

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	08/09/2022 18:08 (SGT)
Reported by	Both
Date of Accident	08/09/2022 15:03 (SGT)
Exact Location of Accident	SLE, Singapore
Additional Location Information	SLE TOWARDS TPE 100M AFTER EXIT 5
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMW7007K
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TERENCE TEE
NRIC No	SXXXX581I
Email Address	TERENCE91800498@GMAIL.COM
Mobile Phone No	(Phone) +65-91800498
Alternative Phone No	+65-87666512

VEHICLE PARTICULARS

Manufacturer	Audi
Model	A5
Variant	SPORTBACK 2.0 TFS
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	1984

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	2070153145

DRIVER

Name of Driver	TERENCE TEE
NRIC No	SXXXX581I
Date Of Birth	12/05/1981
Occupation	Indoor

Date Of Driving Pass	26/02/2002
Driving experience	20 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91800498
Alt. Phone Number	+65-87666512
Email Address	TERENCE91800498@GMAIL.COM
Address	21 SAMPAN PLACE
Address complement	#08-06
Postcode	436593
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 - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
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)	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	-

PASSENGER 1

Name	LEONG YUXIAN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMN4317H
Vehicle Manufacturer	BMW
Vehicle Model	X1
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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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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.



[Signature] 08/09/2022

Policyholder's Signature / Date & Time
4.54pm

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Refer to police report.

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre
Personnel





**SINGAPORE
POLICE FORCE**



T/20220908/2169

2 of 3

Report No. T/20220908/2169

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMW7007K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070153145	30/10/2020	29/10/2022

Brief Details.

On 08/09/2022 at about 1503hrs, I was driving my car (SMW7007K) along SLE with my colleague. I was on the first lane.

As I was driving, about 100 meters after exit 5 on SLE, another car (SMN4317H) cut into my lane from the second lane and his rear hit the front left side of my car. As a result, my car is dented on the left fender and left front door. Nobody was injured in this accident.

The other driver refused to give any of his details as he claimed that his vehicle was not damaged at all. He then drove off without giving me any of his particulars.

I am lodging this report for insurance claim purposes and for recording purposes.

































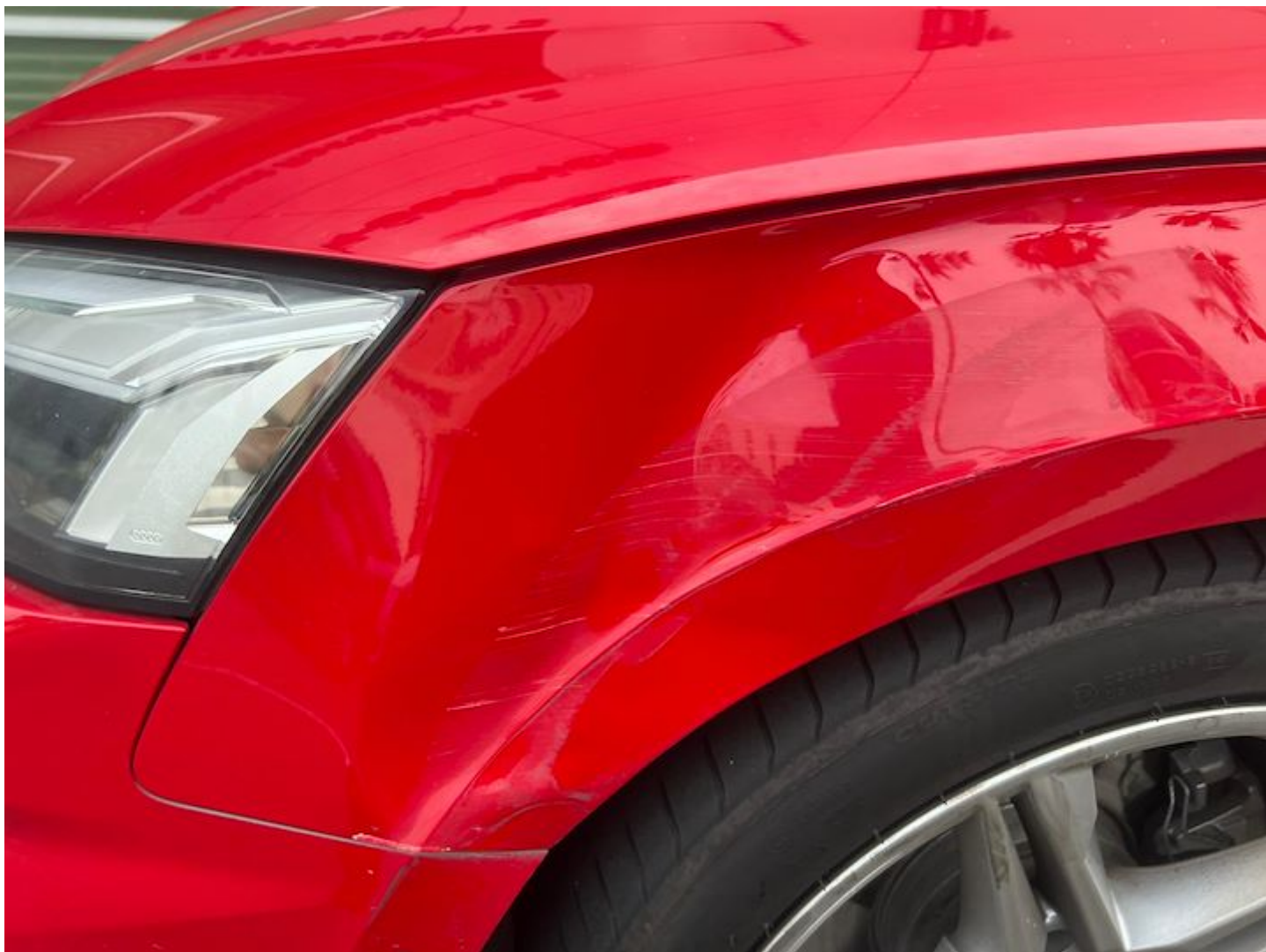


































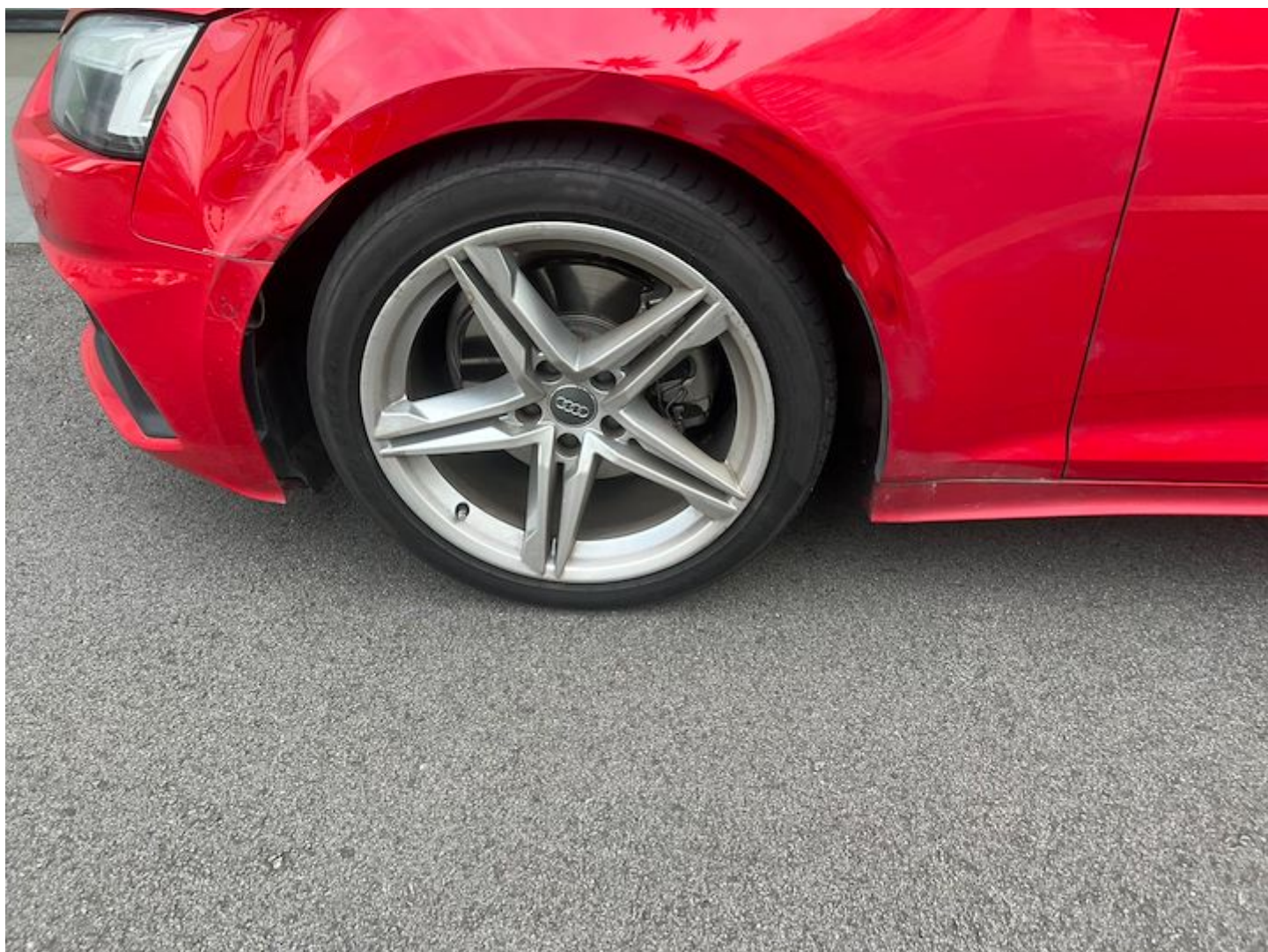


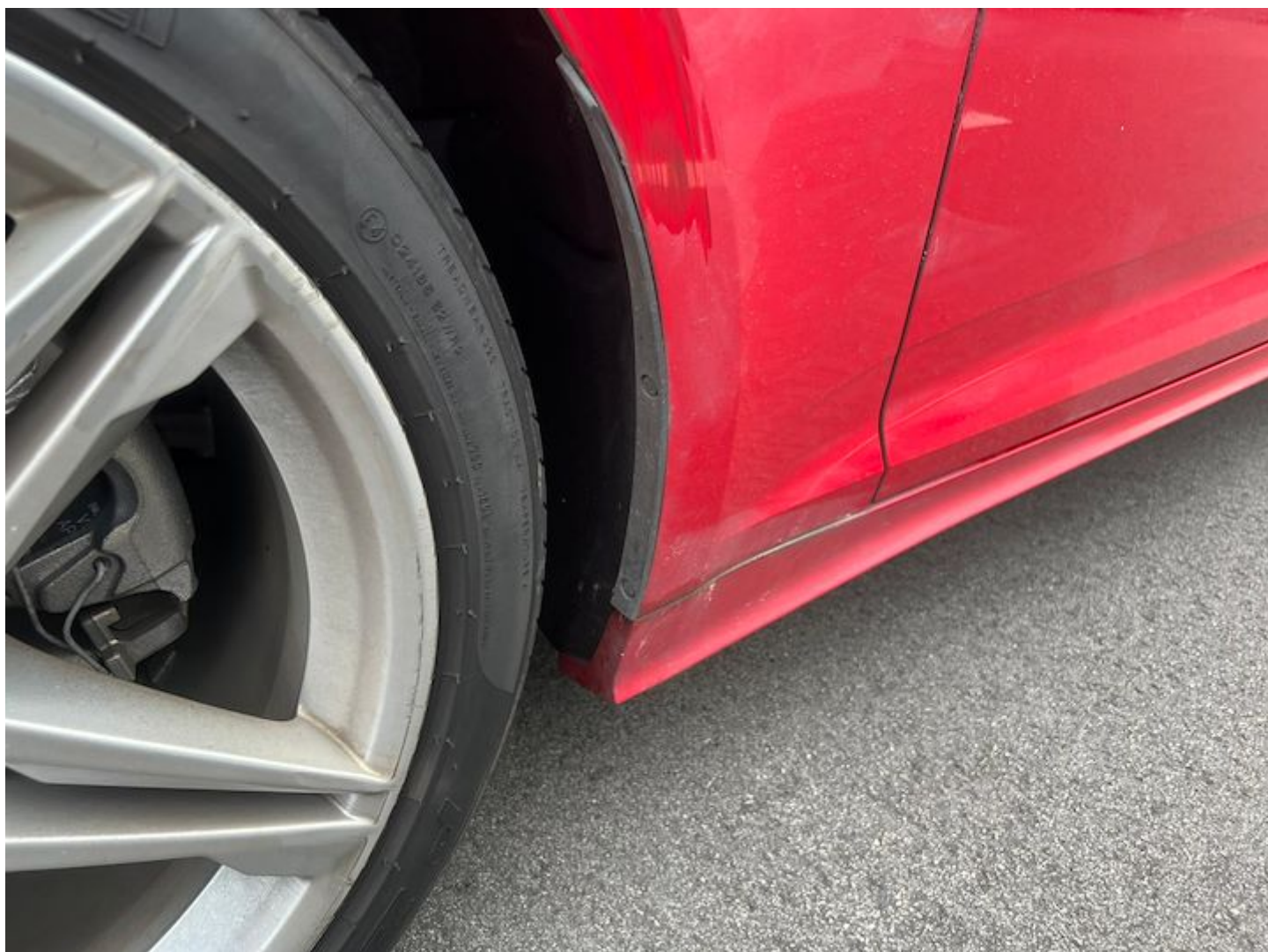














**SINGAPORE
POLICE FORCE**



T/20220908/2169

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20220908/2169

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/09/2022 15:47	Vide Report No.:	Station Diary No.: 67
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Informant's Particulars

Name of Informant: TERENCE TEE	Address: 21 SAMPAN PLACE #08-06 SINGAPORE 436593		
ID Type / ID No.: NRIC NO / S8113581I	Contact No.: Home/Office: Mobile: 91800498		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 41	Date of Birth: 12/05/1981	Type of Informant: Driver
Race: Chinese	Language: English		Institution / School Name:
Occupation: Real estate agent	Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 08/09/2022 03:00	Type of Location: Flyover
Location: SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMN4317H	Car				No Damage	0
SMW7007K	Car	AUDI	A5 SPORTBACK 2.0 TFSI S TRONIC (110 KW)	Red	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220908/2169

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Report No. T/20220908/2169

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

CONTINUATION OF REPORT

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The other driver refused to give any of his details as he claimed that his vehicle was not damaged at all. He then drove off without giving me any of his particulars.

I am lodging this report for insurance claim purposes and for recording purposes.



**SINGAPORE
POLICE FORCE**



T/20220908/2169

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

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Report No. T/20220908/2169

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature of Officer Recording The Report:

F /

SGT 2 MUHAMMAD DANIYAL
HAFIZ BIN AMRAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

08/09/2022 15:47

Officer In Charge Of Case:

TP / GIA /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

Classification Of Case:

NP168



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SP1422980001 Vehicle Registration No: SMW 7007 K
Name (as shown in NRIC) : TERENCE TEE NRIC/FIN/Passport No : SXXXX581I
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : 21 SAMPAN PLACE, #08-06 Singapore (436593)
Contact (Tel) : _____ Mobile No. : 91800498
Email Address : TERENCE91800498@GMAIL.COM
Date of Accident : 08/09/2022 Time of Accident : 15:03
Place of Accident : SLE TOWARDS TPE 100M AFTER EXIT 5
Insurance Company: AIG ASIA PACIFIC INSURANCE PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

TO AMEND TO CONVERT TO OWN DAMAGE CLAIM.

Policyholder / Driver's Signature
Date: 4/10/2022

Reporting Centre Personnel's Signature
Name: Lim Lee Seng
NRIC/FIN No.: SXXXX581I
Date: 4/10/2022