

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 25/04/2022 13:23 (SGT)
Date of Accident 25/04/2022 09:10 (SGT)
Exact Location of Accident Tampines, Singapore
Additional Location Information 21 TAMPINES IND'L AVE 5 OSCP
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJY448S

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner GIAN AH MOI
NRIC No SXXXX842A
Email Address ALLENGIAN@GMAIL.COM
Mobile Phone No (Phone) +65-97220696
Alternative Phone No +65-97220696

VEHICLE PARTICULARS

Manufacturer Nissan
Model Qashqai
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1198

INSURANCE COMPANY

Name of Insurance Company Allianz Insurance Singapore Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number SP2000391065-01
Cover Note Number -

DRIVER

Name of Driver GIAN AH MOI
NRIC No SXXXX842A

Date Of Birth	23/09/1948
Occupation	Indoor
Date Of Driving Pass	25/06/1968
Driving experience	53 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97220696
Alt. Phone Number	+65-97220696
Email Address	ALLENGIAN@GMAIL.COM
Address	120M TANAH MERAH BESAR LANE
Address complement	-
Postcode	498933
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?	Yes
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

FOREIGN VEHICLE 1

Vehicle Registration Number	AMC8559
Vehicle Category	Commercial vehicle

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT

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	AMC8559
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

SKETCH PLAN

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7. By the lodgment 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.
 - (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.

Policyholder's Signature Date
& Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.: 25/04/22

SKETCH PLAN

Hit & Run

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Police Report

* Kindly take note that you have 14 days to revert to Own Insurance Claim (own damage).

Claim OD / TP At Falcon-Air

Claim OD / TP Own W/shop

Reporting Only

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:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**

POLICE REPORT (NP299)

Police Station Of Origin
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999



G/20220425/2025

1 of 2

Report No. G/20220425/2025

Date/Time Report Made 25/04/2022 11:56	Vide Report No.	Station Diary No. 24
Name Of Informant GIAN AH MOI	Address 120M TANAH MERAH BESAR LANE SINGAPORE 498933	
ID Type / ID No. NRIC NO / S1014842A	Contact No. Home/Office	Mobile 97220696
Nationality SINGAPORE CITIZEN	Email Address allengian@gmail.com	
Occupation Sales manager	Sex Male	Age 73
Institution/School Name	Date of Birth 23/09/1948	Race Chinese
Date/Time Of Incident 25/04/2022 09:10	Location Of Incident 21 TAMPINES INDUSTRIAL AVENUE 5 T5 @ TAMPINES SINGAPORE 528620 Outside Pilot Pen (S) Pte Ltd premises	

Brief details.

On 25/04/22, at about 0845hrs, I parked my vehicle, one black Nissan Qashqai, SJY448S, outside of my company. The area is located at Level 1 and it is for our company's staff to park their vehicles. At that point of time, everything was intact.

On the same day, at about 0910hrs, I was informed by one of my colleagues from the warehouse

Signature Of Officer Recording The Report: G / SGT 3 JONATHAN LIM XIONG HAI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 25/04/2022 11:56
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / SGT 3 CHONG WENG KIAT, TERENCE Contact No.: 62447200	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220425/2025

2 of 2



POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220425/2025

department, Saine (O: 67892121), that he had just witnessed a Malaysian trailer had reversed and side swipe my vehicle. As such, I immediately went to have a look at the damages. I would like to state that the Malaysian Trailer, vehicle plate: AMC8559, (Trailer plate: T/WC3092), was still at scene when I went to have a look. However, the driver denied causing the damage. I tried to exchange particulars with him but he refused to provide me.

I am lodging this report for my insurance claim. I would like to add that there is a CCTV located outside my company's premises which points in the direction of the accident. However, I have not reviewed the footage yet.

Signature Of Officer Recording The Report: G / SGT 3 JONATHAN LIM XIONG HAI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 25/04/2022 11:56
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / SGT 3 CHONG WENG KIAT, TERENCE Contact No.: 62447200	Classification Of Case: