

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 18/10/2021 13:35 (SGT)
Date of Accident 16/10/2021 15:10 (SGT)
Exact Location of Accident Robinson Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNA3397P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner WONG HOCK ANN (HUANG FU'AN)
NRIC No S7408576H
Email Address SAMUEL110374@GMAIL.COM
Mobile Phone No (Phone) +65-88155539
Alternative Phone No (Home) +65-88155539

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Attrage
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 - Reporting only
Vehicle Category Private car
Transmission Auto
CC 1193

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 7210058116
Cover Note Number -

DRIVER

Name of Driver WONG HOCK ANN (HUANG FU'AN)
NRIC No S7408576H

Date Of Birth	11/03/1974
Occupation	Indoor
Date Of Driving Pass	23/12/2020
Driving experience	10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-88155539
Alt. Phone Number	(Home) +65-88155539
Email Address	SAMUEL110374@GMAIL.COM
Address	Apt Blk 348 Ubi Avenue 1 #04-1051 Singapore
Address complement	-
Postcode	400348
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	Collision - Change/cross lane
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	HOE MEIQI
Gender	Female

PASSENGER 2

Name	LIM KEOW ENG
Gender	Female

PASSENGER 3

Name	CHARMAINE WONG MING XIN
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

REFER TO POLICE REPORT # T/20211018/2029

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	SLZ6012Y
Vehicle Manufacturer	Honda
Vehicle Model	Odyssey
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YUSRI BIN DAUD
NRIC No	S1743060B
Contact Number	(Phone) +65-90112534
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

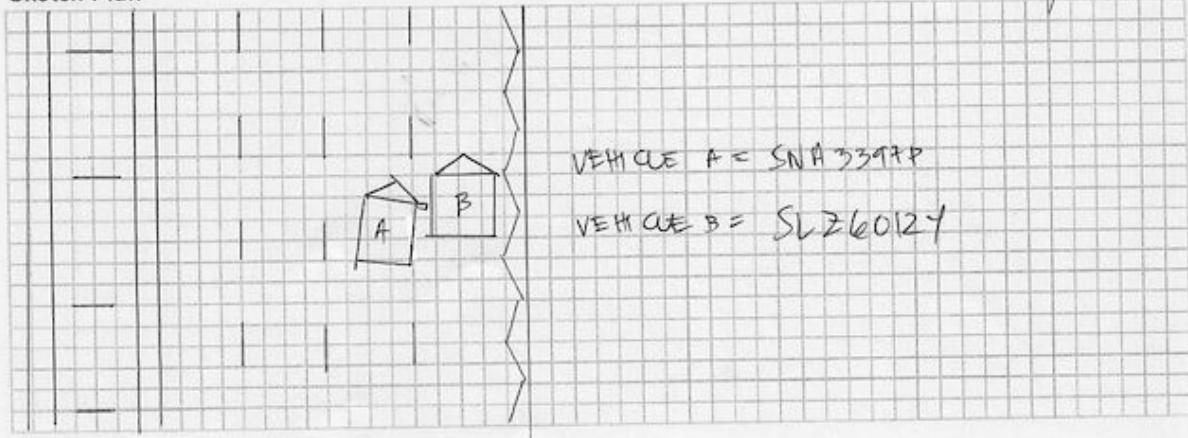
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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



- REFER TO POLICE REPORT # T/20211012/2029 —

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

Witnessed by Reporting Centre
Personnel


























**SINGAPORE
POLICE FORCE**

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



T/20211018/2029

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Report No. T/20211018/2029

REPORT OF A TRAFFIC ACCIDENT			Vide Report No.:		Station Diary No.:
Date/Time Report Made: 18/10/2021 12:13					
Informant's Particulars			Address: APT BLK 348 UBI AVENUE 1 #04-1051 SINGAPORE 400348		
Name of Informant: WONG HOCK ANN			Contact No.:		
ID Type / ID No.:			Home/Office:		
NRIC NO / S7408576H			Mobile: 88155539		
Nationality: SINGAPORE CITIZEN			Email: SAMUEL110374@gmail.com		
Sex:	Age:	Date of Birth:	Type of Informant:		
Male	47	11/03/1974	Driver		
Race: Chinese			Institution / School Name:		
Occupation: OTHERS			Language:		
			Driving Licence Information:		
			Class: 3		
			Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
		No	16/10/2021 15:10	Straight Road
Location: ROBINSON ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Light	
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
SLZ6012Y	Car				Slightly Damaged	0
SNA3397P	Car	MITSUBISHI	ATTRAGE 1.2 CVT	Silver	Slightly Damaged	3

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNA3397P	AIG ASIA PACIFIC INSURANCE PTE.	7210058116	17/06/2021	16/06/2022



SINGAPORE POLICE FORCE

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



T/20211018/2029

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Report No: T/20211018/2029

CONTINUATION OF REPORT





Details of Person Involved		Use of Pedestrian Crossing: NA	
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Driver		ID No.	S1743060B
Name	YUSRI BIN DAUD	Contact No.	90112534
Related Vehicle	SLZ6012Y (Car)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Hospital/Clinic	NIL	Date Discharge	NIL
Date Treatment	NIL	Degree of Injury	NIL
No. of Days granted Medical Leave	NIL		
Driver		ID No.	S7408576H
Name	WONG HOCK ANN	Contact No.	88155539
Related Vehicle	SNA3397P (Car)	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Hospital/Clinic	NIL	Date Discharge	NIL
Date Treatment	NIL	Degree of Injury	NIL
No. of Days granted Medical Leave	NIL		

Brief Details.

ON 16/10/2021 AT ABOUT 15:10HRS

I WAS DRIVING ALONG ROBINSON ROAD AT THE EXTREME RIGHT LANE WHEN A FRONTAL VEHICLE STOPPED ON A ZIG ZAG LINE. IN ATTEMPT TO TAKE OVER THE PARKED VEHICLE BY SHIFTING TO THE LEFT LANE, ANOTHER VEHICLE FROM MY REAR THAT WAS AT LEAST 2 LANES AWAY FROM MY VEHICLE HORNED AT ME. AS I WAS SHOCKED, I TURNED BACK TO THE RIGHT LANE AND ACCIDENTALLY HIT ONTO THE PARKED VEHICLE THAT WAS ON THE ZIG ZAG LINE. NOBODY WAS INJURED, WE EXCHANGED PARTICULARS, TOOK PHOTO OF EACH OTHER'S LICENSE AND TOOK DOWN PHONE NUMBERS. HE DEMANDED S\$1000 FOR PRIVATE SETTLEMENT WHICH WAS TOO HIGH FOR THE SLIGHT DAMAGE CAUSED. I HAVE VIDEO FOOTAGE OF THE INCIDENT CAPTURED IN MY CAR FRONT CAMERA. THIS REPORT IS MADE FOR INSURANCE PURPOSES

THAT'S ALL

 SINGAPORE POLICE FORCE		 T/20211018/2029
Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000		3 of 3 Report No. T/20211018/2029
CONTINUATION OF REPORT		
Sketch Plan Informant is not able to provide sketch plan		
<p>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 <u>report number</u> as reference.</p>		
Signature of Officer Recording The Report TP / SC TOH CHIN XIONG		Signature Of Informant: 
Signature Of Interpreter: Not applicable		Date/Time: 18/10/2021 12:13
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151		Classification Of Case:  SINGAPORE POLICE FORCE
		Signature: 