

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 27/12/2021 10:38 (SGT)
Date of Accident 26/12/2021 13:54 (SGT)
Exact Location of Accident 1 Pasir Ris Central St 3, Singapore 518457
Additional Location Information WHITE SAND MALL CAR PARK
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLC205T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHIANG SE SHENG
NRIC No SXXXX367G
Email Address SESHENG@GMAIL.COM
Mobile Phone No (Phone) +65-84489923
Alternative Phone No +65-84489923

VEHICLE PARTICULARS

Manufacturer Audi
Model A5
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1984

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1900166714-01
Cover Note Number -

DRIVER

Name of Driver CHIANG SE SHENG
NRIC No SXXXX367G

Date Of Birth	29/03/1982
Occupation	Indoor
Date Of Driving Pass	20/03/2012
Driving experience	9 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84489923
Alt. Phone Number	+65-84489923
Email Address	SESHENG@GMAIL.COM
Address	BLK 59 PASIR RIS DRIVE 1
Address complement	#16-18
Postcode	519532
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	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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
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?	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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Black
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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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Chaplin 27/12/2021

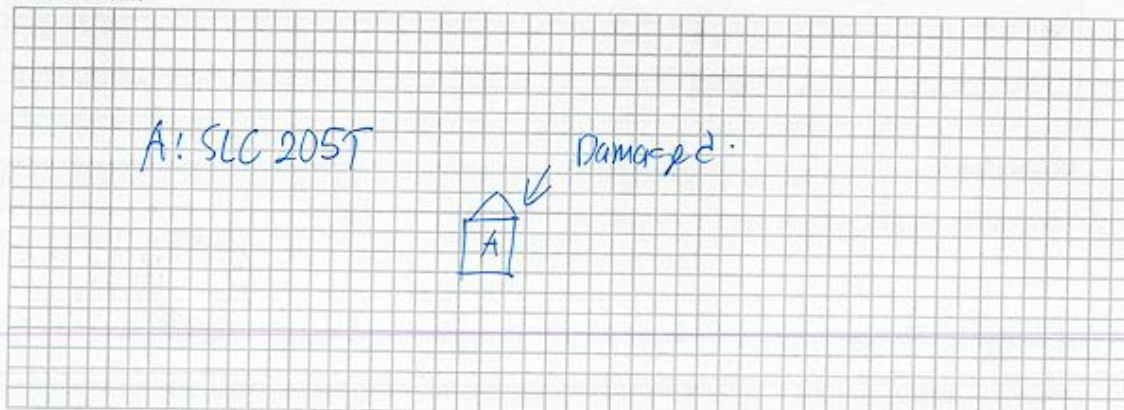
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



Sketch Plan



Describe Circumstances of the Accident

Refer to police report

Declaration

We declare the foregoing particulars are true in every respect.

