

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 26/01/2022 18:16 (SGT)
Date of Accident 24/01/2022 18:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information 12 JALAN EMAS URAI (678734)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKU9660U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner YEO WEI MIN ELAINE
NRIC No SXXXX709F
Email Address rgoh99@yahoo.com
Mobile Phone No (Phone) +65-93898500
Alternative Phone No +65-93898500

VEHICLE PARTICULARS

Manufacturer LandRover
Model Discovery
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 3000

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage -
Fleet Policy No
Policy Number 1900007067
Cover Note Number -

DRIVER

Name of Driver GOH EE KIAT
NRIC No SXXXX607J

Date Of Birth	22/09/1965
Occupation	Indoor
Date Of Driving Pass	18/11/1986
Driving experience	35 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93898500
Alt. Phone Number	-
Email Address	rgoh99@yahoo.com
Address	12 JALAN EMAS URAI
Address complement	-
Postcode	678734
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collided into Parked Vehicle
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

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	SMQ2893H
Vehicle Manufacturer	Mitsubishi
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Government

Name of Driver	HIZQIL HAIDAR
NRIC No	SXXXXX254I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	MS First Capital Insurance Ltd
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' 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT
J/20220125/7027

Mr Hizgil Haider admitted to his fault.

Declaration

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

Policyholder's Signature / Date &
Time



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



Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



J/20220125/7027

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POLICE REPORT (NP299)

Report No. J/20220125/7027

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 25/01/2022 15:05	Vide Report No.	Station Diary No.
Name Of Informant GOH EE KIAT	Address 12 JALAN EMAS URAI SINGAPORE 678734	
ID Type / ID No. NRIC NO / S1687607J	Contact No. Home/Office:	Mobile: 93898500
Nationality SINGAPORE CITIZEN	Email Address rgoh99@yahoo.com	
Occupation Company director	Sex Male	Age 56
Institution/School Name	Date of Birth 22/09/1965	Race Chinese
Date/Time Of Incident 24/01/2022 18:00 - 24/01/2022 18:05	Location Of Incident 12 JALAN EMAS URAI SINGAPORE 678734	

Brief details.

The nature of the accident was that on the 24 Jan 2022 at 1800hrs, the front of vehicle SMQ2893H, driven by Mr Hizqil Haidar IC (S9727254I) collided with the rear of a stationary vehicle SKU9660U parked along Jalan Emas Urai while Mr Goh Ee Kiat IC (S1687607J) of vehicle SKU9660U was at his home in 12 Jalan Emas Urai. Vehicle SMQ2893H is a government property belonging to LTA.

Subjects Involved	
Suspect	
Person Name	Hizqil Haidar

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: 25/01/2022 15:05
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



J/20220125/7027

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20220125/7027

ID Type	NRIC NO	ID No	S9727254I
Gender	Male	Age	20-30
Victim			
Person Name	GOH EE KIAT		
ID Type	NRIC NO	ID No	S1687607J
Gender	Male	Age	56
Race	Chinese	Language	English
Occupation	Company director	Address	12 JALAN EMAS URAI SINGAPORE 678734
Mobile No	93898500	Is Informant A Victim?	Yes
Person Name	GOH EE KIAT (Informant)		

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: 25/01/2022 15:05
Officer In-Charge Of Case:	Classification Of Case: