

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 31/08/2021 15:54 (SGT)
Date of Accident 31/08/2021 07:10 (SGT)
Exact Location of Accident Dunearn Rd, Singapore
Additional Location Information T-Junction
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJZ3314U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YUAN JIAPING
NRIC No SXXXX198I
Email Address weisstyx@gmail.com
Mobile Phone No (Phone) +65-94388888
Alternative Phone No +65-94388888

VEHICLE PARTICULARS

Manufacturer BMW
Model B.M.W. / X5 XDRIVE35I 3.0 AT 4WD 5DR GAS/D NAV SR
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 2979

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MT/00864580
Cover Note Number -

DRIVER

Name of Driver YUAN JIAPING
NRIC No SXXXX198I

| | |
|--|-----------------------|
| Date Of Birth | 27/12/1985 |
| Occupation | Indoor |
| Date Of Driving Pass | 16/02/2011 |
| Driving experience | 10 YEARS AND 6 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-94388888 |
| Alt. Phone Number | +65-94388888 |
| Email Address | weisstyx@gmail.com |
| Address | 43 MIMOSA ROAD #01-45 |
| Address complement | - |
| Postcode | 808005 |
| 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 | Hit and run / Vandalism / Damaged whilst parked |
| Weather Conditions | Raining |
| Road Surface | Wet |

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) | 4 |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? | No |

PASSENGER 1

| | |
|--------------|------|
| Name | Son |
| Gender | Male |

PASSENGER 2

| | |
|--------------|------|
| Name | Son |
| Gender | Male |

PASSENGER 3

| | |
|--------------|--------|
| Name | Wife |
| Gender | Female |

DETAILS OF POLICE ACTION

| | |
|---|-------------------------------------|
| Was the accident reported to the police? | Yes |
| Police Station Name | Orchard Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18007359999 |
| Alt. Police Station Phone No | (Fax) +65-67331934 |
| Police Station Address | 51 Killiney Road Singapore 239572 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

Refer to sketch plan

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 | SLT4716U |
| Vehicle Manufacturer | Mazda |
| 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) | - |

SKETCH PLAN**IMPORTANT NOTICE**

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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. 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' 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**

A = SJZ3314V
B = SLT4716V

Refer to police report : T/20210831/2007

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre
Personnel









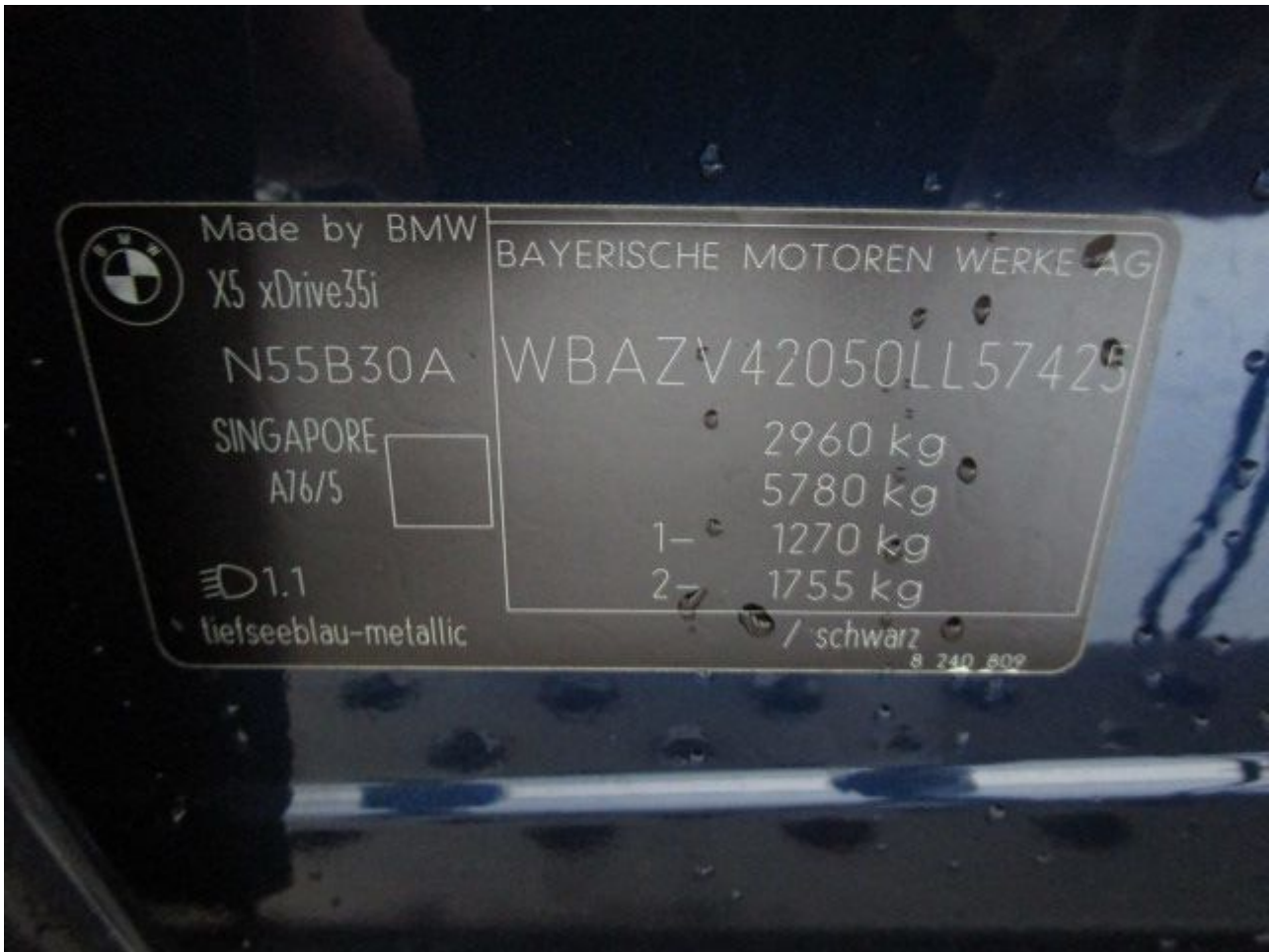
















**SINGAPORE
POLICE FORCE**



T/20210831/2007

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

1 of 4

Report No. T/20210831/2007

REPORT OF A TRAFFIC ACCIDENT

| | | | | | |
|--|------------|------------------------------|--|--------------------------|----------------------------|
| Date/Time Report Made: 31/08/2021 09:12 | | Vide Report No.: | | Station Diary No.: 17 | |
| Informant's Particulars | | | | | |
| Name of Informant: YUAN JIAPING | | | Address: 4C DYSON ROAD SINGAPORE 309357 | | |
| ID Type / ID No.: NRIC NO / S85821981 | | | Contact No.: Home/Office: Mobile: 94388888 | | |
| Nationality: CHINESE | | | Email: | | |
| Sex: Female | Age: 35 | Date of Birth: 27/12/1985 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: Company director | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

| | | | | |
|--|---------------------------|------------------------------------|--|---------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 31/08/2021 07:10 | Type of Location: T-Junction |
| Location: DUNEARN ROAD | | | | |
| Weather: Drizzling | | Road Surface: Wet | Road Speed Limit: 70 Km/h | |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | Traffic Volume: Moderate | |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | Anyone conveyed by ambulance: No | |

| Details of Vehicle Involved | | | | | | |
|------------------------------------|------|-------|--|-------|---------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| SJZ3314U | Car | BMW | X5 XDRIVE35I 3.0 AT 4WD 5DR GAS/D NAV SR | Blue | Slightly Damaged | 2 |
| SLT4716U | Car | MAZDA | MAZDA3 SEDAN 1.5 AT EU6 | Blue | Slightly Damaged | 0 |



**SINGAPORE
POLICE FORCE**



T/20210831/2007

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Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE : 39572
Tel No: 1800-7359999

Report No. T/20210831/2007

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|--|--------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SJZ3314U | DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD. | MT/00864580 | 09/11/2020 | 15/11/2021 |

| Details of Person Involved | | | |
|-----------------------------------|-------------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Passenger | | | |
| Name | Tadhg Tan Kai Jun | ID No. | T1427676E |
| Related Vehicle | SJZ3314U (Car) | Contact No. | NIL |
| 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 | YUAN JIAPING | ID No. | S8582198I |
| Related Vehicle | SJZ3314U (Car) | Contact No. | 94388888 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Passenger | | | |
| Name | Rhys Tan Kai Rey | ID No. | T1133079C |
| Related Vehicle | SJZ3314U (Car) | Contact No. | NIL |
| 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 |



SINGAPORE
POLICE FORCE



T/20210831/2007

Police Station Of Origin:
Orchard N.P.C
51 Killiney Road SINGAPORE 239572
Tel No: 1800-7359999

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Report No. T/20210831/2007

CONTINUATION OF REPORT

Brief Details.

On 31/08/2021 at about 7.10am to 7.20am, when I was about to turn left and out of Goldhill Avenue into Dunearn Rd, the car behind me hit mine (SJZ3314U). I remembered that my car was on the extreme left lane, inside the yellow box when the collision happened. The front the car (SLT4716U) hit the rear metal body of my car (SJZ3314U). I then got out of the car and approached the driver in the car (SLT4716U). The driver informed me that he would meet me at Caltex which was along Dunearn Rd, ahead of Goldhill Avenue. However, when I arrived at Caltex, I did not spot the car (SLT4716U) that hit me. I did not meet the driver at all.

I wish to state that I have in car camera to record the incident.

I wish to state that at the moment, I am not feeling comfortable and I will be seeing the doctor after this report is lodged. As for my two children, I am unsure of whether they suffered any injuries or not.

For my car (SJZ3314U), there is slight dent on the rear metal body. As for the other car (SLT4716U), I am unsure of the damages.

I further wish to state that I did not exchange particulars with the other driver.

I am lodging this police report for recording and investigative purposes. I am also lodging to seek insurance claim and for medical purposes.



**SINGAPORE
POLICE FORCE**

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51 Killiney Road SINGAPORE 239572
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T/20210831/2007

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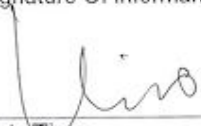

Report No. T/20210831/2007

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 E/ SCSGT(1) SEAN TAN KAI WEI  | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date/Time: 31/08/2021 09:12 |
| Officer In Charge Of Case: TP / HRT / Sr. Staff Sgt. NEO ZHI YUAN Contact No.: 65476079 SN 172 | Classification Of Case: |
| Authentication Stamp NP168  SIGNATURE | |