

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	07/01/2022 16:15 (SGT)
Date of Accident	06/01/2022 18:00 (SGT)
Exact Location of Accident	Chestnut Cl, Singapore
Additional Location Information	JUNCTION WITH CHESTNUT AVENUE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMQ5522J
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHUAN PEIYING (QUAN PEIYING)
NRIC No	SXXXX109C
Email Address	peiyingchuan@gmail.com
Mobile Phone No	(Phone) +65-98256378
Alternative Phone No	+65-98256378

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Alphard
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	2494

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	7210144750
Cover Note Number	-

DRIVER

Name of Driver	CHUAN PEIYING (QUAN PEIYING)
NRIC No	SXXXX109C

Date Of Birth	12/05/1983
Occupation	Indoor
Date Of Driving Pass	14/08/2002
Driving experience	19 YEARS AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-98256378
Alt. Phone Number	+65-98256378
Email Address	peiyingchuan@gmail.com
Address	12 CHESTNUT CRESCENT
Address complement	-
Postcode	679366
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 - Major/Minor Rd
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)	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	JOEVELYN BASANES
Gender	Female

PASSENGER 2

Name	BETHANY CHIA
Gender	Female

PASSENGER 3

Name	NOELLE CHIA
Gender	Female

PASSENGER 4

Name	JACOB CHIA
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Panjang Neighbourhood Police Centre
Police Station Address	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT J/20210106/2107

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 SGD8638D
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
Name of Driver N.Y.TAN
Contact Number (Phone) +65-96383968
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

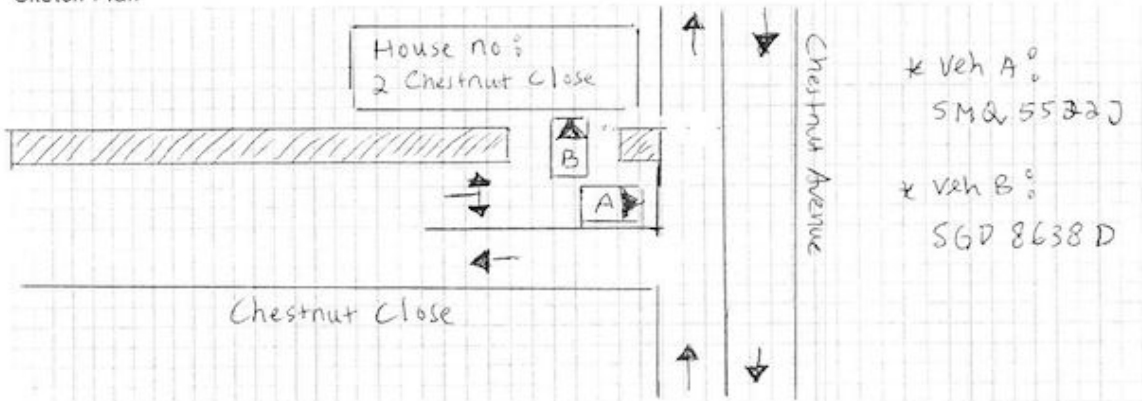
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



* Refer to police report # J/20220106/2107

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre
Personnel
























**SINGAPORE
POLICE FORCE**


J/20220106/2107

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POLICE REPORT (NP299)

Report No. J/20220106/2107

Police Station Of Origin
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

Date/Time Report Made 06/01/2022 22:06	Vide Report No.	Station Diary No. 107
Name Of Informant CHUAN PEIYING	Address 12 CHESTNUT CRESCENT SINGAPORE 679366	
ID Type / ID No. NRIC NO / S8303109C	Contact No. Home/Office	Mobile 98256378
Nationality SINGAPORE CITIZEN	Email Address peiyongchuan@gmail.com	
Occupation Chief operating officer/General Manager	Sex Female	Age 38
Institution/School Name	Date of Birth 12/05/1983	Race Chinese
Date/Time Of Incident 06/01/2022 18:00	Location Of Incident CHESTNUT CLOSE SINGAPORE T JUNCTION WITH CHESTNUT AVENUE	

Brief details.