A. Singh 27/12/2001

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

























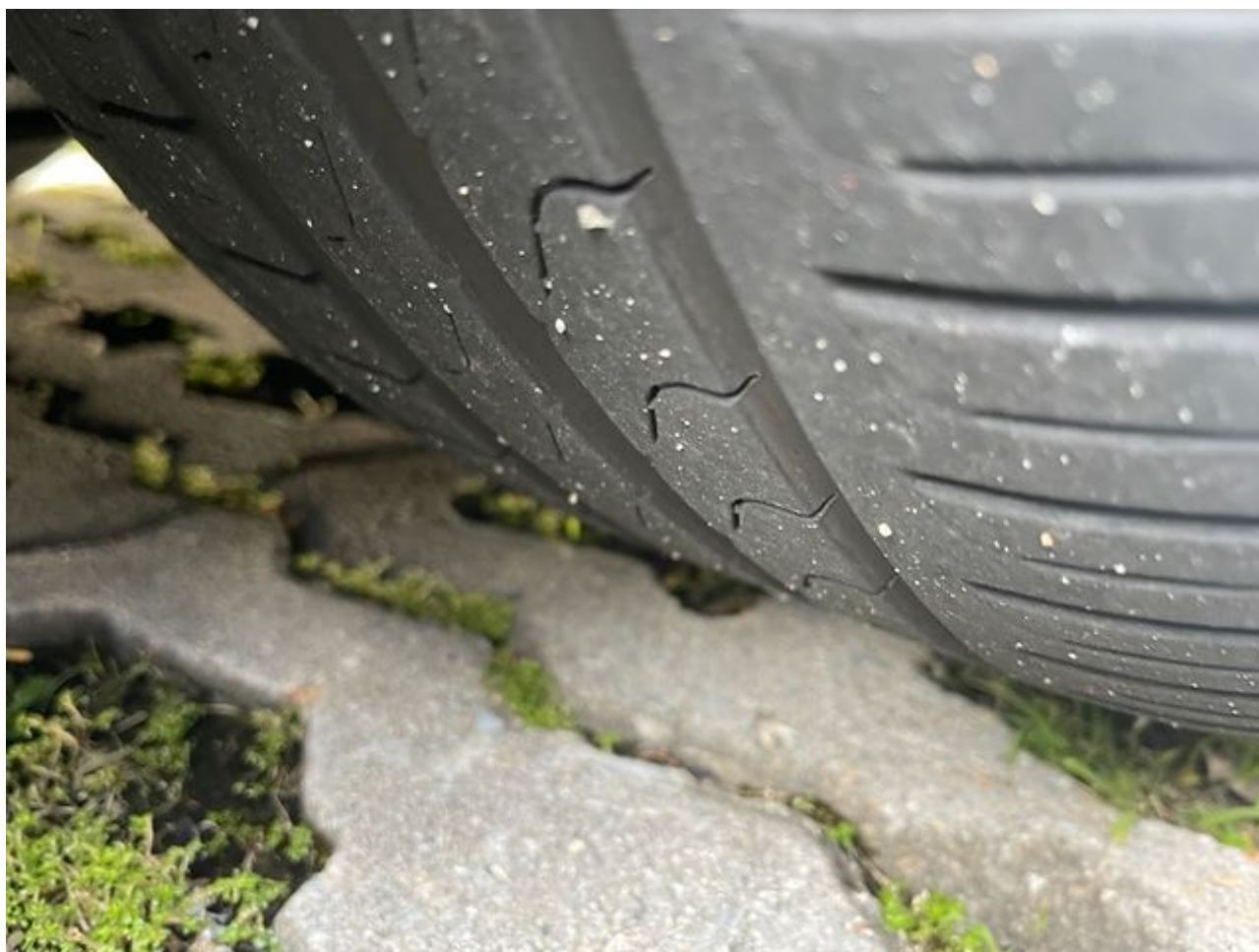
















**SINGAPORE
POLICE FORCE**



G/20211226/7041

1 of 2

POLICE REPORT (NP299)

Report No. G/20211226/7041

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 26/12/2021 16:53		Vide Report No.		Station Diary No.	
Name Of Informant CHIANG SE SHENG		Address 59 PASIR RIS DRIVE 1 #16-18 SINGAPORE 519532			
ID Type / ID No. NRIC NO / S8263367G		Contact No. Home/Office: Mobile: 84489923			
Nationality MALAYSIAN		Email Address SESHENG@GMAIL.COM			
Occupation IT business process consultant/business analyst		Sex Male	Age 39	Date of Birth 29/03/1982	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 26/12/2021 13:54 - 26/12/2021 14:00		Location Of Incident 1 PASIR RIS CENTRAL STREET 3 #01-01 WHITE SANDS SINGAPORE 518457			

Brief details.

On 26th Dec, 1:54pm my car SLC205T was parked stationary in White Sands mall B2 (near to priority family slot - opposite diagonally). My car was hit by a black SUV when i was in the mall. I have a video clip from my in car camera. The front fender of the car was damaged. No contact was left behind for me when i return to the car at 2:44pm. I tried to contact the security at the mall however they required me to make a police report for the CCTV access.

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: 26/12/2021 16:53
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Pasir Ris NPC Kiosk 1



**SINGAPORE
POLICE FORCE**



G/20211226/7041

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211226/7041

Subjects Involved			
Victim			
Person Name	CHIANG SE SHENG		
ID Type	NRIC NO	ID No	S8263367G
Gender	Male	Age	39
Race	Chinese	Language	English
Occupation	IT business process consultant/business analyst	Address	59 PASIR RIS DRIVE 1 #16-18 SINGAPORE 519532
Mobile No	84489923	Is Informant A Victim?	Yes
Person Name	CHIANG SE SHENG (Informant)		

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

This report is lodged at Pasir Ris NPC Kiosk 1

Signature Of Informant:

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

Date/Time:
26/12/2021 16:53

Classification Of Case: