

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 | 28/09/2021 17:44 (SGT) |
| Date of Accident | 27/09/2021 14:40 (SGT) |
| Exact Location of Accident | 105 Buangkok Cres, Singapore |
| Additional Location Information | BLK 105 MULTI-STOREY CARPARK |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SMR8345D |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|-----------------------------|
| Is company? | No |
| Name Of Registered Owner | FOO MEI LIAN |
| NRIC No | SXXXX346Z |
| Email Address | DENNIS_WINTER21@HOTMAIL.COM |
| Mobile Phone No | (Phone) +65-92315486 |
| Alternative Phone No | (Home) +65-62827517 |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Audi |
| Model | A6 |
| 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 | 1800 |

INSURANCE COMPANY

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC Income Insurance Co-operative Ltd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | 5118056175-01 |
| Cover Note Number | - |

DRIVER

| | |
|----------------|---------------|
| Name of Driver | FOO KOK KWANG |
| NRIC No | SXXXX837J |

| | |
|--|----------------------------|
| Date Of Birth | 20/03/1961 |
| Occupation | Indoor |
| Date Of Driving Pass | 12/04/1983 |
| Driving experience | 38 YEARS AND 5 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-83425050 |
| Alt. Phone Number | - |
| Email Address | DENNIS_WINTER@HOTMAIL.COM |
| Address | BLK 997B BUANGKOK CRESCENT |
| Address complement | #12-863 |
| Postcode | 532997 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Parent |
| 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 | 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) | 0 |
| 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 | Sengkang Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18003438999 |
| Alt. Police Station Phone No | (Fax) +65-63438939 |
| Police Station Address | 2 Sengkang Square #01-02 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO THE 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

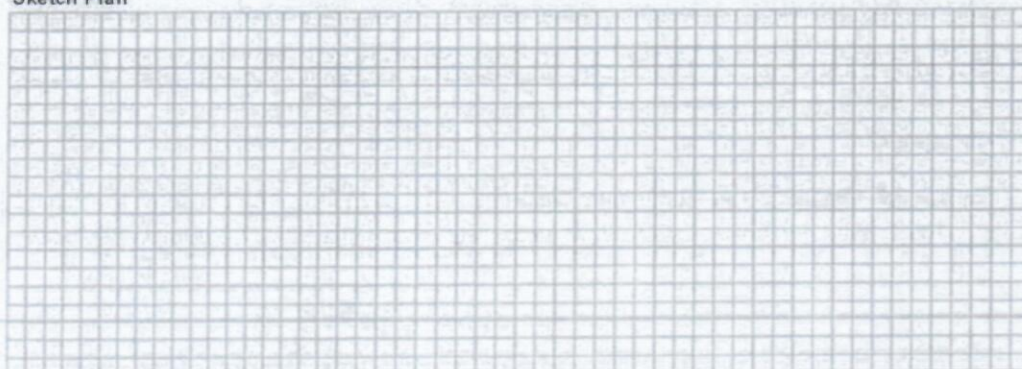
| | |
|-----------------------------|-------------|
| Vehicle Registration Number | SLA9271C |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |

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) -

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 willful 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. 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.

Witnessed by Reporting Centre
Personnel Tony Fung

Sketch Plan



Describe Circumstances of the Accident

Please Refer to the Police Report

NO: T/20210927/2112

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



[Signature] 28/09/21 1203 PM

Gry Feary



**SINGAPORE
POLICE FORCE**



T/20210927/2112

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

1 of 3

Report No. T/20210927/2112

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|---------------------------|
| Date/Time Report Made: 27/09/2021 21:50 | Vide Report No.: | Station Diary No.: 116 |
|--|------------------|---------------------------|

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|--|--|----------------------------|
| Name of Informant: FOO KOK KWANG | | | Address: APT BLK 997B BUANGKOK CRESCENT #12-863 SINGAPORE 532997 | | |
| ID Type / ID No.: NRIC NO / S1460837J | | | Contact No.: Home/Office: Mobile: 83425050 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 60 | Date of Birth: 20/03/1961 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | | Institution / School Name: |
| Occupation: SELF-EMPLOYED | | | 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: 27/09/2021 14:40 | Type of Location: |
| Location: HOUGANG AVENUE 1 | | | | |
| Weather: | | Road Surface: | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: | |
| Type of Collision: Moving Vehicle Against - Parked Vehicle | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|------|-------|-------|-----------|-----------------|
| SLA9271C | Car | | | | | 0 |
| SMR8345D | Car | | | | | 0 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |



**SINGAPORE
POLICE FORCE**



T/20210927/2112

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

2 of 3

Report No. T/20210927/2112

CONTINUATION OF REPORT

| Driver | | | |
|-----------------------------------|----------------|--|---------------------------------|
| Name | FOO KOK KWANG | ID No. | S1460837J |
| Related Vehicle | SMR8345D (Car) | Contact No. | 83425050 |
| 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 |

Brief Details.

On 27/09/2021 at about 1255hrs, I left my house and drove my vehicle (bearing registration plate number: SMR8345D) and parked my vehicle at the multistorey carpark of Blk 105 Hougang Avenue 1, level 3, HG45 at about 1310hrs.

On the same day at about 1440hrs, I left the carpark and drove my vehicle back home at about 1450hrs.

Subsequently at 1540hrs, I left my house and drove to Punggol 21 and arrived at about 1600hrs. After which, I left about 1645hrs and made my way to Compass One. About 15 - 20 minutes later, I came back to retrieve my vehicle and my wife noticed that there are scratches on the front left side of my vehicle.

My son assisted to retrieve the vehicle dash cam footage which revealed that on 27/09/2021 at 1443hrs while my vehicle was parked at the aforesaid multistorey carpark, there was one vehicle (bearing registration plate number: SLA9271C) tried to reverse into an empty lot on the left side of my vehicle, while reversing, the aforesaid vehicle's rear right came into contact with the front left side of my vehicle. The vehicle did not manage to park into the lot and drove off without leaving any note or contact number.



**SINGAPORE
POLICE FORCE**



T/20210927/2112

3 of 3

Police Station Of Origin:
Sengkang N.P.C
2 Sengkang Square #01-02 SINGAPORE
545025
Tel No: 1800-343 8999

Report No. T/20210927/2112

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
F /
Sgt 3 LEE LI TING, JOLYNE

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
27/09/2021 21:50

Officer In Charge Of Case:
TP / HRT /
SSI KASMAWATI BTE SAMIAN
Contact No.: 65476368

Classification Of Case:

Authentication Stamp
NP168



SIGNATURE

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATE : ACCIDENT REPAIRS
WORKSHOP : UBI ROAD 1
CONTACT NO : 6366 2323
FAX NO : 6841 1183
REFERENCE : PA/TP/0797/2021/JT
DATE : 28-Sep-21
WIP : 46508

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE SURVEY 4/10/21

YOUR INSURED VEH NO : SLA 9271 C

AIG ASIA PACIFIC INSURANCE PTE LTD

78 SHENTON WAY

#07-16 AIG BUILDING

SINGAPORE 079120

Attn: Motor Claims Dept

Tel: 6880 4602 - Fax: 6880 4838

OWNER'S NAME : MS FOO MEI LIAM
ADDRESS : BLK 997B BUANGKOK CRESCENT
#12-863
SINGAPORE 532997
TELEPHONE : HP +65 92315486
TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 5118056175-01
VEHICLE NO : **SMR 8345 D**
MODEL CODE : AUDI A6 1.8 TFSI ULTRA
MODEL YEAR : 21/5/2018
ENGINE NO : CYG 024727
CHASSIS NO : WAUZZZ4G2JN058900
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 27-Sep-21
PLACE OF ACCIDENT : BLK 105 MULTI-STOREY CARPARK

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SMR 8345 D

| S/N | NATURE OF JOBS | ESTIMATED CHARGES | SURVEYOR'S RECOMMENDATIONS |
|-----------------------------|---|----------------------|----------------------------|
| 1 | TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID | S/N \$ 480.00 | ✓ |
| 2 | TO REMOVE AND TRANSFER LHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE. | S/N \$ 400.00 | X |
| 3 | TO DISMANTLE AND RENEW FRONT BUMPER AND LHS HEADLIGHT. TO REPAIR LHS FRONT FENDER. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED | \$ 1,600.00 | ✓ 500 |
| 4 | TO REPSRAY FRONT BUMPER AND LHS FRONT FENDER. | \$ 2,000.00 | ✓ 550 |
| 5 | TO CARRY OUT CALIBRATION FOR FRONT BUMPER RADAR SENSOR. | S/N \$ 480.00 | X |
| 6 | TO CARRY OUT DIAGNOSTIC CHECK. | S/N \$ 192.00 | ✓ |
| TOTAL LABOUR CHARGES | | : \$ 5,152.00 | |

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SMR 8345 D

| | | | DAMAGED PARTS & PRICES | |
|-----------------------------|--|-----|------------------------|---------|
| S/N | PARTS DESCRIPTION | QTY | S/NETT | REMARKS |
| 1 | FRONT BUMPER <i>Repis</i> | 1 | \$ 3,268.00 | + |
| 2 | FRONT BUMPER FIXING PARTS <i>Green</i> | 1 | \$ 543.00 | + |
| 3 | FRONT BUMPER ADAPTER - LH | 1 | \$ 38.00 | + |
| 4 | FRONT BUMPER CLOSING ELEMENT - LOWER CENTER <i>Green</i> | 1 | \$ 219.00 | + |
| 5 | FRONT BUMPER AIR GRILLE - LH <i>lt</i> | 1 | \$ 572.00 | ✓ |
| 6 | FRONT BUMPER AIR GRILLE COVER - LH <i>Green</i> | 1 | \$ 51.00 | + |
| 7 | FRONT BUMPER WHEEL SPOILER - LH | 1 | \$ 264.00 | + |
| 8 | FRONT BUMPER GUIDE PIECE - LH | 1 | \$ 38.00 | + |
| 9 | FRONT PARKING AID SENSOR <i>Green</i> | 1 | TBC | + |
| 10 | FRONT PARKING AID SENSOR SEAL RING | 4 | \$ 6.00 | + |
| 11 | HEADLIGHT MOUNTING - LH <i>Green</i> | 1 | \$ 118.00 | + |
| 12 | HEADLIGHT - LH <i>Rep</i> | 1 | \$ 9,540.00 | + |
| 13 | HEADLIGHT LIFT CYLINDER - LH <i>Rep</i> | 1 | \$ 236.00 | + |
| 14 | FRONT FENDER STONE GUARD FILM - LH <i>Green</i> | 1 | \$ 121.00 | + |
| 15 | FRONT BUMPER RADAR SENSOR COVER - LH <i>Green</i> | 1 | \$ 13.00 | + |
| 16 | FRONT WHEEL HOUSING LINER - LH | 1 | \$ 275.00 | + |
| 17 | FRONT WHEEL HOUSING LINER ATTACHMENT PARTS <i>Rep</i> | 1 | \$ 73.00 | + |
| 18 | SUNDRIES <i>?</i> | | \$ 300.00 | ? |
| TOTAL SPARE PARTS | | | : \$ 15,675.00 | |
| TOTAL LABOUR CHARGES | | | : \$ 5,152.00 | |
| GRAND TOTAL | | | : \$ 20,827.00 | |

ALL CHARGES ARE NOT INCLUSIVE OF GST

LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT.

55 UBI ROAD 1, SINGAPORE 408699

TEL : 6366 2323 FAX : 6841 1183

EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

NAME : *Adrian L*
SURVEYED DATE : *04/10/21*
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : *are Authorised, 03 Days*

PLEASE NOTE : THIS ESTIMATE IS BASED ON VISUAL INSPECTION OF THE AFFECTED VEHICLE. SHOULD WE REQUIRE FURTHER LABOUR CHARGES AND SPARE PARTS IN THE PROGRESS OF REPAIR, WE SHALL INFORM YOU ACCORDINGLY. FOR INSPECTION OF VEHICLE, PLEASE REFER TO MS. NORAH KHAI AT TEL: 6768 9828 / 6768 9911 FOR APPOINTMENT.

YOURS FAITHFULLY,
PREMIUM AUTOMOBILES PTE LTD

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT