

# 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 .....	22/09/2021 15:38 (SGT)
Date of Accident .....	21/09/2021 12:35 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	PIE / TUAS EXIT 27 TOWARDS CLEMENTI AVE 6
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMW5847R
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN MUN CHONG DESMOND
NRIC No .....	SXXXX783A
Email Address .....	VALEN11CIA@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-93630289
Alternative Phone No .....	(Home) +65-93630289

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Previa
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	-
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1500

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	2070166987
Cover Note Number .....	-

### DRIVER

Name of Driver .....	VALENCIA POH SWEE TING
NRIC No .....	SXXXX976C

Date Of Birth .....	02/11/1989
Occupation .....	Indoor
Date Of Driving Pass .....	16/03/2010
Driving experience .....	11 YEARS AND 6 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-93630289
Alt. Phone Number .....	-
Email Address .....	VALEN11CIA@HOTMAIL.COM
Address .....	264 YIO CHU KANG ROAD #01-11
Address complement .....	-
Postcode .....	545683
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	TIFFANY POH MAY TING
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Clementi Division Headquarters
Police Station Phone No .....	(Phone) +65-18007740000
Alt. Police Station Phone No .....	(Fax) +65-67741705
Police Station Address .....	20 Clementi Avenue 5 Singapore 129858
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

#### ATTACHMENT(S)

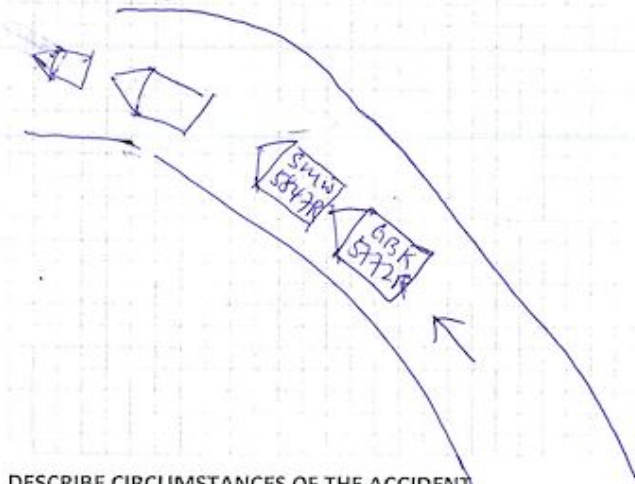
Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBK5772R
Vehicle Manufacturer .....	-

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	MUHAMMAD TAUFIK SALIHIN BIN AHMAD
NRIC No .....	SXXXX221G
Contact Number .....	(Phone) +65-91992942
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 22 Sep 2021  
12:30pm

Driver's Signature

(If driver is not the policyholder)  
Date & Time: 22 Sep 2021  
12:30pm

Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:

## SKETCH PLAN

### IMPORTANT NOTICE

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7. By the lodgment 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:

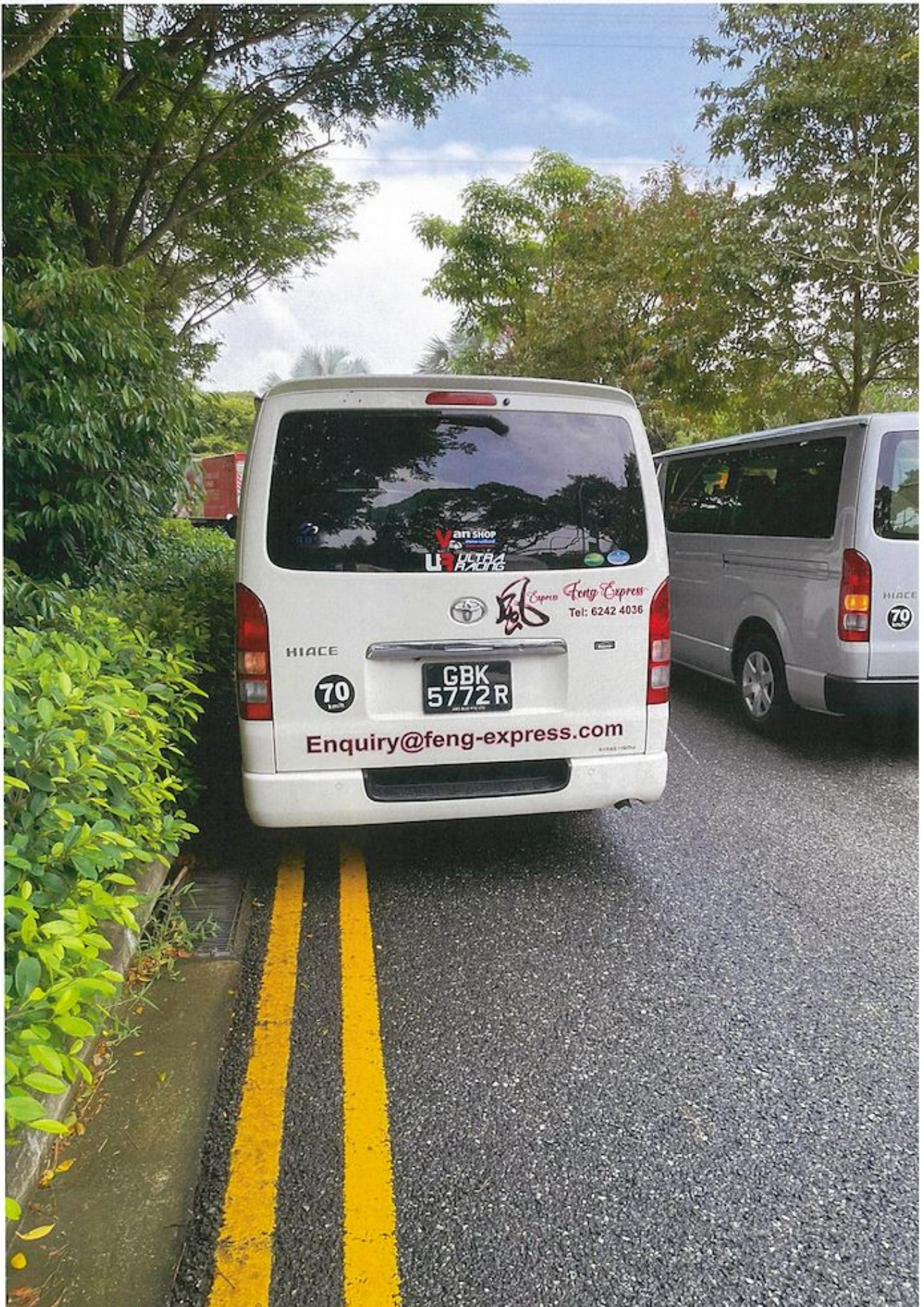
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

  
 Policyholder's Signature  
 Date & Time: 22 Sep 2021  
 12:30pm

  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time: 22 Sep 2021  
 12:30pm.

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:

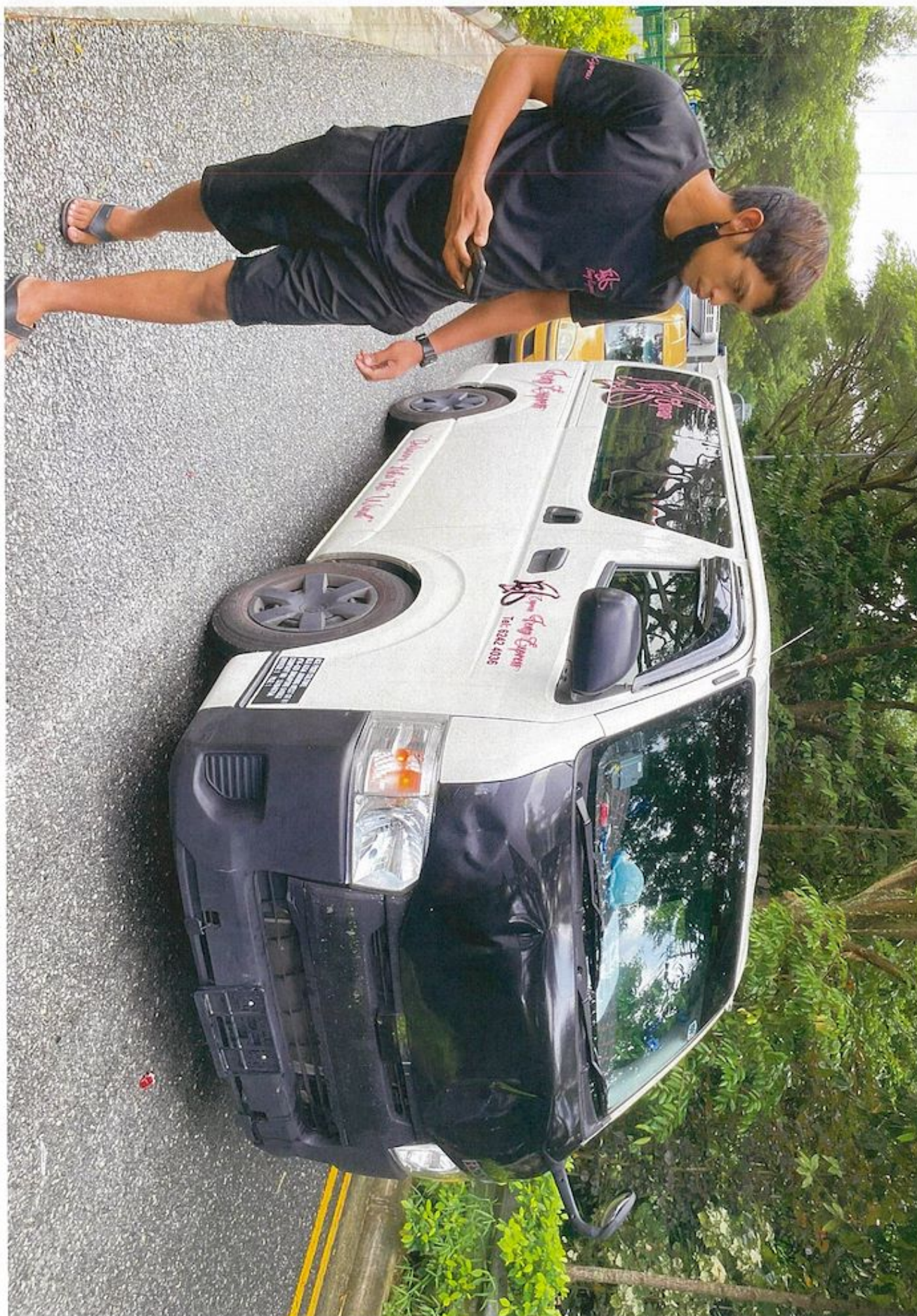






















































**SINGAPORE  
POLICE FORCE**



D/20210921/7021

1 of 2

**POLICE REPORT (NP299)**

Report No. D/20210921/7021

Police Station Of Origin  
Clementi Division HQ  
20 Clementi Avenue 5 SINGAPORE 129858  
Tel No:1800-7740000

Date/Time Report Made 21/09/2021 15:09	Vide Report No.	Station Diary No.
Name Of Informant VALENCIA POH SWEE TING	Address 264 YIO CHU KANG ROAD #01-11 SINGAPORE 545683	
ID Type / ID No. NRIC NO / S8938976C	Contact No. Home/Office: Mobile: 93630289	
Nationality SINGAPORE CITIZEN	Email Address VALEN11CIA@HOTMAIL.COM	
Occupation Executive	Sex Female	Age 31
Institution/School Name	Date of Birth 02/11/1989	Race Chinese
Date/Time Of Incident 21/09/2021 12:30 - 21/09/2021 13:30	Location Of Incident PIE/Tuas Exit 27 towards clementi ave 6	

**Brief details.**

i saw a motorcyclist (FX7921Z) skid and fell on his side. i slowed to a stop without hitting the van between the motorcyclist and my vehicle. Van driver (GBK5772R) hit my vehicle from behind and caused damage to the car body. we moved our vehicles to the left of the slip road and got out of the vehicles to take photos of the accident site and record contact details of the driver who hit me. meanwhile, a large commercial vehicle (TRD3189K/XD7257A) hit my car's right side mirror and broke it. I stopped the vehicle and took down his details as well. motorcyclist sustained abrasion on his arm but rejected my offer to call for an ambulance.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 21/09/2021 15:09
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Clementi NPC Kiosk 1