On 6/1/2022, at about 1800hrs, I was travelling along Chestnut Close in my vehicle SMQ5522J with my helper, 2 children and 1 niece. When I stopped at the T-Junction between Chestnut Close and Chestnut Ave wanting to make a turn, I was suddenly hit on the rear-left side of my vehicle. I noticed that a vehicle SGD8638D had reversed out of his unit at 2 Chestnut Close and hit onto my vehicle. The rear-left side of my vehicle's body near to the tyre suffered dents and scratches.

I alighted my vehicle and requested for the driver's license of SGD8638D to document the accident.

Signature Of Officer Recording The Report: J / Sgt 2 NG WEE CHEW 	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/01/2022 22:06
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Other LOH YOU CONG, HARRY Contact No.: 67910000	Classification Of Case:

Authentication Stamp





**SINGAPORE
POLICE FORCE**



J/20220106/2107

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20220106/2107

However, the driver handed me his name card, and informed that he will pay for my damages. He refused to hand me his driver's license or particulars. I insisted for it, which he continued to refuse my request. He got into his vehicle and tried to squeeze out into the road, but my vehicle was still parked along the road. As such, he had difficulty getting out. He asked for me to move my vehicle so that he can leave, however I did not want to move it until he provided his particulars to me. He alighted and approached me.

I continued to request for his driver's license. He became visibly agitated and clenched his fist, and came very close towards me. His wife then pulled him back. He returned into his car and with the assistance of his wife, moved his car and drove off.

I have informed my insurance agent of the matter and will be lodging a report with the company. I am lodging this police report to document the incident and for my own use if needed, as I am concerned that this driver may look for trouble with me in the future. We are not injured.

The driver of SGD8638D's particulars stated on the name card is:

N. Y. Tan (CHEN YUE XIONG in Chinese)

96383968

CATERMAS ENGINEERING PTE LTD

15 TUAS BASIN CLOSE S(638805)

Signature Of Officer Recording The Report:

J / Sgt 2 NG WEE CHEW

Signature Of Interpreter:

Not applicable

Signature Of Informant:

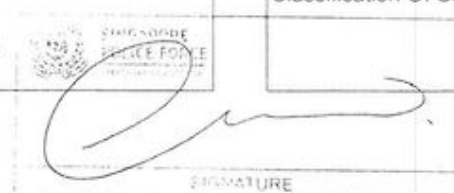
Date/Time:

06/01/2022 22:06

Officer In-Charge Of Case:

J / Jurong Police Divisional
Investigation Branch /
Other LOH YOU CONG, HARRY
Contact No.: 67910000

Authentication Stamp



Classification Of Case:



CONFIDENTIAL
NOTICE OF REPORTING

This is to inform that Chuan Peiying (DRIVER of VI), S8303109C, has reported to the police a non-injury traffic accident, which occurred along Chestnut Close towards Chestnut Avenue, on 6/1/2022, at about 06:00pm involving the following vehicles:

V I : SMQ5522J

V II : SGD8638D

Mr. N. Y. Tan / HP:96383968

2. If the accident is reported to the Police within 24 hours of its occurrence, He/she therefore has complied with Section 84(2) of the Road Traffic Act, Chapter 276.

Rank/Name of Issuing Officer : Sgt(2) Ng Wee Chew
Date/Time : 6/1/2022 @ 06:00pm
Station Diary : 108
Police Post : Bukit Panjang NPC
Signature : [Signature]
Bukit Panjang NPC
Sagar Road #01-05
Singapore 677738
Tel: 6892 9999

Original - To be issued to informant
Duplicate - To be retained at NPC or Police Post



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: SN0822170003 Vehicle Registration No: SMQ5522J
 Name (as shown in NRIC): CHUAN PEI YING (Chuan Pei Ying) NRIC/FIN/Passport No: SXXXX109C
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 9825638
 Email Address: _____
 Date of Accident: 06/01/2022 Time of Accident: 18:00
 Place of Accident: CHASTMUT CLOAK JUNCTION WMA CHASTMUT AVE
 Insurance Company: AIU

(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:

INQUIRED EMAIL ADDRESS TO PEIYING CHUAN @ GMAIL.COM

Policyholder / Driver's Signature
Date:

12/01/2022
 Reporting Centre Personnel's Signature
 Name: Rishi
 NRIC/FIN No.: W00005
 Date: