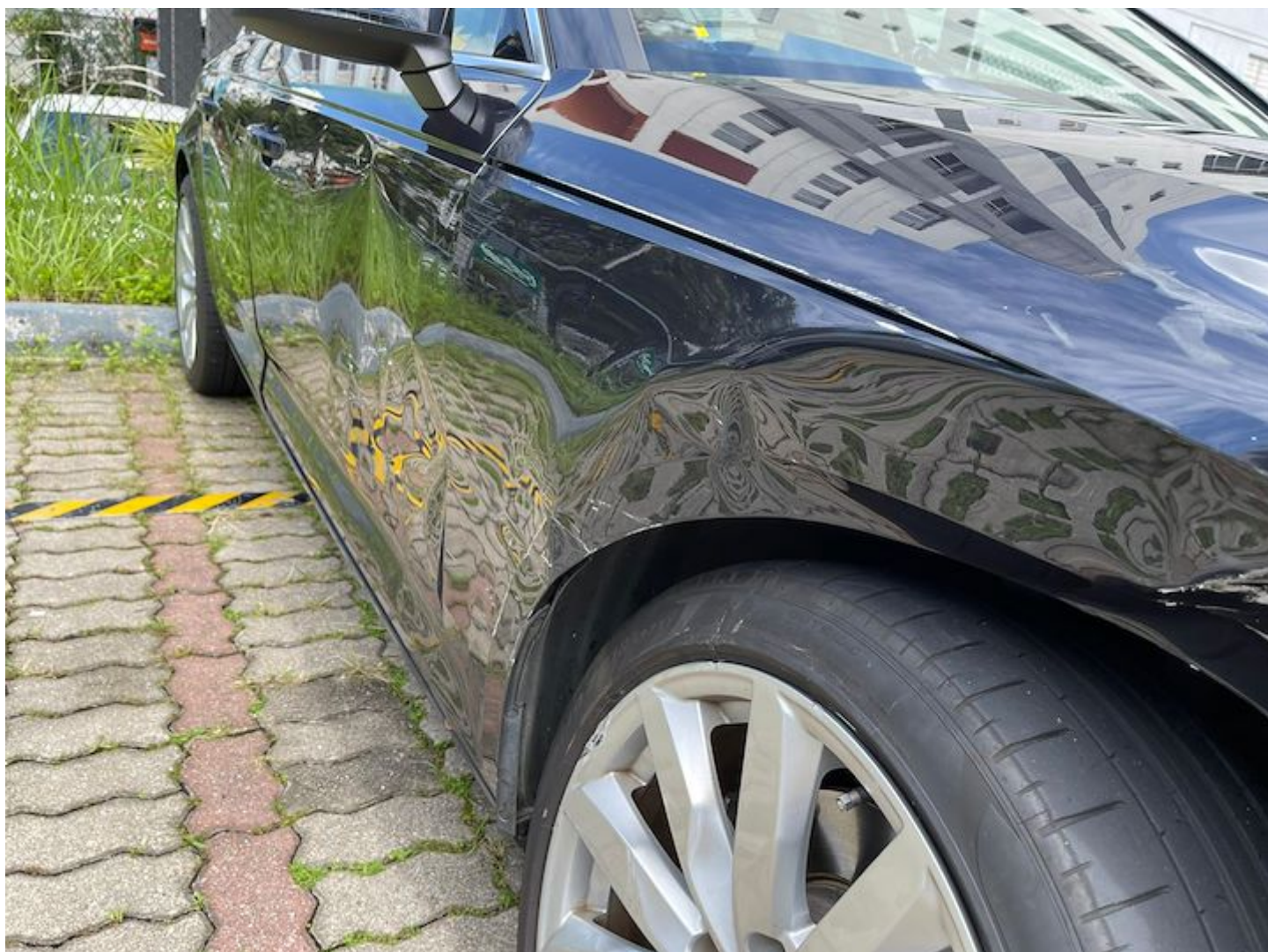


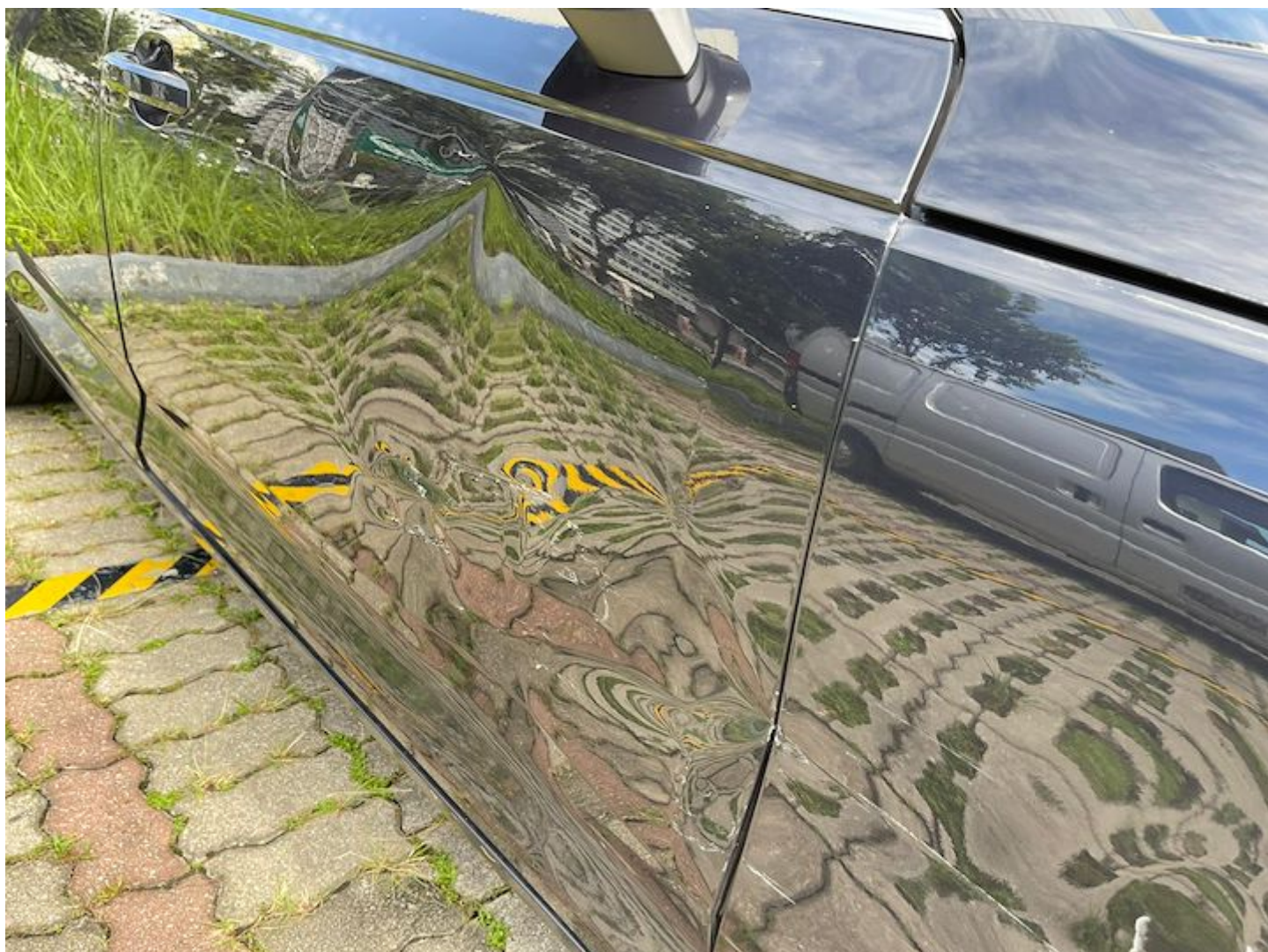






























**SINGAPORE
POLICE FORCE**



T/20210901/7015

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

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Report No. T/20210901/7015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/09/2021 13:30		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: CHIA SOCK LIM			Address: 8 ANG MO KIO AVENUE 2 #10-03 SINGAPORE 567695		
ID Type / ID No.: NRIC NO / S6833349J			Contact No.: Home/Office: Mobile: 97979005		
Nationality: SINGAPORE CITIZEN			Email: socklim08@gmail.com		
Sex: Female	Age: 53	Date of Birth: 08/08/1968	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Human resource consultant (excluding executive search consultant)			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/09/2021 07:40	Type of Location: Roundabout
Location: ZUBIR SAID DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: School Crossing Warden		Traffic Volume: Moderate
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
SDZ612A	Car	AUDI	A4 Sedan 2.0 TFSI S tronic	Blue	Seriously Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20210901/7015

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

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Report No. T/20210901/7015

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SDZ612A	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800073045-03	26/06/2021	25/06/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	MABEL TAN SING JOO	ID No.	T0509170A
Related Vehicle	SDZ612A (Car)	Contact No.	97979005
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	01/09/2021	Date	01/09/2021
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	CHIA SOCK LIM	ID No.	S6833349J
Related Vehicle	SDZ612A (Car)	Contact No.	97979005
Hospital/Clinic	RAFFLES HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	01/09/2021	Date	01/09/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the morning of Sep 1, 2021, at about 0740am, i, Chia Sock Lim (NRIC, S6833349J), the driver of the vehicle no. SDZ612A, had fetched my daughter to school (School Of The Arts) at Zubir Said Drive. Our car was stationary and I was waiting to drop off my daughter, Mabel Tan Sing Joo (NRIC, T0509170A) at the drop off point of the round-about at the school.

While waiting stationary for our car to drop off my daughter, I saw this white vehicle, (vehicle no. SLT6446K), was driving off but the car ramped onto a boulder located at the central (on the right of SUV car). The driver accelerated to drive over the boulder, unfortunately, the driver lost the control of the steering wheel and the car ramped towards my stationary car.. It was later given the driver's details by my spouse, as Tay Kah Hiok, NRIC S7203251I, who was the driver then of white vehicle and vehicle no. SLT6446K.

The impact was huge and resulting:
- my daughter's head was bumped against the windscreen, causing swelling and she



**SINGAPORE
POLICE FORCE**



T/20210901/7015

Police Station Of Origin:
