SN0822810004 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 01/08/2022 11:51 (SGT) SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (01/08/2022 11:51 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 01/08/2022 11:51 (SGT) Reported by Date of Accident 28/07/2022 09:00 (SGT) Exact Location of Accident MCE, Singapore Additional Location Information TOWARDS MARINA COASTAL ROAD Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SFM9075K

Jaguar

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN PECK CHENG NRIC No SXXXX816Z Email Address tpc9075k@gmail.com Mobile Phone No (Phone) +65-98333406 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Xe 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1999

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 1900081410-02

DRIVER

Name of Driver TAN PECK CHENG NRIC No SXXXX816Z Date Of Birth 16/02/1950 Occupation Indoor

Date Of Driving Pass 01/10/1981 Driving experience 40 YEARS AND 9 MONTHS Gender Female Mobile Number (Phone) +65-98333406 Alt. Phone Number Email Address tpc9075k@gmail.com Address 59 LUCKY HEIGHTS Address complement Postcode 467613 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 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) 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? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20220728/7040 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 XD6562A

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

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.
- information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for Investigation.
- This report will be forwarded by the insurers to 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.
- 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

Witnessed by Reporting Centre Personnel

& Time

Sketch Plan

MCE TOWARDS MARINA COASTA ROAD

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

A)\$FM9075
B) XD65624

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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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

2





















Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20220728/7040

REPORT OF A TRAFFIC ACCIDENT

Date/Time 28/07/202		lade:	Vide Report No.:	Station Diary No.:
Informan	t's Particu	ulars	TO STAND OF THE STANDS	
Name of I TAN PEC		i	Address: 59 LUCKY HEIGHTS SINGAR	PORE 467613
ID Type / NRIC NO	ID No.: / S01188	16Z	Contact No.: Home/Office:	Mobile: 98333406
Nationality		EN	Email: tpc9075k@gmail.com	
Sex: Female	Age: 72	Date of Birth: 16/02/1950	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: mediation specialist		t	Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/07/2022 09:00	Type of Location Straight Road
	wards Marina Coastal F	Road Road Surface:		Road Speed Limit:
Weather:		Dry	M. M.	
Clear		Diy		
		Traffic Control: Not Controlled		Traffic Volume: Moderate

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SFM9075K (Not Accurate)	Car	JAGUAR	XE	Beige	Slightly Damaged	0
XD6562A	CONSTRUCT			Grey	No Damage	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20220728/7040

CONTINUATION OF REPORT

Details of Perso						
Any Pedestrian I	nvolved: No					
No. of Pedestriar	o. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA			
Driver			BALLET STATE			
Name	TAN PECK CHENG	9		ID No.	S0118816Z	
Related Vehicle	SFM9075K (Car)			Contact N	No. 98333406	
Hospital/Clinic	NIL			Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NII	
Date	NIL		Date	N	IL '	
No. of Days gran	ted Medical Leave	NIL	Degree o	f N	IL	

Brief Details.

As i was in the KPE tunnel driving to work in town, i was in the most left lane and well towards the left of the lane, a big truck suddenly veered from the right towards my side and hit my driver's side mirror with a loud band and then the truck moved on forward in front of my car. I horned for his attention. He wanted to stop in the tunnel but i signalled him, to move on until we were out tunnel then we stopped by the side of the marina coastal road.. the driver asked me to report which i agreed. so i asked to exchange particulars. He refused to give me. He insisted i call the police to settle there and then and he kept denying his truck hit my mirror. He alleged that i hit his truck. I informed him the protocol for motor accident. As he refused to give me is particulars i saw no point in remaining there. So i told him i will go to work. I took photos of his truck and of him. He was standing next to the side of my car. Before i even moved i heard him saying in mandarin something to the effect that i ran over his foot or i was going to run over his foot, which is another complete lie. there was no personal injury to me or to him. Only my driver's side mirror was damaged.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20220728/7040

CONTINUATION OF REPORT

Sketch Plan					
Informant is	not	able	to	provide	sketch

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: 28/07/2022 20:53
Officer In Charge Of Case: TP / TPIB / NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

NP168