

# 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 ..... 04/03/2022 13:18 (SGT)  
Date of Accident ..... 03/03/2022 12:50 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... MOULMEIN ROAD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMX7911U

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... LU BAOJIAN  
NRIC No ..... SXXXX025A  
Email Address .....  
Mobile Phone No .....  
Alternative Phone No .....

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Vios  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... -  
Are you claiming under your own insurance policy for repair to your vehicle? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1500

### INSURANCE COMPANY

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

### DRIVER

Name of Driver ..... LU BAOJIAN  
NRIC No .....

-

☐ Yes

-

☐ No

-

-

Type of Accident .....  
Weather Conditions .....  
Road Surface .....

Collision - Change/cross lane  
Clear  
Dry

Was any foreign vehicle involved in the accident? .....

Number of vehicles involved in the accident .....

Was anybody injured in the Accident? .....

Was any injured conveyed to hospital by ambulance? .....

Was any other vehicle or property damaged? .....

Number of Passengers (Including Driver) .....

Has the driver been approached by unknown person(s)  
soliciting/offering accident claims assistance? .....

No  
2  
No  
-  
Yes  
2  
No

Name .....

Gender .....

Female

Was the accident reported to the police? .....

Police Station Name .....

Police Station Phone No .....

Alt. Police Station Phone No .....

Police Station Address .....

Was notice of intended Prosecution given? .....

If yes, against whom? .....

Yes  
Traffic Police  
(Phone) +65-65470000  
(Fax) +65-65474900  
10 Ubi Avenue 3 Singapore 408865  
No  
-

PLEASE REFER TO ATTACHED SKETCH PLAN AND STATEMENT.

Are accident photos available for attachment? .....

Was there any video captured by Car Camera? .....

Was there any audio recorded? .....

Yes  
Yes  
No

Vehicle Registration Number .....  
Vehicle Manufacturer .....

QX1255Y

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Government
Name of Driver .....	ADLI
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

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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.

[Redacted Signature]

[Redacted Signature]

4/3/22 11:37 am

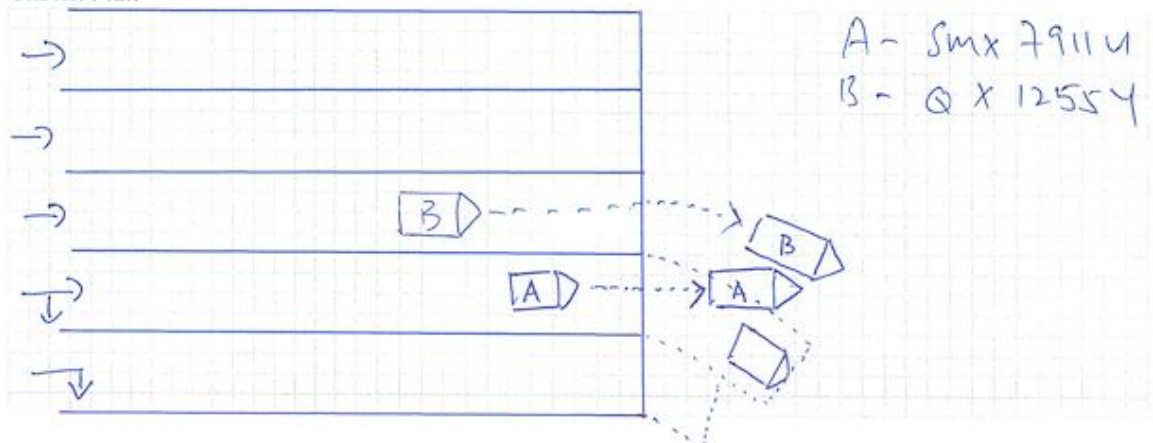
[Handwritten Signature]

Policyholder's Signature / Date & Time  
11:37 am

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

Witnessed by Reporting Centre Personnel

## Sketch Plan



Refer to Police Report T/20220313/7040

We declare the foregoing particulars are true in every respect.

4/3/2022  
11:44 am

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

Witnessed by Reporting Centre Personnel



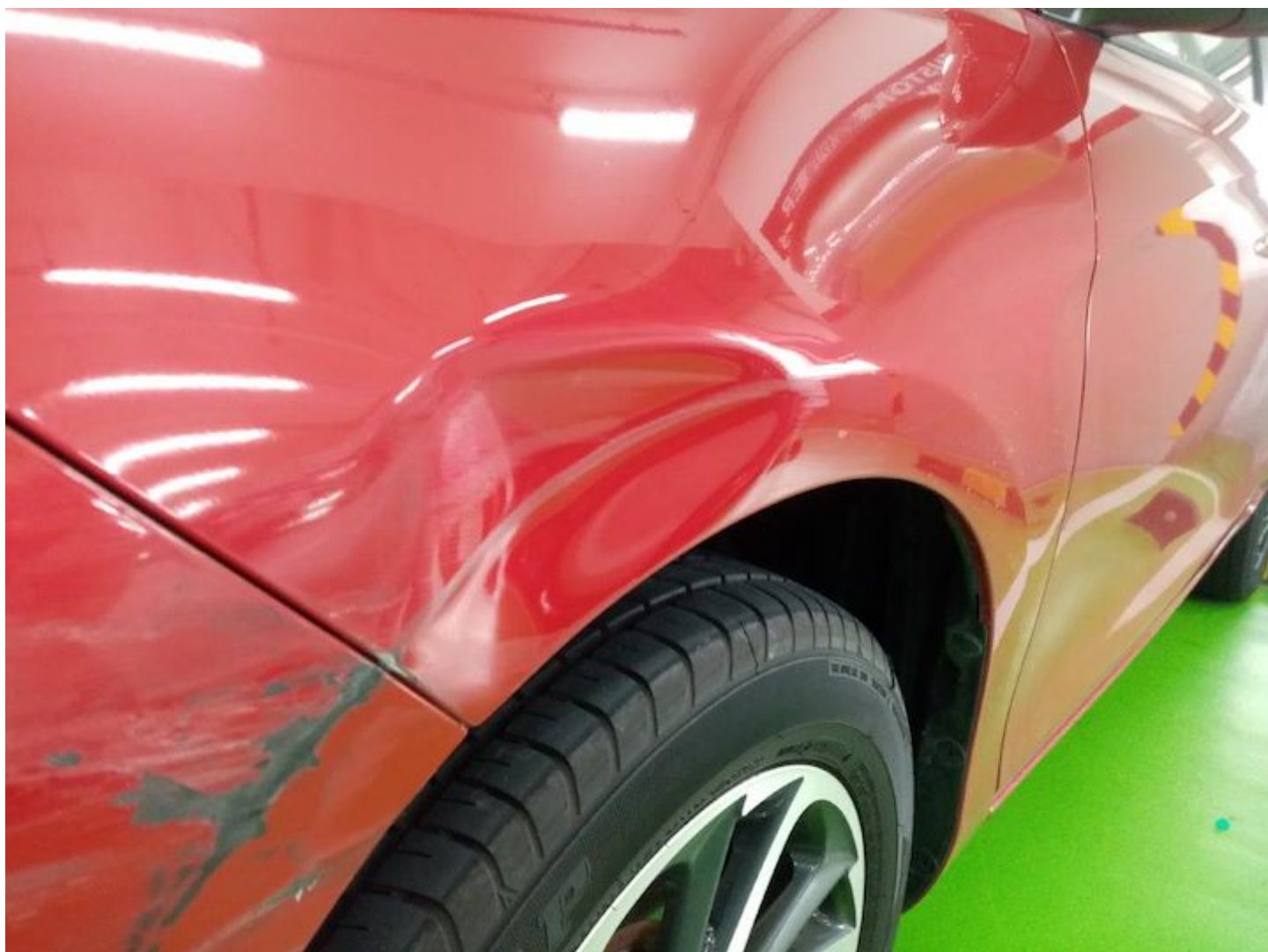


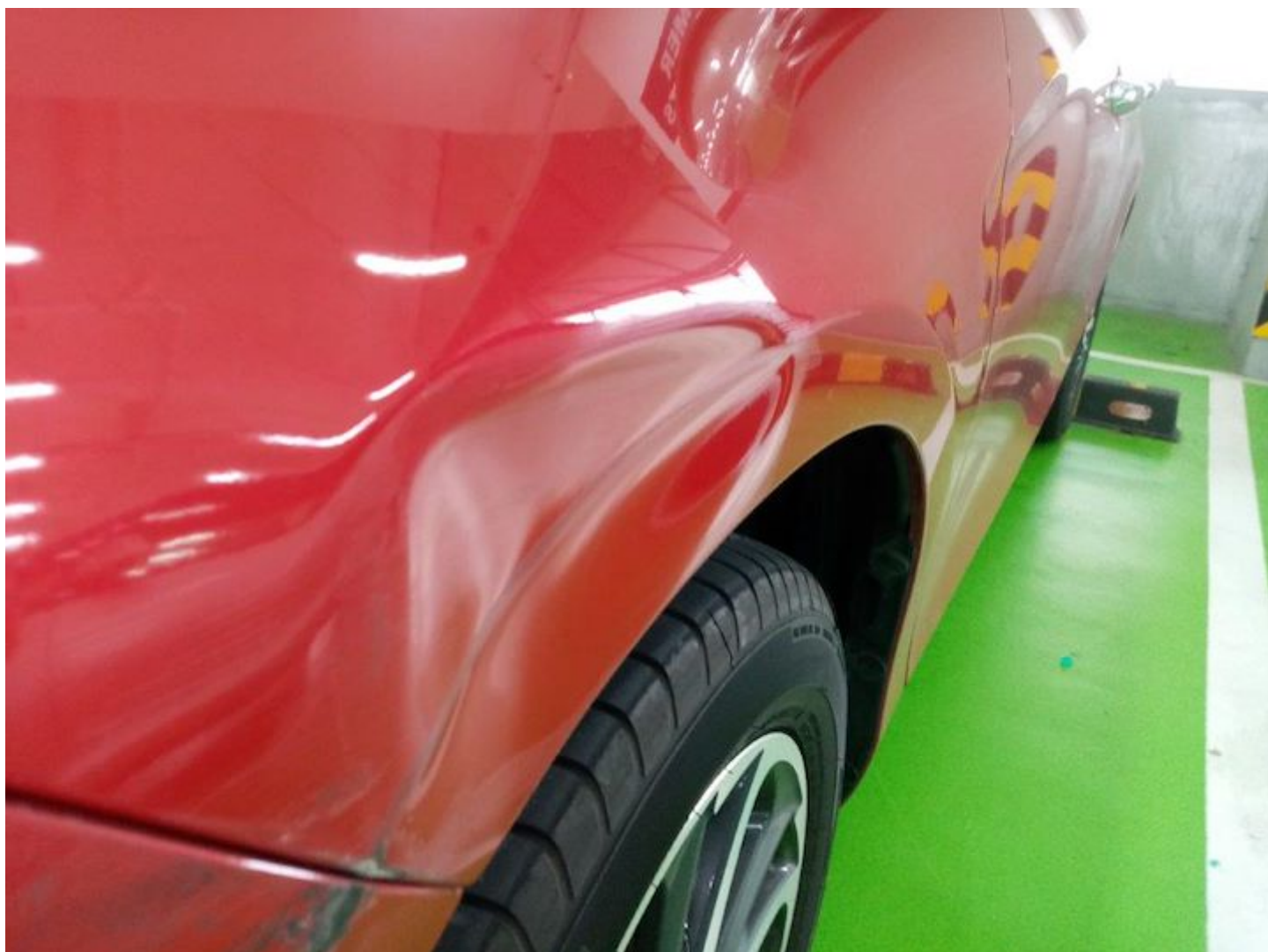




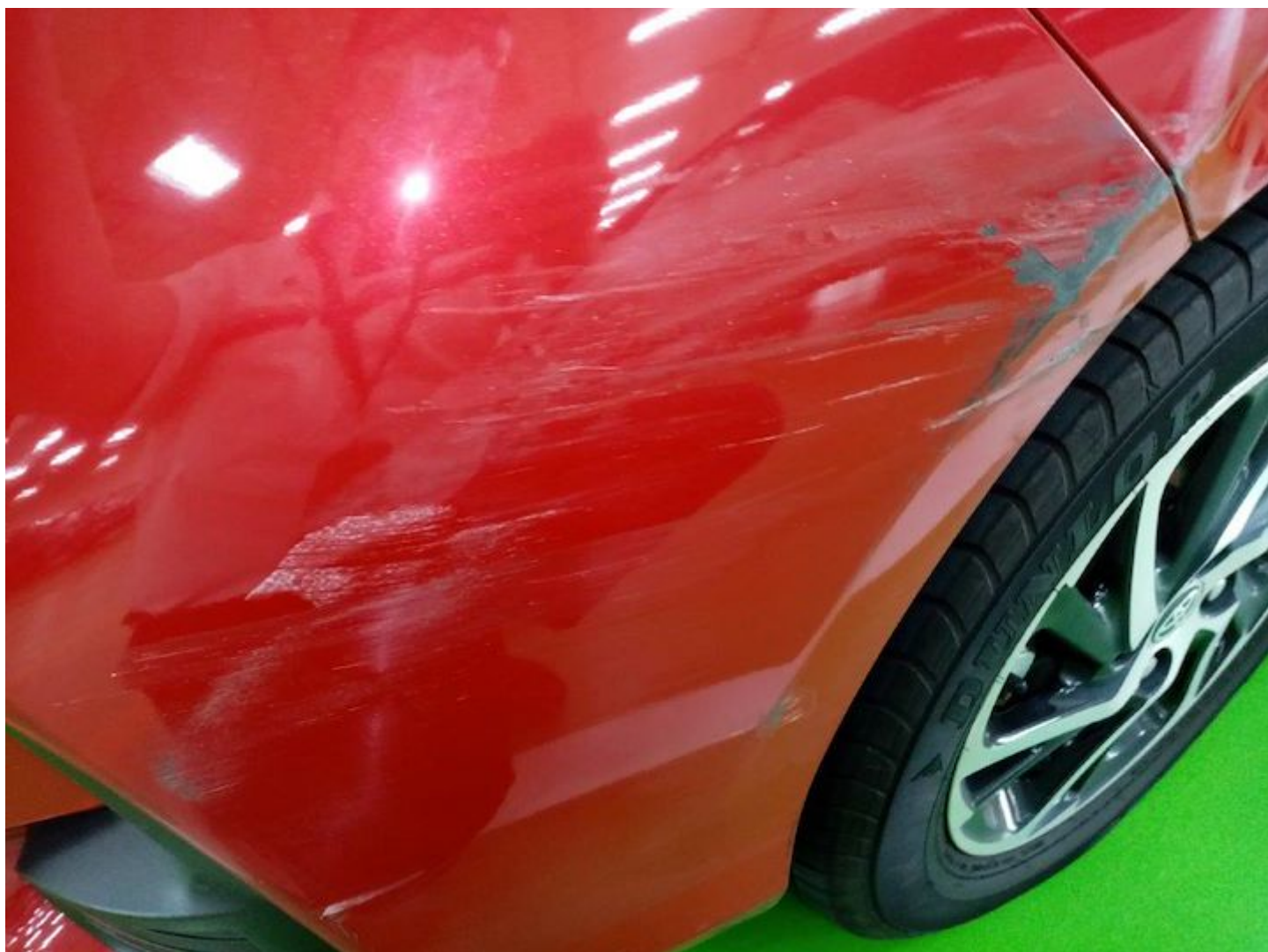
























**SINGAPORE  
POLICE FORCE**



T/20220303/7040

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20220303/7040

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/03/2022 19:32		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: [REDACTED]			Address: [REDACTED]		
ID Type / ID No.: NRIC NO. [REDACTED]			Contact No.: Home/Office: [REDACTED] Mobile: [REDACTED]		
Nationality: SINGAPORE CITIZEN			Email: [REDACTED]		
Sex: [REDACTED]	Age: [REDACTED]	Date of Birth: [REDACTED]	Type of Informant: Driver		
Race: [REDACTED]			Language: English		Institution / School Name: [REDACTED]
Occupation: [REDACTED]			Driving Licence Information: Class: 3 Date of Expiry: [REDACTED]		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 03/03/2022 12:50	Type of Location: Junction
Location:  MOULMEIN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
QX1255Y	SCDF Ambulance	OTHERS		White	Slightly Damaged	0
SMX7911U	Car	TOYOTA	VIOS (E) 4-DOOR SEDAN (AUTO) (2WD)	Red	Slightly Damaged	2





**SINGAPORE  
POLICE FORCE**



T/20220303/7040

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220303/7040

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMX7911U	AIG ASIA PACIFIC INSURANCE PTE. LTD.	[REDACTED]	29/01/2021	28/01/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	[REDACTED]		ID No.	[REDACTED]
Related Vehicle	SMX7911U (Car)		Contact No.	[REDACTED]
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL

**Brief Details.**

I have photos and car video capture of the actual traffic accident  
 Accident happened at Moulmein Rd junction to Jln Tan Tock Seng.  
 Landmark nearby Leong Wah Temple.  
 Accident took place at the junction while I was intending to continue straight but SCDF Ambulance came turning in from the left lane which is a "straight-only" lane.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20220303/7040

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Report No. T/20220303/7040

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPIB /  
MUHAMMAD NOOR BIN ABDUL RAHMAN  
Contact No.: 65476201

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
03/03/2022 19:32

Classification Of Case:



# CERTIFICATE OF INSURANCE

## TOYOTA AUTO PROTECTOR PRIVATE VEHICLE

Name of Policyholder : [REDACTED]  
 Period of Insurance : 29 Jan 2021 To 28 Jan 2023  
 Engine No. : 2NR5478962  
 Chassis No. : MR2B23F3801215571

Vehicle No. : SMX7911U  
 Policy No. : [REDACTED]  
 Endorsement No. :  
 Issued Date : 30 Jan 2021

### ABOUT THE COVER

Make/Model : TOYOTA VIOS 1.5  
 Engine Capacity/Tonnage : 1,496.00 CC  
 Driver Restriction : NA  
 Sum Insured : Market Value  
 Off Peak Car : No  
 First Year of Registration : 2021  
 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 1500cc - 1600cc

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 159), Section 95 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$600

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

LU BAOJIAN - \$600 (Own Damage), \$600 (Flood Cover)

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

1 Toyota Bodycare Centre (For accident repair & accident reporting): Add 2 Pandan Crescent Singapore 128462 Tel 6631 1188  
 2 Toyota Bodycare Centre (For accident repair & accident reporting): Add 17 Uta Road 4 Singapore 408611 Tel 6631 1688

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: Toyota Financial Services Singapore Pte Ltd

I/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. 159), Part IV of the Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

0504667260

INCHCAPE AUTO TOYOTA - BSTU042

33 LENG KEE ROAD  
 SINGAPORE 159102

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.


AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

AIGSGMOBILEAPP



MOTOR ACCIDENT INTERVIEW FORM

NAME (DRIVER) : 

VEHICLE NUMBER : SMX7911V

DATE/TIME OF ACCIDENT : 3/3/2022 12:50 pm

PLACE OF ACCIDENT : Moulmein Road

THIRD PARTY VEHICLE (IF ANY) : QX1255 Y

\*\*\*\*\*

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

City Square Mall to SGA S

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

No

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Side collision on the left. Scratch ~~on~~ and dent on left chassis.  
Left side mirror signal light damaged.

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No

Name: 

I Affirmed The Above Information Is Given To My Best Knowledge.