

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 03/01/2022 15:57 (SGT)
Date of Accident 31/12/2021 19:20 (SGT)
Exact Location of Accident Singapore
Additional Location Information LEVEL CAR PARK OF BLK 2 KENSINGTON PARK DRIVE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJA1108T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAY CHAI CHIN
NRIC No S1758364F
Email Address jeffreytay01@gmail.com
Mobile Phone No (Phone) +65-97777838
Alternative Phone No +65-97777838

VEHICLE PARTICULARS

Manufacturer Audi
Model A3
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 1400

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5107156628-02
Cover Note Number drivo CLASSIC

DRIVER

Name of Driver TAY CHAI CHIN
NRIC No S1758364F

Date Of Birth	28/07/1966
Occupation	Indoor
Date Of Driving Pass	05/11/1984
Driving experience	37 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-97777838
Alt. Phone Number	+65-97777838
Email Address	jeffreytay01@gmail.com
Address	2 KENSINGTON PARK DRIVE #03-04 KENSINGTON PARK
Address complement	-
Postcode	557320
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	Drizzling
Road Surface	Wet

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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	SKK410L
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	SEAW YONG NGIAP
NRIC No	S7533231I
Contact Number	(Phone) +65-96644055
Address	-

Address complement -
Postcode -
Insurance Company Name AIG Asia Pacific Insurance Pte. Ltd.
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) 2

PASSENGER 1

Name PASSENGER
Gender Female

Insurance Company Name
 Nature Of Damage
 Details of property damaged in accident
 No. of Passengers (including Driver)

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 03/01/2022 15:38

Report No: MI D.O.A: 31/12/2021
 Time: 19:20 hrs

Vehicle No: SJA11081 Reporting Type:
 Gender:

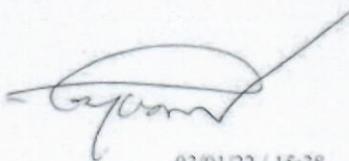
SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

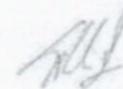
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.


 03/01/22 / 15:38

Policyholder's Signature / Date & Time

03/01/22 / 15:38

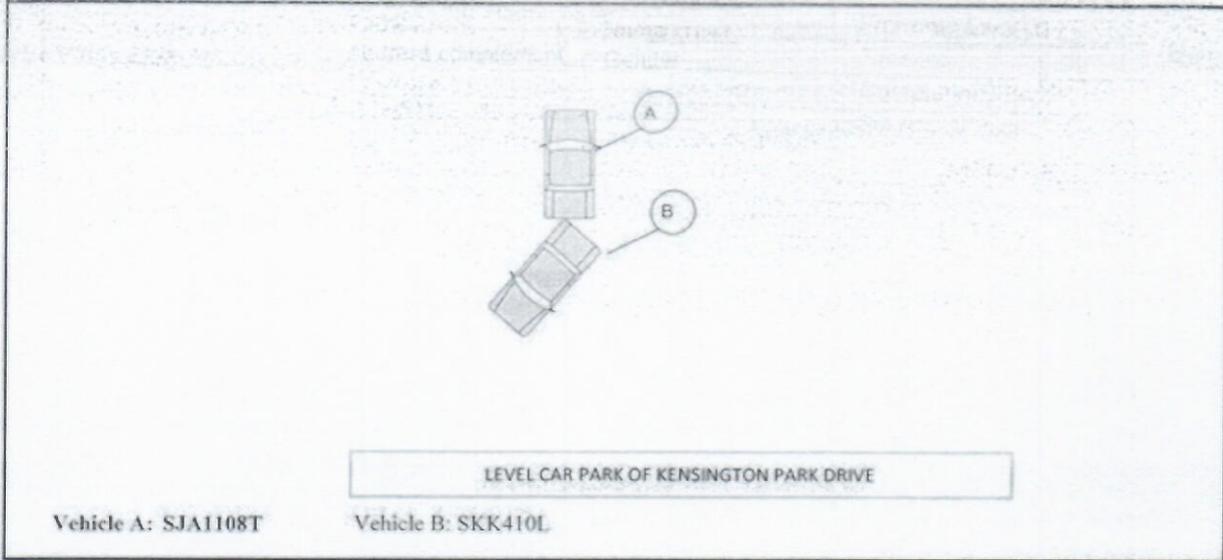
Driver's Signature (if driver is not the policyholder) / Date & Time



Ganesh (S993561)
 Customer Care Executive
 Motor Service Centre

Witnessed by Reporting Centre Personnel

SKETCH PLAN

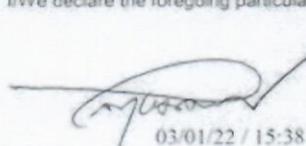


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

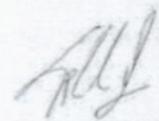
My vehicle was stationary parked at my parking lot. It was drizzling then vehicle B suddenly collided into my rear bumper of my vehicle while making a three point turn. Noted that my vehicle rear centre bumper left with white stain and scratches. After which the driver of vehicle B managed to get contact of me to exchange particulars.

Declaration

I/We declare the foregoing particulars are true in every respect.


03/01/22 / 15:38
Policyholder's Signature / Date & Time


03/01/22 / 15:38
Driver's Signature (if driver is not the policyholder) / Date & Time


Ganesh (S993561)
Customer Care Executive
Motor Service Centre
Witnessed by Reporting Centre Personnel

 **PREMIUM AUTOMOBILES**

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/1088/2021/JT
DATE : 4-Jan-22
WIP : 61752

VEHICLE NOT IN WORKSHOP. SURVEY TBC

YOUR INSURED VEH NO : SKK 410 L

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 : MR TAY CHAI CHIN
ADDRESS : 2 KENSINGTON PARK DRIVE
#03-04 KENSINGTON PARK CONDO
SINGAPORE 557320
TELEPHONE : HP +65 97777838
TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 5107156628-02
VEHICLE NO : **SJA 1108 T**
MODEL CODE : AUDI A3 SEDAN 1.4 TFSI
MODEL YEAR : 16/2/2015
ENGINE NO : CZC 298673
CHASSIS NO : WAUZZZ8V1G1045709
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 31-Dec-21
PLACE OF ACCIDENT : 2 KENSINGTON PARK DRIVE CAR PARK

PREMIUM AUTOMOBILES

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 TEL : 6366 2323 - FAX : 6841 1183

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



ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SJA 1108 T

S/N	NATURE OF JOBS	ESTIMATED CHARGES	SURVEYOR'S RECOMMENDATIONS
1	TO REMOVE AND TRANSFER REAR PARKING AID. CHECK FUNCTION.	S/N \$ 280.00	✓
2	TO DISMANTLE AND RENEW REAR BUMPER. TO REPAIR REAR END PANELLING. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED.	\$ 1,400.00	500 ✓
3	TO RESPRAY REAR BUMPER AND REAR END PANELLING.	\$ 2,000.00	500 ✓
4	TO CARRY OUT DIAGNOSTIC CHECK.	S/N \$ 192.00	✓
TOTAL LABOUR CHARGES		: \$ 3,872.00	



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MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SJA 1108 T

ESTIMATED LABOUR

		DAMAGED PARTS & PRICES		
S/N	PARTS DESCRIPTION	QTY	S/NETT	REMARKS
1	REAR BUMPER <i>shhd</i>	1	\$ 2,070.00	✓
2	REAR BUMPER FIXING PARTS <i>mea</i>	1	\$ 193.00	+
3	REAR BUMPER GUIDE SECTION - LH / RH <i>mea</i>	2	\$ 32.00	+
4	REAR BUMPER SPOILER <i>cut</i>	1	\$ 237.00	✓
5	REAR LIGHT REFLECTOR - LH / RH <i>mea</i>	2	\$ 82.00	+
6	REAR BUMPER REINFORCEMENT BEAM <i>mea</i>	1	\$ 603.00	+
7	REAR BUMPER BRACKET - LH / RH	2	\$ 26.00	+
8	REAR BUMPER GUIDE SECTION OUTER - LH / RH <i>mea</i>	2	\$ 134.00	+
9	REAR PARKING AID SENSOR - INNER / OUTER <i>mea</i>	2	TBC	+
10	REAR PARKING AID SENSOR SEAL RING <i>mea</i>	4	\$ 9.00	+
11	SUNDRIES <i>?</i>		\$ 300.00	-
TOTAL SPARE PARTS		:	\$ 3,686.00	
TOTAL LABOUR CHARGES		:	\$ 3,872.00	
GRAND TOTAL		:	\$ 7,558.00	

ALL CHARGES ARE NOT INCLUSIVE OF GST

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



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TEL : 6366 2323 FAX : 6841 1183

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

NAME

SURVEYED DATE

AUTHORISED DATE

EXCESS COST

LIABILITY

REMARKS

: Adnan
: 10/01/22
:
:
:
: Not 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