



# 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 Actual 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	28/07/2022 10:52 (SGT)
Reported by	Both
Date of Accident	22/07/2022 16:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS CHANGI (AFTER STEVENS ROAD)
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	EN8686K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TAN YEE HOA
NRIC No	SXXXX528I
Email Address	citizenpoweer555@gmail.com
Mobile Phone No	(Phone) +65-96601440
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Audi
Model	A6
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	1984

### INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070167483-01

### DRIVER

Name of Driver	TAN YEE HOA
NRIC No	SXXXX528I
Date Of Birth	19/06/1959
Occupation	Outdoor

Date Of Driving Pass	30/03/1978
Driving experience	44 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96601440
Alt. Phone Number	-
Email Address	citizenpoveer555@gmail.com
Address	8 MAR THOMA ROAD #26-05
Address complement	-
Postcode	328689
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	5
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	SMW2934S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	VINCENT
Contact Number	(Phone) +65-90033118

Address -  
 Address complement -  
 Postcode -  
 Insurance Company Name -  
 Nature Of Damage -  
 Details of property damaged in accident -  
 No. Of Passenger (Including Driver) -

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SFQ668M  
 Vehicle Manufacturer -  
 Vehicle Model -  
 Vehicle Variant -  
 Vehicle Colour -  
 Vehicle Category Private car  
 Name of Driver BRYAN  
 Contact Number (Phone) +65-94516280  
 Address -  
 Address complement -  
 Postcode -  
 Insurance Company Name -  
 Nature Of Damage -  
 Details of property damaged in accident -  
 No. Of Passenger (Including Driver) -

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number SMQ2470U  
 Vehicle Manufacturer -  
 Vehicle Model -  
 Vehicle Variant -  
 Vehicle Colour -  
 Vehicle Category Private car  
 Name of Driver SEATU  
 Contact Number (Phone) +65-82244539  
 Address -  
 Address complement -  
 Postcode -  
 Insurance Company Name -  
 Nature Of Damage -  
 Details of property damaged in accident -  
 No. Of Passenger (Including Driver) -

**DETAILS OF OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number GBD9056K  
 Vehicle Manufacturer -  
 Vehicle Model -  
 Vehicle Variant -  
 Vehicle Colour -  
 Vehicle Category Commercial vehicle  
 Name of Driver ARKAR  
 Contact Number (Phone) +65-96215715  
 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	TAN YEE HOA
Gender	Male
Phone No	(Phone) +65-96601440
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	EN8686K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

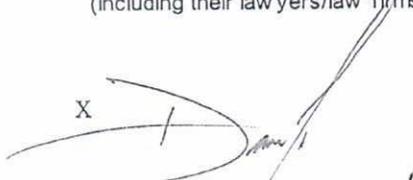
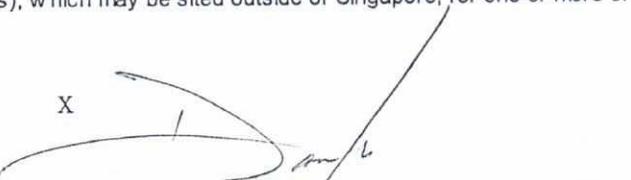
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**8. Consent under the Personal Data Protection Act (PDPA)**

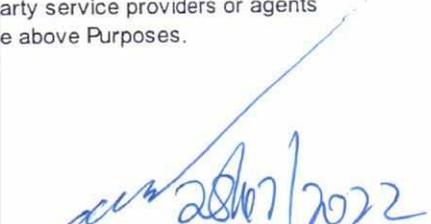
I understand, acknowledge, agree and consent that :

(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.

X  X 

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

 28/07/2022

Witnessed by Reporting Centre Personnel

**Sketch Plan**



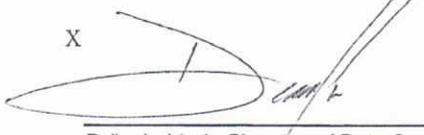
- Vehicle A = EN 8686 K
- Vehicle B = SMW 2934 S
- Vehicle C = SFQ 668 M
- Vehicle D = SMQ 2470 U
- Vehicle E = ABD 9056 K

**Describe Circumstances of the Accident**

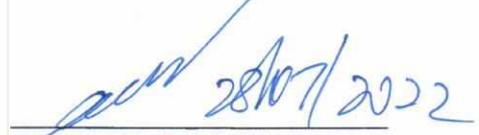
On the 22/7/2022 @ 16:20 hrs, i was travelling along PIE  
twds Changi Alter Steven Road.  
The Traffic was heavy. My front Vehicle slow down and stop  
hence i follow Suit. Out of Sudden, vehicle B from behind tried to  
avoid hitting me but failed to do so, hit my rear right portion & veered right to the  
divider. Vehicle C, who was behind vehicle B, failed to stop in time rear ended me  
& vehicle D swerved into lane 2 from lane 1 & hit vehicle E. I have retrieved my camera  
footage capturing the whole incident.

**Declaration**

We declare the foregoing particulars are true in every respect.

X   
Policyholder's Signature / Date &  
Time

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

 28/07/2022  
Witnessed by Reporting Centre  
Personnel

Email: sm@idac.com.sg Tel no: 6555 6888

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\*If no proper documents are produced, IDAC shall not file the report. Information will be discarded after one week.

Date of Accident: 22/07/2022 (dd/mm/yy) Time of Accident: 16:20 (24-HR-FORMAT)

Vehicle No.: EN 8686K Vehicle Make & Model / Engine (cc): AUDI A6 DESIGN 2.0 Private Hire: (Y/N)

Exact location of Accident: PIE twds Changi (After Stevens Road)

Policyholder's Name / IC No.: TAN YEE HUA ROC/UEN (Company) S13825 J8 I

Driver's Name / IC No.: AS ABOVE (As Above)

Driver's Contact No.: 96641440 Company Contact No / Owner Contact No: 96601440

Driver's Address: 8 Mar Thoma Road # 26-05 Singapore 328689

Owner Email address: CITIZENPOWERSSS@GMAIL.COM Insurance Company: AIE

Driver Email address: CITIZENPOWERSSS@GMAIL.COM

Relationship between Owner & Driver: (Please CIRCLE one only)

Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify:

What do you wish to claim? (Please TICK one only)

Own Insurance /  Other Vehicle (The one you want to claim against) /  Reporting (For Record Purpose)

Exact purpose for which the vehicle was being used at time of accident?

Occupation (nature of job)  Indoor /  Outdoor

Private use /  Work purpose

\*No. of Passengers (Including Driver): 01

\*Passenger Name: / \*Passenger Name: /

Gender: Male / Female x( ) / Gender: Male / Female x( )

Weather condition & Road conditions? (On the day of accident)

Clear & Dry /  Raining & Wet /  After-Rain & Wet /  Drizzling & Wet / Others:

Was there any video captured by your Car Camera?  Yes /  No Remarks:

Any Injuri Yes /  No (If YES) Injured Person's Name:

Injuries Sustain: / Injured Person in Which Vehicle: EN 8686K

Police Report filed:  Yes /  No (If YES) Which Police Station:

The Other Party(s) Details:

1. Driver's Name / IC No: Vincent Vehicle No: B SMW J9345 Driver's Contact No: 90033118 Insurance Company:

2. Driver's Name / IC No (If Any): Bryan Vehicle No: C SFQ 668M Driver's Contact No: 94516380 Insurance Company:

\*Independent Witness (If Any): Contact No:

Preferred Workshop Name: Contact No:

Vehicle D = SMQ 2470U - Seatu (82244539)

Vehicle E = GBD 9056K - Arkar (96215715)



# CERTIFICATE OF INSURANCE

## AUDI AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : TAN YEE HOA  
 Period of Insurance : 27 Nov 2021 To 26 Nov 2022  
 Engine No. : DKY013915  
 Chassis No. : WAUZZZF20LN059600

Vehicle No. : EN8686K  
 Policy No. : 2070167483-01  
 Endorsement No. :  
 Issued Date : 19 Oct 2021

### ABOUT THE COVER

Make/Model : AUDI A6 Design 2.0 TFSI S Tronic  
 Engine Capacity/Tonnage : 1,984.00 CC Sum Insured : Market Value First Year of Registration : 2020  
 Driver Restriction : NA Off Peak Car : No Insuring with COE/PARF : Yes  
 Person or Classes of Persons Entitled to Drive\* :

- a) The Policyholder
  - b) Any other person who is driving on the Policyholder's order or with his/her permission.
- This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition Mileage Condition : Unlimited Mileage

Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business.  
 This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

Loss of Use 1800cc - 2000cc Optional

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

Section 1  
 Fire - \$0 Own Damage - \$1600 Theft - \$0 Flood Cover - \$1600

Section 2  
 Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

TAN YEE HOA - \$1600 (Own Damage), \$1600 (Flood Cover)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

1. Audi Customer Service Center Add: 55 Ubi Road 1 Singapore 408699 63662323

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: OVERSEA-CHINESE BANKING CORPN LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0504125251

PREMIUM LEASING -LES

281 ALEXANDRA ROAD AUDI CUSTOMER SERVICE CENTRE  
 SINGAPORE 159938

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

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