

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 18/04/2022 18:35 (SGT)
Date of Accident 14/04/2022 17:10 (SGT)
Exact Location of Accident 934 Tampines Street 91, Singapore
Additional Location Information BETWEEN BLK 928 & 934 (CARPARK LOT 185)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMG3852Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TAY GEK SIE, EUNICE (DAI YUSHI, EUNICE)
NRIC No SXXXX239J
Email Address abc8627e@gmail.com
Mobile Phone No (Phone) +65-96940744
Alternative Phone No +65-96940744

VEHICLE PARTICULARS

Manufacturer Mazda
Model Cx-3
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 1998

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 1800151300-02
Cover Note Number -

DRIVER

Name of Driver WONG EE KEAN
NRIC No SXXXX260Z

Date Of Birth	21/06/1984
Occupation	Indoor
Date Of Driving Pass	26/07/2005
Driving experience	16 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-96883138
Alt. Phone Number	-
Email Address	abc8627e@gmail.com
Address	120 FABER DRIVE
Address complement	-
Postcode	129430
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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	Side Swipe
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	ISAAC TAY
Gender	Male

PASSENGER 2

Name	EZANN TAY
Gender	Female

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

PLS REFER TO THE POLICE REPORT : G/20220418/7066.

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

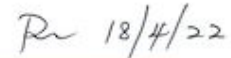
Vehicle Registration Number	GBF4126P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	(Phone) +65-97325797
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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.


Policyholder's Signature / Date & Time


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

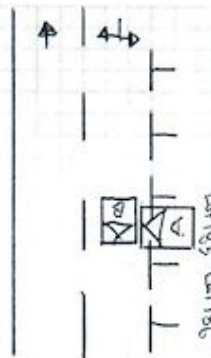

Witnessed by Reporting Centre Personnel

Sketch Plan

Vehicle: SMG 3852Y
Vehicle: GBF 4126P

Between Blk 928 & 934 Tampines
St 91 Carpark Lot 185.

Blk 928



Blk 934

Describe Circumstances of the Accident

Handwritten notes in the 'Describe Circumstances of the Accident' section:


Police Report
To
G/20220418/7066
Ref

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

 18/4/22

Witnessed by Reporting Centre Personnel





















SINGAPORE
POLICE FORCE



G/20220418/7066

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POLICE REPORT (NP299)

Report No. G/20220418/7066

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

Date/Time Report Made 18/04/2022 16:13	Vide Report No.	Station Diary No.
Name Of Informant WONG EE KEAN	Address 120 FABER DRIVE SINGAPORE 129430	
ID Type / ID No. NRIC NO / S8417260Z	Contact No. Home/Office: Mobile: 96883138	
Nationality SINGAPORE CITIZEN	Email Address eekean@gmail.com	
Occupation Business consultant	Sex Female	Age 37
	Date of Birth 21/06/1984	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 14/04/2022 17:10 - 14/04/2022 17:15	Location Of Incident 934 TAMPINES STREET 91 TAMPINES PALMSRING SINGAPORE 520934	

Brief details.

On the stated date and time, I Veh A (SMG3852Y) wanted to exit my parking lot.

As I had inched out, I noticed oncoming traffic, VEH B (GBF4126P), from my right.

Hence, I came to a stop to give way.

Several seconds later, VEH B (GBF4126P) hit onto my stationary VEH A (SMG3852Y).

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: 18/04/2022 16:13
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220418/7066

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220418/7066

Subjects Involved			
Victim			
Person Name	WONG EE KEAN		
ID Type	NRIC NO	ID No	S8417260Z
Gender	Female	Age	37
Race	Chinese	Language	English
Occupation	Business consultant	Address	120 FABER DRIVE SINGAPORE 129430
Mobile No	96883138	Is Informant A Victim?	Yes
Person Name	WONG EE KEAN (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: 18/04/2022 16:13
Officer In-Charge Of Case:	Classification Of Case: