



## 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	03/12/2021 12:18 (SGT)
Date of Accident	01/12/2021 17:20 (SGT)
Exact Location of Accident	Tuas Rd, Singapore
Additional Location Information	ROUNDAABOUT
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFZ7667Y
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN FU SHENG
NRIC No	SXXXX571G
Email Address	haowen812004@yahoo.com
Mobile Phone No	(Phone) +65-92710587
Alternative Phone No	+65-92710587

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	ALTIS
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	1598

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2100498456-04
Cover Note Number	-

### DRIVER

Name of Driver	TAN FU SHENG
NRIC No	SXXXX571G

Date Of Birth	01/02/1981
Occupation	Indoor
Date Of Driving Pass	14/04/2005
Driving experience	16 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92710587
Alt. Phone Number	+65-92710587
Email Address	haowen812004@yahoo.com
Address	BLK 643 ANG MO KIO AVENUE 5 #03-3021
Address complement	-
Postcode	560643
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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	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 ATTACHMENT AND POLICE REPORT T/20211202/7007

#### 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	XE8T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

Name of Driver	VARADHARAJAN VASU
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	TAN FU SHENG
Gender	Male
Phone No	(Phone) +65-92712005
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SFZ7667Y
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## SKETCH PLAN

### IMPORTANT NOTICE

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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

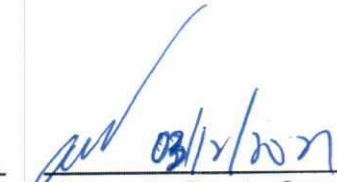
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time



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

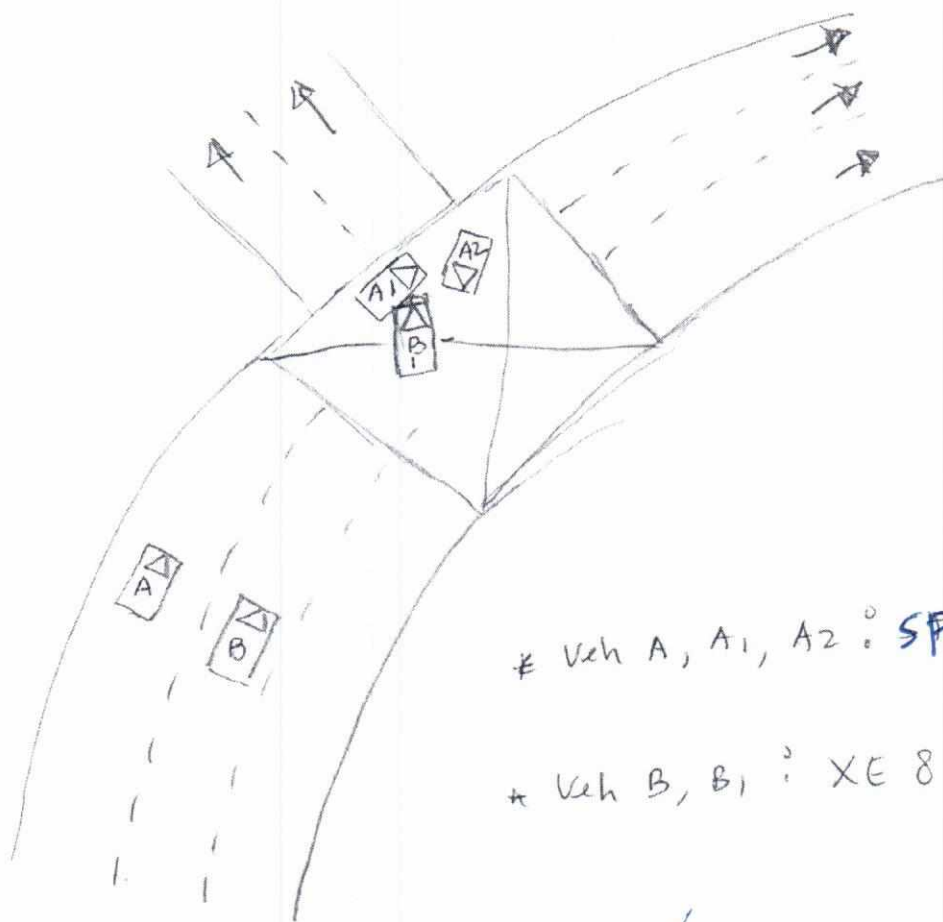


Witnessed by Reporting Centre Personnel

Sketch Plan

\* Refer to the attached

Tuas Road Roundabout



\* Veh A, A1, A2 : **SPZ** 7667 Y


\* Veh B, B1 : XE 8 T

*gm* 03/12/2021

*AN*  
381035716

\* Refr to police report => T/2021/20217007

We declare the foregoing particulars are true in every respect.

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

03/18/2027

Witnessed by Reporting Centre  
Personnel



# SINGAPORE POLICE FORCE



T/20211202/7007

1 of 3

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

Report No. T/20211202/7007

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 02/12/2021 12:41		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN FU SHENG			Address: 643 ANG MO KIO AVENUE 5 #03-3021 SINGAPORE 560643		
ID Type / ID No.: NRIC NO / S8103571G			Contact No.: Home/Office:		Mobile: 92710587
Nationality: SINGAPORE CITIZEN			Email: haowen812004@yahoo.com		
Sex: Male	Age: 40	Date of Birth: 01/02/1981	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Workshop Supervisor			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: 01/12/2021 17:20	Type of Location: Roundabout
Location:  TUAS ROAD ROUNDABOUT				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SFZ7667Y	Car	TOYOTA	COROLLA ALTIS 1.6 CVT	White		0
XE8T	Big Truck					0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE  
POLICE FORCE**



T/20211202/7007

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

2 of 3

Report No. T/20211202/7007

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFZ7667Y	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100498456-04	23/01/2021	22/01/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TAN FU SHENG		ID No.	S8103571G
Related Vehicle	SFZ7667Y (Car)		Contact No.	92710587
Hospital/Clinic	TAN MEDICARE CLINIC PTE LTD		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	02/12/2021		Date	NIL
No. of Days granted Medical Leave		03	Degree of	Slight
Driver				
Name	VARADHARAJAN VASU		ID No.	NIL
Related Vehicle	XE8T (Big Truck)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

**Brief Details.**

On the stated date and time, I (SFZ 7667 Y) was travelling along the stated venue. I was travelling straight in my lane and suddenly a big truck bearing registration number: XE 8 T, cut into my lane abruptly and collided onto the front right hand side of my vehicle. The huge impact also caused my vehicle to spin. We then alighted from our vehicles and exchanged our personal particulars. About half an hour later, Traffic Police officer arrived at the accident scene too. Then we were advised to leave the accident scene. On the very next day after the accident, I felt unwell and discomfort on my chest and shoulder. I proceeded to seek medical treatment at Tan Medicare Clinic Pte Ltd and was given a 3 days MC.



**SINGAPORE  
POLICE FORCE**



T/20211202/7007

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

3 of 3

Report No. T/20211202/7007

**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 / TPIB /  
MUHAMMAD ISMAIL BIN AMZAH  
Contact No.: 65476185

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

Date/Time:  
02/12/2021 12:41

Classification Of Case:

Email: [sm@idac.com.sg](mailto:sm@idac.com.sg) Tel no: 6555 6888

\*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

**Personal Particulars of Owner & Driver (Vehicle A)**

Date of Accident: 01/12/2021 (dd/mm/yy) Time of Accident: 17 : 20 (24-HR-FORMAT)

Vehicle No.: SFZ 7667 Y Vehicle Make & Model / Engine (cc): Toyota Altis 1598 cc Private Hire: (Y/N) (N)

Exact location of Accident: Tuas Road Roundabout

Policyholder's Name / IC No.: Tan Fu Sheng S8103571G

Driver's Name / IC No.: Tan Fu Sheng S8103571G (As Above) ☐

Driver's Contact No.: 9271 0587 Company Contact No / Owner Contact No: 9271 0587

Driver's Address: Blk 643 Ang Mo Kio Avenue 5 #03-3021 Singapore 560643

Owner Email address: haowen812004@yahoo.com Insurance Company: AIG

Driver Email address: haowen812004@yahoo.com

**Relationship between Owner & Driver:** (Please **CIRCLE** one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: \_\_\_\_\_

**What do you wish to claim? (Please **TICK** one only)**

☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)

**Exact purpose for which the vehicle was being used at time of accident?**

☒ Private use / ☐ Work purpose

**Occupation (nature of job)** ☒ Indoor / ☐ Outdoor

**\*No. of Passengers (Including Driver):** 1

\*Passanger Name: \_\_\_\_\_

Gender: \_\_\_\_\_

\*Passanger Name: \_\_\_\_\_

Gender: \_\_\_\_\_

**Weather condition & Road conditions? (On the day of accident)**

☒ Clear & Dry / ☐ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: \_\_\_\_\_

**Was there any video captured by your Car Camera?** ☐ Yes / ☒ No

**Any Injuries:** ☒ Yes / ☐ No (If YES) Injured Person's Name: Tan Fu Sheng

Injuries Sustain: Chest and Shoulder Injured Person in Which Vehicle: SFZ 7667 Y

**Police Report filed:** ☒ Yes / ☐ No (If YES) Which Police Station: 10 Ubi Avenue 3 Singapore 408865

**The Other Party(s) Details:**

1. Driver's Name / IC No: Varadharajan Vasu Vehicle No: XE 8 T

Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

2. Driver's Name / IC No (If Any): \_\_\_\_\_ Vehicle No: \_\_\_\_\_

Driver's Contact No: \_\_\_\_\_ Insurance Company: \_\_\_\_\_

\*Independent Witness (If Any): \_\_\_\_\_ Contact No: \_\_\_\_\_

Preferred Workshop Name: \_\_\_\_\_ Contact No: \_\_\_\_\_

## DEED POLL

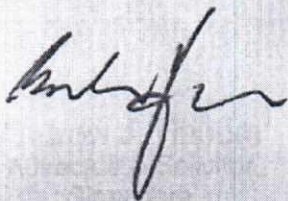
BY THIS DEED I, the undersigned **TAN FU SHENG** 譚富森 of Blk 643 Ang Mo Kio Avenue 5 #03-3021, Singapore 560643, holder of Singapore NRIC No. S8103571/G do hereby absolutely and entirely renounce and abandon the use of my former name of **TAN HAOWEN** 譚皓文 and in lieu thereof do assume as from the date hereof the new name **TAN FU SHENG** 譚富森.

AND in pursuance of such change as aforesaid I hereby declare that I shall at all times hereafter in all records, deeds and instruments in writing and in all actions and proceedings and in all dealings and transaction and upon all occasions whatsoever use sign and subscribe the said name **TAN FU SHENG** 譚富森 as my name in lieu of the said name of **TAN HAOWEN** 譚皓文 so renounced as aforesaid.



AND I hereby authorize and request all persons at all times to designate, describe and address me by such assumed name of **TAN FU SHENG** 譚富森 only.

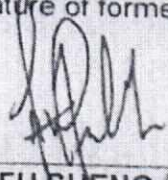

IN WITNESS WHEREOF I have hereunto, signed my **TAN FU SHENG** 譚富森 and my relinquished name of **TAN HAOWEN** 譚皓文 and have set my seal this 21<sup>st</sup> day of August 2017.

SIGNED SEALED and DELIVERED  
by the above named  
**TAN FU SHENG** 譚富森  
in the presence of:-



)  
)  
)  
)

   
\_\_\_\_\_  
**TAN HAOWEN** 譚皓文  
Signature of former name

   
\_\_\_\_\_  
**TAN FU SHENG** 譚富森  
Signature of assumed name



# CERTIFICATE OF INSURANCE

## AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : Tan Haowen  
Period of Insurance : 23 Jan 2021 To 22 Jan 2022  
Engine No. : 1ZRY334570  
Chassis No. : MR053REH104558685

Vehicle No. : SFZ7667Y  
Policy No. : 2100498456-04  
Endorsement No. :  
Issued Date : 04 Jan 2021

### ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6 DUAL  
Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value First Year of Registration : 2017  
Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : 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 "Inexperienced Driver Excess" ("IDR") if You are or Your Authorised Driver (named or unnamed) has less than 2 years' driving experience.

Age Condition : 35 years old and above 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 Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (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 Haowen - \$600 (Own Damage), \$600 (Flood Cover)

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

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)

Any accident repairs to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the accident repairs carried out at the Sole Agent's workshop.

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](http://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).

0500522000

MULTI-LINES AGENCIES

AIG BUILDING, 78 SHENTON WAY #01-K1 GEM ROOM  
SINGAPORE 079120 AYSP-NONLIFE

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

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

This computer generated document does not require a signature.

Pheek Lui Tan

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

**ADDENDUM**

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SN0821C30001 Vehicle Registration No: SF27667 Y  
Name (as shown in NRIC): TAN FU SHENG NRIC/FIN/Passport No: SXXXXX5716  
(\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
Address: \_\_\_\_\_ Singapore ( )  
Contact (Tel): \_\_\_\_\_ Mobile No.: 92710587  
Email Address: \_\_\_\_\_  
Date of Accident: 01/12/2021 Time of Accident: 17:20  
Place of Accident: TUAL ROAD ROUNDABOUT  
Insurance Company: ALG

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

DATE OF ACCIDENT TO 01/12/2021

Policyholder / Driver's Signature  
Date:

02/12/2021  
Reporting Centre Personnel's Signature  
Name: Bob Hartono  
NRIC/FIN No.:  
Date: