

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 06/06/2022 19:50 (SGT)
Date of Accident 03/06/2022 17:40 (SGT)
Exact Location of Accident Singapore
Additional Location Information NO. 1 HEMMANT ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMW5417Z

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner ADIBAH HANIM BINTE MOHAMED RASIT
NRIC No SXXXX153E
Email Address PHADZEEL.27@GMAIL.COM
Mobile Phone No (Phone) +65-90704236
Alternative Phone No (Home) +65-90704236

VEHICLE PARTICULARS

Manufacturer Toyota
Model Noah
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 1797

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 7210130860
Cover Note Number -

DRIVER

Name of Driver MOHAMMED FADZIL BIN ABDUL MALIK
NRIC No SXXXX237D

Date Of Birth	27/02/1981
Occupation	Indoor
Date Of Driving Pass	01/03/2002
Driving experience	20 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90704236
Alt. Phone Number	-
Email Address	PHADZEEL.27@GMAIL.COM
Address	BLK 226 TAMPINES ST 23
Address complement	#05-239
Postcode	521226
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	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	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	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

PLEASE REFER TO POLICE REPORT NO: G/20220604/7082 AND CIRCUMSTANCES OF ACCIDENT.

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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown


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)	-

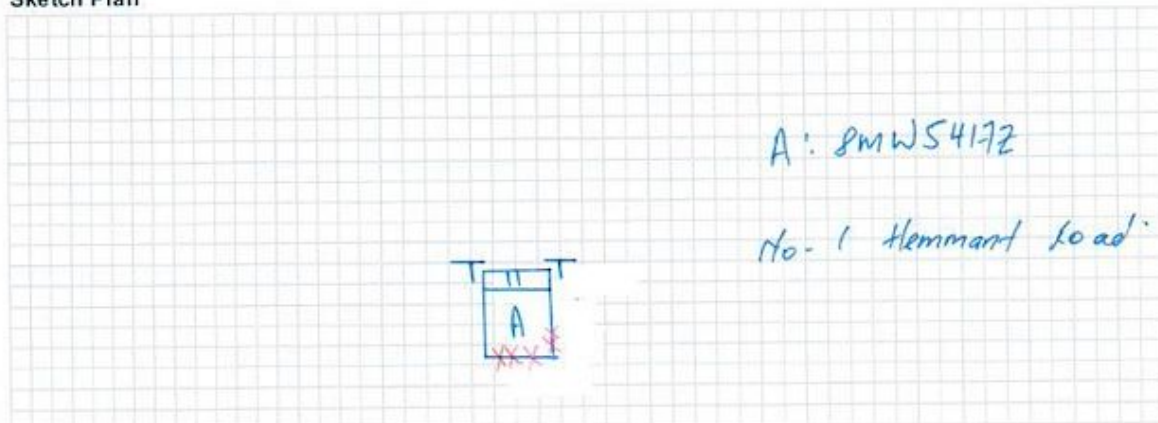
SKETCH PLAN**IMPORTANT NOTICE**

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


Witnessed by Reporting Centre Personnel

Sketch Plan


A: 8MW54172

No-1 Hemmant Road



Describe Circumstances of the Accident


Refer to TP report
G/20220604/7082

I wish to add on that after reviewing the CCTV @ the carpark, I noticed that it was damaged when the grass cutter was doing the maintenance work. I got in touch with the vendor's representative and I am reserving my rights to proceed with the damage claims against them.

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**



G/20220604/7082

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POLICE REPORT (NP299)

Report No. G/20220604/7082

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

Date/Time Report Made 04/06/2022 23:37	Vide Report No.	Station Diary No.
Name Of Informant MOHAMMED FADZIL BIN ABDUL MALEK	Address 226 TAMPINES STREET 23 #05-239 SINGAPORE 521226	
ID Type / ID No. NRIC NO / S8106237D	Contact No. Home/Office:	Mobile: 90704236
Nationality SINGAPORE CITIZEN	Email Address PHADZEEL.27@GMAIL.COM	
Occupation Police officer	Sex Male	Age 41
Institution/School Name	Date of Birth 27/02/1981	Race Malay
Date/Time Of Incident 03/06/2022 17:40 - 03/06/2022 17:40	Location Of Incident 226 TAMPINES STREET 23 #05-239 SINGAPORE 521226	

Brief details.

On 3 June 2022 at 1400hrs, I parked my vehicle, Toyota Noah bearing registration SMW5417Z at No.1 Hemmant Road. Everything was intact. I secured my vehicle and went to my office.

On 3 June 2022 at 1740hrs, upon reporting off from work, I went to retrieve my vehicle. I spotted something was wrong to the rear right glass windscreen of the 3rd row passenger side. Upon approaching nearer, the windscreen was smashed and the windscreen shattered into pieces.

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: 04/06/2022 23:37
Officer In-Charge Of Case:	Classification Of Case:

**SINGAPORE
POLICE FORCE**

G/20220604/7082

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220604/7082

This is the first time such incident happened. That is all.

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: 04/06/2022 23:37
Officer In-Charge Of Case:	Classification Of Case: