

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	01/07/2022 11:39 (SGT)
Reported by	Both
Date of Accident	29/06/2022 16:55 (SGT)
Exact Location of Accident	69 Moulmein Rd, Singapore 300069
Additional Location Information	MOULMEIN ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKE9226A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	FELICIA LAM XUE QING
NRIC No	S8817516F
Email Address	lamfelicia88@gmail.com
Mobile Phone No	(Phone) +65-86654065
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
Variant	2.0 EYESIGHT
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	2000

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070125273-01

DRIVER

Name of Driver	FELICIA LAM XUE QING
NRIC No	S8817516F
Date Of Birth	19/05/1988
Occupation	Indoor

Date Of Driving Pass	14/12/2016
Driving experience	5 YEARS AND 6 MONTHS
Gender	Female
Mobile Number	(Phone) +65-86654065
Alt. Phone Number	-
Email Address	lamfelicia88@gmail.com
Address	4B PARK VALE #03-05
Address complement	-
Postcode	288564
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	Collision - Cross Junction
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JSX2946
Vehicle Category	Motorcycle

PASSENGER 1

Name	A
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JSX2946
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	JSX2946
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

Describe Circumstances of the Accident

I was along Mandalay road next to National skin centre.
 I was driving to the yellow box with stationary cars occupying
 the first last lane and got hit by oncoming traffic motorcycle
 which hit my right side of my passenger door. I have called
 the police and was attended to by the traffic police with
 Report number: E/2022/0629/0118.

Declaration

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature Date & Time 1/7/2022 @ 9am

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


 Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

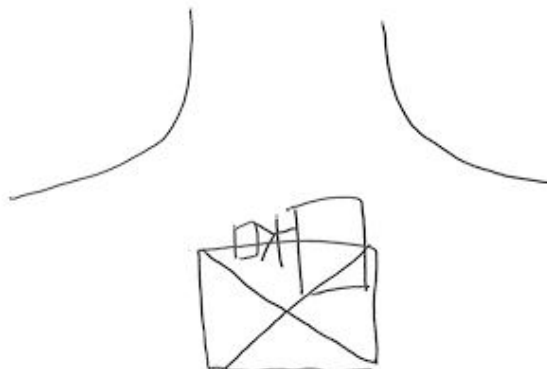
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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' 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





























































**SINGAPORE
POLICE FORCE**



E/20220629/7039

1 of 2

POLICE REPORT (NP299)

Report No. E/20220629/7039

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-3910000

Date/Time Report Made 29/06/2022 19:00	Vide Report No.	Station Diary No.
Name Of Informant FELICIA LAM XUE QING	Address 309 TAMPINES STREET 32 #09-122 SINGAPORE 520309	
ID Type / ID No. NRIC NO / S8817516F	Contact No. Home/Office: Mobile: 86654065	
Nationality SINGAPORE CITIZEN	Email Address lamfelicia88@gmail.com	
Occupation Nurse	Sex Female	Age 34
	Date of Birth 19/05/1988	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 29/06/2022 16:50 - 29/06/2022 16:55	Location Of Incident 1 MANDALAY ROAD NATIONAL SKIN CENTRE SINGAPORE 308205	

Brief details.

I was along Mandalay road next to National Skin Centre. I was driving to the yellow box with stationary cars occupying the first lane and got hit by incoming motorbike which hit my right side of my passenger door. I have called the police and was attended to by the traffic police with report number: E/20220629/0118.

Subjects Involved

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: 29/06/2022 19:00
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



E/20220629/7039

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220629/7039

Victim			
Person Name	FELICIA LAM XUE QING		
ID Type	NRIC NO	ID No	S8817516F
Gender	Female	Age	34
Race	Chinese	Language	English
Occupation	Nurse	Address	309 TAMPINES STREET 32 #09-122 SINGAPORE 520309
Mobile No	86654065	Is Informant A Victim?	Yes
Person Name	FELICIA LAM XUE QING (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: 29/06/2022 19:00
Officer In-Charge Of Case:	Classification Of Case: