

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 Actual 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	04/05/2021 19:39 (SGT)
Reported by	Both
Date of Accident	03/05/2021 12:00 (SGT)
Exact Location of Accident	Napier Rd, Singapore
Additional Location Information	NAPIER ROAD AFTER GLENEAGLES HOSPITAL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM750U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	DENNIS JAMES CHIW (ZHOU ZHENG)
NRIC No	SXXXX867J
Email Address	THECHOCSHOP@GMAIL.COM
Mobile Phone No	(Phone) +65-82241998
Alternative Phone No	(Office) +65-82241998

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
Variant	A6 DESIGN 2.0 TFSI (140 KW)
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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070171116

DRIVER

Name of Driver	DENNIS JAMES CHIW (ZHOU ZHENG)
NRIC No	SXXXX867J
Date Of Birth	28/11/1973
Occupation	Indoor

Date Of Driving Pass	16/06/1993
Driving experience	27 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82241998
Alt. Phone Number	(Office) +65-82241998
Email Address	THECHOCSHOP@GMAIL.COM
Address	450 SIN MING AVE
Address complement	#06-505
Postcode	570450
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 - 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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	JESSIE NG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I, THE DRIVER OF SKM 750 U WAS TRAVELLING ON 3 MAY ABOUT 12PM ALONG NAPIER ROAD TOWARDS GRANGE ROAD ON STRAIGHT ROAD WHICH HAD HEAVY TRAFFIC. I HAD MANEUVERED AFTER SIGNALLING FROM LANE 1 TO LANE 2 WHEN SUDDENLY I FELT A BUMP TO MY REAR AFTER MOVING 20M AND I IMMEDIATELY SAW IN MY REAR VIEW MIRROR THE OFFENDING VEHICLE SGY 8419 J (DRIVER B) ENTERING INTO THE LANE JUST BEHIND ME. DRIVING B WAS IN LANE TO GO TO TANGLIN RD BUT HE WAS CHANGING LANE TOWARDS GRANGE RD. I STOPPED THE VEHICLE TO INSPECT THE DAMAGE AND DRIVER B CAME OUT OF HIS VEHICLE WHICH HAD STOPPED BEHIND ME. HIS WIFE IN PASSNGER SEAT ALSO CAME OUT TO APOLOGIZE AND I ASKED IF THEY PREFERRED FOR ME TO CLAIM THEIR INSURANCE OR TO SETTLE PRIVATELY. THEY ASKED ME TO FIND OUT THE COSTS AND WE EXCHANGED CONTACT AND TOOK PICTURES BEFORE DRIVING OFF.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes


DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGY8419J
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)	-

SKETCH PLAN

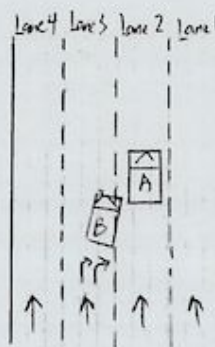
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)
I understand,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

 3/11/14 11:00
 Sketch Plan

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

Witnessed by Reporting Centre Personnel



A - SKM750V
 B - SGY 8719J

Describe Circumstances of the Accident

I, the driver of SP0R201 was travelling on 3 MAY about 12pm along Napier Road towards Grange Road on straight road which had heavy traffic I had manoeuvred from Lane 1 to Lane 2 when suddenly I felt a bump to my rear and moving for 20m and I immediately saw in my rear view mirror the offending vehicle as SKY249J (Driver B) ending into the lane just behind me Driver B was in lane to go to Tangle Rd but he was changing lane towards Grange Rd. I stopped the vehicle to inspect the damage and driver B came out and of his vehicle which had stopped behind me. His wife in passenger seat also came out to apologise and I asked if they preferred for me to claim their insurance or to settle privately. They asked me to find out the costs and he exchanged contact and took pictures before driving off.

Declaration

We declare the foregoing particulars are true in every respect


Policyholder's Signature / Date & Time

31/05/21 16:46

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

Witnessed by Reporting Centre Personnel













































GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66550020G / GST Reg. No.: M400017735

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SP0R21540004 Vehicle Registration No: SKM750U
 Name(as shown in NRIC) : DENNIS JAMES CHIW (ZHOU ZHENG) NRIC/FIN/Passport No : SXXXX867J
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : 450 SIN MING AVE #06-505 Singapore(570450)
 Contact (Tel) : Mobile No. : 82241998
 Email Address : THECHOCSHOP@GMAIL.COM
 Date of Accident : 03/05/2021 Time of Accident : 12:00 hours
 Place of Accident : NAPIER ROAD AFTER GLENEAGLES HOSPITAL
 Insurance Company: AIG ASIA PACIFIC INSURANCE PTE LTD

(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:

TO CONVERT TO REPORTING ONLY AS THE OTHER VEHICLE WHO CAUSED
 THE ACCIDENT HAS FAILED TO REPORT IT AND MY INSURER - AIG
 IN AN EFFORT TO SAVE COSTS AND RESOURCES HAS REFUSED TO
 PURSUE THE CULPRIT. THIS HAS ALLOWED THE CULPRIT TO ESCAPE
 AND IGNORE RESPONSIBILITY FOR THE ACCIDENT DESPITE MY POSSESSION
 OF EVIDENCE CONFIRMING THEY CAUSED THE ACCIDENT. GROSS & INJUSTICE
 AND SERIOUS FLAW IN THE ACCIDENT & INSURANCE CLAIM PROCESS
 AND INDUSTRY.

Policyholder / Driver's Signature
 Date: 17 AUG 22

Reporting Centre Personnel's Signature
 Name: Lim Kee Seng
 NRIC/FIN No.: 621111111111
 Date: 17/8/2022