SINGAPORE  
POLICE FORCE



D/20210921/7021

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20210921/7021

Subjects Involved			
Victim			
Person Name	Tiffany Poh May Ting		
ID Type	NRIC NO	ID No	S9416051J
Gender	Female	Age	27
Race	Chinese	Language	English
Occupation	teacher	Address	103 BISHAN STREET 12 #06-272 BISHAN VIEW SINGAPORE 570103
Mobile No	97956227	Relation To Informant	sister
Person Name	VALENCIA POH SWEE TING		
ID Type	NRIC NO	ID No	S8938976C
Gender	Female	Age	31
Race	Chinese	Language	English
Occupation	Executive	Address	264 YIO CHU KANG ROAD #01-11 SINGAPORE 545683
Mobile No	93630289	Is Informant A Victim?	Yes
Person Name	VALENCIA POH SWEE TING (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 21/09/2021 15:09
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Clementi NPC Kiosk 1



Francis Cher TCBC

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**From:** valencia poh <valen11cia@hotmail.com>  
**Sent:** Wednesday, 22 September 2021 12:01 pm  
**To:** Francis Cher TCBC  
**Subject:** Fwd: Car authorization driving SMW5847R

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CAUTION: This email originated from outside of the organization (Inchcape). Do not click links or open attachments unless you recognise the sender and know the content is safe.

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Sent from my iPhone

Begin forwarded message:

**From:** Desmond Tan <desmond.tanmc@gmail.com>  
**Date:** 22 September 2021 at 12:00:39 SGT  
**To:** valencia <valen11cia@hotmail.com>  
**Subject:** Car authorization driving SMW5847R

I authorise my wife, Valencia Poh Swee Ting S89389783A to drive the vehicle Toyota Sienta SMW58473 and to proceed with any insurance claim on my behalf.

V/r,  
Tan Mun Chong Desmond  
S8706783A



# CERTIFICATE OF INSURANCE

## TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

**Name of Policyholder** : Tan Mun Chong Desmond  
**Period of Insurance** : 27 Nov 2020 To 26 Nov 2021  
**Engine No.** : 2NRX543415  
**Chassis No.** : MHFZ28H3800068291

**Vehicle No.** : SMW5847R  
**Policy No.** : 2070166987  
**Endorsement No.** :  
**Issued Date** : 26 Nov 2020

### ABOUT THE COVER

**Make/Model** : TOYOTA SIENTA 1.5

**Engine Capacity/Tonnage** : 1,496.00 CC

**Driver Restriction** : NA

**Sum Insured** : Market Value

**Off Peak Car** : No

**First Year of Registration** : 2020

**Insuring with COE/PAF** : Yes

**Person or Classes of Persons Entitled to Drive\*** :

a) The Policyholder

b) Any other person who is driving on the Policyholder's order or with his/her permission

This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDER") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

**Age Condition** : All Age Condition

**Mileage Condition** : Unlimited Mileage

**Limitation as to use\*** :

Use only for social, domestic, and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace making, reliability trial or speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

**Loss of Use** 1500cc - 1600cc

\* Limitations rendered inoperative by Section 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) (Amendment) Act 2019. Are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

#### Section 2

Property Damage - \$0

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

Tan Mun Chong Desmond - \$600 (Own Damage) \$600 (Flood Cover)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1 Toyota Bodycare Centre (For accident repair & accident reporting) Add: 2 Pandan Crescent Singapore 128462 Tel: 6631 1188

2 Toyota Bodycare Centre (For accident repair & accident reporting) Add: 17 Ubi Road 4 Singapore 408611 Tel: 6631 1688

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24 hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website www.aig.sg or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

**Hire Purchase Company/Employer's Loan:** United Overseas Bank Limited

I/We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504667213

INCHCAPE AUTO TOYOTA - BSTL027

33 LENG KEE ROAD

SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

AIGSGNCDLEAPP

78 Shenton Way #09-15 AIG Building S079120 | T: +65 6419 3000 | www.aig.sg

AIG Asia Pacific Insurance Pte. Ltd.

**24-HOUR AIG AUTO HOTLINE: +65 6338 6200**

**IMPORTANT: KEEP THIS DOCUMENT IN YOUR CAR AT ALL TIMES.**