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Report No. T/20210901/7015

CONTINUATION OF REPORT

complained of pain and nauseous.

- myself suffered from slight knock against the right side of my head
- our car's front windscreen was cracked and rear Mirror had broken off as a result of the impact
- Driver's side door was dented and scraped
- Both my daughter and myself were taken to the A&E at Raffles Medical Hospital for medical attention and treatment. We were administered with nauseous jab and also painkiller.

The school had assisted to report to traffic police and I had also made a call too. My spouse, Tan Sze Tong (NRIC: S6819389C) had stayed behind at the school to help with the traffic reporting and school while we, my daughter and I were conveyed to the Raffles Medical Hospital. A TP report was also subsequently filed by my spouse. The TP report #: E202109010036, Case in-charge: IO Ahmad (tel: 65476331). Both my daughter and myself were taken to A&E at Raffles Medical Hospital.

My spouse had managed to take videos and also photos and also the NRIC of the involved vehicle which are more than 2MB.

Thank you.

Best Regards
Chia Sock Lim
NRIC: S6833349J



**SINGAPORE
POLICE FORCE**



T/20210901/7015

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

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Report No. T/20210901/7015

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 / TPHQ /
ABDUL RAHIM BIN SALIM
Contact No.: 65476437

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
01/09/2021 13:30

Classification Of Case: