

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 | 21/03/2022 11:48 (SGT) |
| Date of Accident | 20/03/2022 14:00 (SGT) |
| Exact Location of Accident | 107 North Bridge Rd, Singapore 179105 |
| Additional Location Information | FUNAN MALL CAR PARK B4- LOT 147 |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SML2384L |
|-----------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------|--------------------------|
| Is company? | No |
| Name Of Registered Owner | CHOY RUI CHENG |
| NRIC No | SXXXX860F |
| Email Address | RUICHENG2005@HOTMAIL.COM |
| Mobile Phone No | (Phone) +65-81211158 |
| Alternative Phone No | +65-81002409 |

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 | 1498 |

INSURANCE COMPANY

| | |
|---------------------------|--------------------------------------|
| Name of Insurance Company | AIG Asia Pacific Insurance Pte. Ltd. |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | 7210108895 |
| Cover Note Number | - |

DRIVER

| | |
|--------------------------------------------------------------|--------------------------|
| Date Of Birth | 30/05/1985 |
| Occupation | Indoor |
| Date Of Driving Pass | 17/06/2004 |
| Driving experience | 17 YEARS AND 9 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-81211158 |
| Alt. Phone Number | +65-81002409 |
| Email Address | RUICHENG2005@HOTMAIL.COM |
| Address | BLK 265D PUNGGOL WAY |
| Address complement | #03-354 |
| Postcode | 824265 |
| 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 | Punggol Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18006049999 |
| Alt. Police Station Phone No | (Fax) +65-64468015 |
| Police Station Address | Blk 21A Tebing Lane Singapore 828837 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO 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 | SGX6556P |
| Vehicle Manufacturer | Volvo |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | |

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)

ENTRY DATE & TIME 21/10/2022
SUBMITTED BY: DOONG CHIN FONG
VERSION: 1.21032022 11:48:00

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report accurately the details of the accident to speed up the claims process. This form must be completed by the Police Officer for the Accident and signed by the driver and the other party involved. It is a legal document and any falsification of material facts may allow the insurance company to deny the claim. Please refer to the back of the form for more details. If you are unsure, please contact your insurance company for assistance.

SKETCH PLAN

Date of Birth: 12/11/1988
 Location: 12/11/1988
 Date of Driving Pass: 12/11/1988
 Driving experience: 12/11/1988
 Gender: 12/11/1988
 Address: 12/11/1988
 Alt. Phone Number: 12/11/1988

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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. The 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.
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

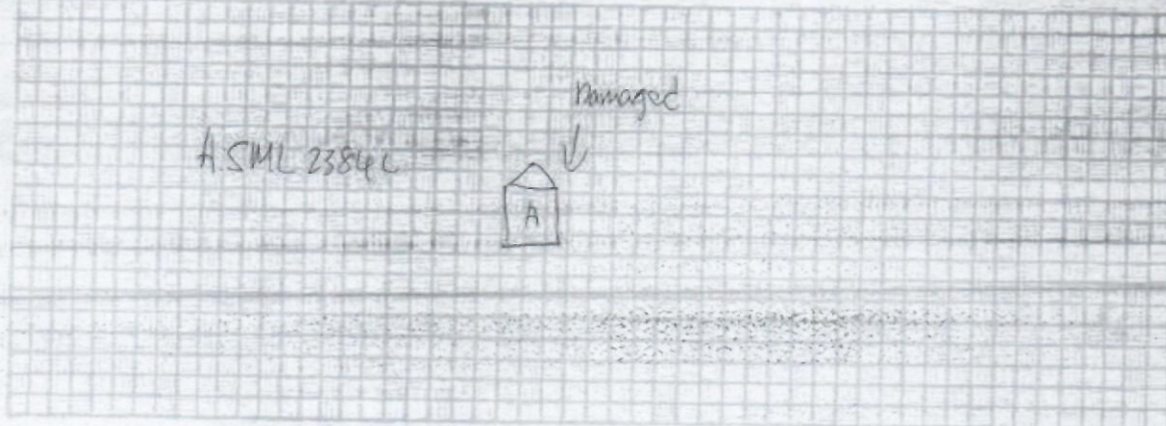
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



SKETCH PLAN #2

Name of Driver

Vehicle Number

Address

Address complement

Postcode

Insurance Company Name

Nature Of Damage

Details of property damaged and

No. of Passengers (including Driver)

Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

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



T/20220320/2043

Police Station of Origin:

Punggol N.P.C.

151 Punggol Central SINGAPORE 828727

Tel No: 1800-6049999

1 of 3

Report No: T/20220320/2043

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--------------------------------------------|------------------|--------------------------|
| Date/Time Report Made: 20/03/2022 18:27 | Vide Report No.: | Station Diary No.: 59 |
|--------------------------------------------|------------------|--------------------------|

Informant's Particulars

| | | | | | |
|------------------------------------------|------------|------------------------------|------------------------------------------------------------------|--|----------------------------|
| Name of Informant: CHOY RUI CHENG | | | Address: APT BLK 265D PUNGGOL WAY #03-354 SINGAPORE 824265 | | |
| ID Type / ID No.: NRIC NO / S8516860F | | | Contact No.: Home/Office: Mobile: 81211158 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: ruicheng2005@hotmail.com | | |
| Sex: Male | Age: 36 | Date of Birth: 30/05/1985 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: Technician | | | Driving Licence Information: Class: 3 Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---------------------------------------------------------------|---------------------------|------------------------------------|--------------------------------------------|------------------------------------------|
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 20/03/2022 16:15 | Type of Location: Funan Mall Car park |
| Location: NORTH BRIDGE ROAD | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: 30 Km/h | |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | Traffic Volume: Light | |
| Type of Collision: Moving Vehicle Against - Parked Vehicle | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|------|----------------------------------|-------|---------------------|-----------------|
| SGX6556P | Car | | | | | 0 |
| SML2384L | Car | AUDI | A3 SEDAN 1.5 TFSI S TRONIC | Red | Slightly Damaged | 0 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|



SINGAPORE
POLICE FORCE



T/20220320/2043

Sent:

Friday, 11 March 2022 9:57 AM

Sent:

2 of 3

To:

Police Station Of Origin:

Punggol N.P.C

From:

151 Punggol Central SINGAPORE 828727

Attn:

Tel No: 1800-6049999

Report No: T/20220320/2043

Attachments

CONTINUATION OF REPORT

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|--------------------------------------|--------------|------------|-------------|
| SML2384L | AIG ASIA PACIFIC INSURANCE PTE. LTD. | 7210108895 | 09/09/2021 | 08/09/2023 |

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Driver

| | | | |
|-----------------------------------|----------------|----------------------------------------|---------------------------------|
| Name | CHOY RUI CHENG | ID No. | S8516860F |
| Related Vehicle | SML2384L (Car) | Contact No. | 81211158 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 20/03/2022 at about 1240hrs, I parked my vehicle SML2384L at Funan Mall car park, Deck B4, lot number 147. I left after securing my vehicle. At about 1615hrs, I returned back to my vehicle and discovered that there is dent and scratch marks on the front right bumper of my vehicle. I then viewed back my in-car camera and saw that at 1400hrs, a vehicle registration plate SGX6556P tried to squeeze into a small space located on the right of my vehicle and as the result the said vehicle hit and scratched my vehicle. There is an impact upon the said vehicle hit onto my vehicle as captured by my in-car camera. The said vehicle drove off after that.

I wished to state that my in-car camera had captured the incident and the vehicle registration plate (SGX6556P) was clearly seen in the video and there is no note left behind by the driver of the said vehicle. I am lodging this report for Traffic Investigation and also for insurance claim purposes. That's All



SINGAPORE
POLICE FORCE



T/20220320/2043

3 of 3

Police Station Of Origin:

Punggol N.P.C

151 Punggol Central SINGAPORE 828727

Tel No: 1800-6049999

Report No: T/20220320/2043

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

N/A

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report:
F / Other CHAN LEE WAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/03/2022 18:27

Officer In Charge Of Case:
TP / HRT /
SI STEPHANIE, CHEUNG TSZ YING
Contact No.: 96208032

Classification Of Case:

NP168



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/0219/2022/JT
DATE : 23-Mar-22
WIP : 16445

VEHICLE NOT IN WORKSHOP. KINDLY ARRANGE SURVEY 25/3/22
YOUR INSURED VEH NO : SGX 6556 P

HL ASSURANCE Pte Ltd
11 KEPPEL ROAD
#11-01 ABI PLAZA
SINGAPORE 089057
Attn: Motor Claims Dept
Tel: 65 6922 6017 - Fax: 65 6224 1923

OWNER'S NAME : MR CHOY RUI CHENG
ADDRESS : BLK 265D PUNGGOL WAY
#03-354
SINGAPORE 824265
TELEPHONE : HP +65 8121158
TYPE OF CLAIM : THIRD PARTY CLAIM
POLICY NO : 7210108895
VEHICLE NO : **SML 2384 L**
MODEL CODE : AUDI A3 SEDAN 1.5 TFSI
MODEL YEAR : 9/9/2021
ENGINE NO : DFY 295647
CHASSIS NO : WAUZZZGY7NA007054
MILEAGE : -
DATE IN : -
ESTIMATED BY : JOHNNY BOO / ALLAN WU
ACCIDENT DATE : 20-Mar-22
PLACE OF ACCIDENT : FUNAN MALL CAR PARK B4 LOT-147

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

ESTIMATED LABOUR CHARGES FOR ACCIDENT VEHICLE SML 2384 L

| S/N | NATURE OF JOBS | ESTIMATED CHARGES | SURVEYOR'S RECOMMENDATIONS |
|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------|
| 1 | TO REMOVE, CHECK AND TRANSFER FRONT WIRE HARNESS FOR HEADLIGHTS, HORNS, OUTSIDE TEMPERATURE SENSOR, HEADLIGHT WASHER ASSY AND FRONT PARKING AID. | S/N \$ 480.00 | ✓ |
| 2 | TO REMOVE AND TRANSFER RHS HEADLIGHT'S CONTROL UNIT AND POWER MODULE. | S/N \$ 350.00 | X |
| 3 | TO DISMANTLE AND RENEW FRONT BUMPER, RHS FRONT FENDER AND RHS HEADLIGHT. RE-ORGANIZE CRASH MANAGEMENT COMPONENTS. REINSTALL ALL PARTS REMOVED. | \$ 2,100.00 | 700 ✓ |
| 4 | TO RESPRAY FRONT BUMPER AND RHS FRONT FENDER. | \$ 2,000.00 | 1400 ✓ |
| 5 | TO CARRY OUT DIAGNOSTIC CHECK. | S/N \$ 192.00 | ✓ |
| TOTAL LABOUR CHARGES | | : \$ 5,122.00 | ✓ |

55 UBI ROAD 1, SINGAPORE 408699
TEL : 6366 2323 FAX : 6841 1183
EMAIL: NORA.KHAI@PREMIUMAUTO.COM.SG / CLAIMS@PREMIUMAUTO.COM.SG

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SML 2384 L

| | | | DAMAGED PARTS & PRICES | |
|------------------------------|------------------------------------------------------------|-----|------------------------|---------|
| S/N | PARTS DESCRIPTION | QTY | S/NETT | REMARKS |
| 1 | FRONT BUMPER <i>Rep</i> | 1 | \$ 1,677.00 | X |
| 2 | FRONT BUMPER FIXING PARTS <i>3x16mm</i> | 1 | \$ 290.00 | X |
| 3 | FRONT BUMPER CLOSING ELEMENT - RH | 1 | \$ 130.00 | X |
| 4 | FRONT BUMPER CLOSING ELEMENT - LOWER CENTER <i>16mm</i> | 1 | \$ 265.00 | X |
| 5 | FRONT BUMPER AIR GUIDE - RH | 1 | \$ 67.00 | X |
| 6 | FRONT BUMPER TRIM COVER - RH | 1 | \$ 104.00 | X |
| 7 | FRONT BUMPER AIR GUIDE GRILLE - RH | 1 | \$ 171.00 | X |
| 8 | FRONT BUMPER AIR GUIDE SUPPORT - RH | 1 | \$ 43.00 | X |
| 9 | FRONT BUMPER GUIDE SECTION - RH | 1 | \$ 54.00 | X |
| 10 | FRONT BUMPER TOP COVER <i>16mm</i> | 1 | \$ 93.00 | X |
| 11 | CAUTION STICKER <i>2x16mm</i> | 1 | \$ 16.00 | X |
| 12 | AIR COND STICKER | 1 | \$ 9.00 | X |
| 13 | FRONT FENDER - RH <i>Rep</i> | 1 | \$ 1,241.00 | X |
| 14 | FRONT FENDER CLOSING ELEMENT - RH | 1 | \$ 32.00 | X |
| 15 | FRONT FENDER POP RIVET | 3 | \$ 12.00 | X |
| 16 | FRONT FENDER BRACE - RH | 1 | \$ 98.00 | X |
| 17 | FRONT FENDER BRACKET - RH | 1 | \$ 46.00 | X |
| 18 | FRONT FENDER BRACKET END - RH | 1 | \$ 35.00 | X |
| 19 | FRONT WHEEL HOUSING LINER - RH | 1 | \$ 183.00 | X |
| 20 | FRONT WHEEL HOUSING LINER CLOSING ELEMENT - RH <i>16mm</i> | 1 | \$ 22.00 | X |
| SUB TOTAL SPARE PARTS | | : | \$ 4,588.00 | |

ALL CHARGES ARE NOT INCLUSIVE OF GST
LEGEND: REMARKS (OK) = APPROVED, REMARKS (X) = NOT APPROVED
SPARE PARTS ARE SPECIAL NETT.

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

MATERIAL LIST FOR ACCIDENT VEHICLE REGN NO. SML 2384 L

| S/N | PARTS DESCRIPTION | QTY | DAMAGED PARTS & PRICES | | REMARKS |
|-----------------------------|------------------------------------|-----|------------------------|------------------|---------|
| | | | S/NETT | | |
| 21 | HEADLIGHT - RH | 1 | \$ | 4,084.00 | + |
| 22 | LIFT CYLINDER - RH | 1 | \$ | 211.00 | + |
| 23 | LIFT CYLINDER HOSE | 1 | \$ | 108.00 | + |
| 24 | FRONT PARKING AID SENSOR SIDE | 1 | | TBC | + |
| 25 | FRONT PARKING AID SENSOR SEAL RING | 4 | \$ | 32.00 | + |
| 26 | SUNDRIES | | \$ | 300.00 | 2 X nn |
| TOTAL SPARE PARTS | | : | \$ | 9,323.00 | |
| TOTAL LABOUR CHARGES | | : | \$ | 5,122.00 | |
| GRAND TOTAL | | : | \$ | 14,445.00 | |

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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 : Admin L
SURVEYED DATE : 25/03/22
AUTHORISED DATE :
EXCESS COST :
LIABILITY :
REMARKS : Not Attached, 04 Pags

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

LKK Auto Consultants hence notify the Repairer of the following:

- To resurvey before/after spray painting
- To display damaged part(s) during resurvey
- Parts prices are subject to confirmation
- Third party survey is on a "Without Prejudice" basis
- No illegal modification(s) is allowed
- Supplementary item(s) must be resurveyed and is subject to final approval from insurance Company

Acknowledged by Repairer

Signature:

Date:

JOHNNY BOO
BODY REPAIR MANAGER

ALLAN WU
CLAIMS CONSULTANT