

# 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 .....	01/11/2022 15:35 (SGT)
Reported by .....	Driver
Date of Accident .....	28/10/2022 19:25 (SGT)
Exact Location of Accident .....	Bartley Rd East, Singapore
Additional Location Information .....	TOWARDS BRADDELL
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	GBE1861A
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	B&J TRADING & MANUFACTURING PTE LTD
Company Reg No .....	2XXXXX777G
Email Address .....	akbbnb@gmail.com
Mobile Phone No .....	(Phone) +65-93851273
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Hiace
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Employment
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Commercial vehicle
Transmission .....	Manual
CC .....	2982

### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7210094145-01

### DRIVER

Name of Driver .....	TAY KWANG SENG
NRIC No .....	SXXXX111B
Date Of Birth .....	29/01/1970
Occupation .....	Outdoor

Date Of Driving Pass .....	05/12/1987
Driving experience .....	34 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93851273
Alt. Phone Number .....	-
Email Address .....	akbbnb@gmail.com
Address .....	9 VAUGHAN ROAD
Address complement .....	-
Postcode .....	358077
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	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? .....	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

PLEASE REFER TO SKETCH AND POLICE REPORT T/20221031/2107

#### 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 .....	SKU1163R
Vehicle Manufacturer .....	-
Vehicle Model .....	-
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**

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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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.

B&J Trading & Manufacturing Pte Ltd

Reg. No.: 200514777G

Tel : 6475 7150 Fax : 6475 7152

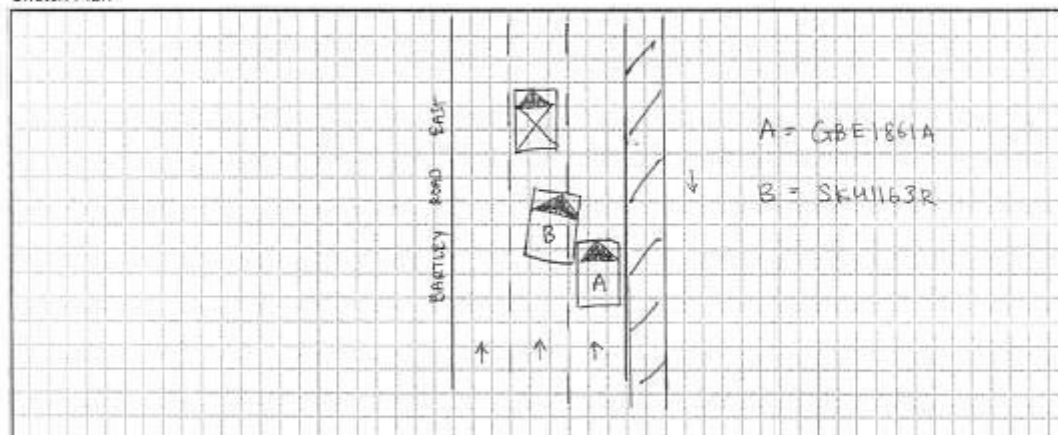
E-mail: bnjtrading@yahoo.com.sg

BW 3016 892-01 Redk North Ave 4 S'port

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

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

**Sketch Plan**



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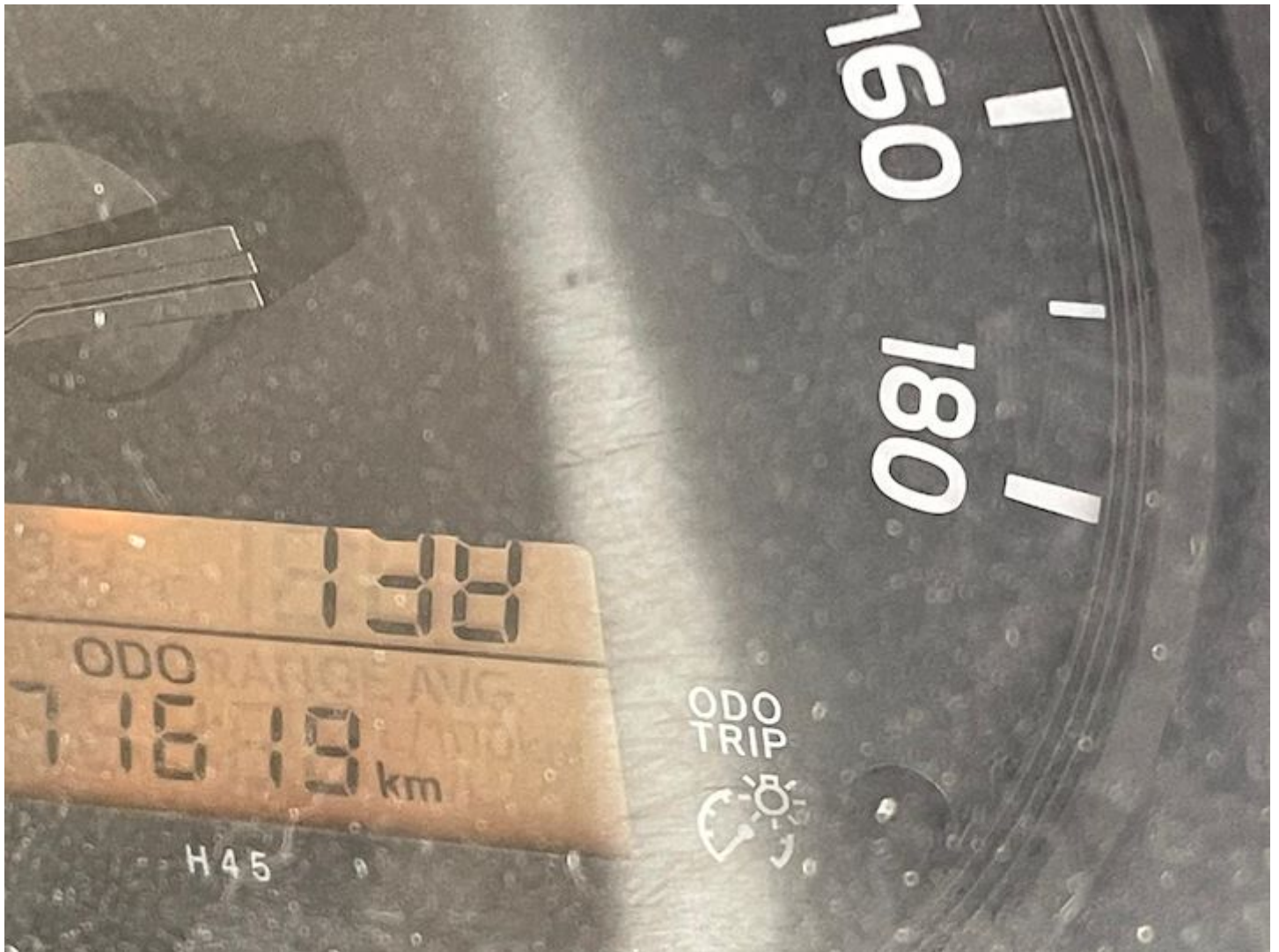






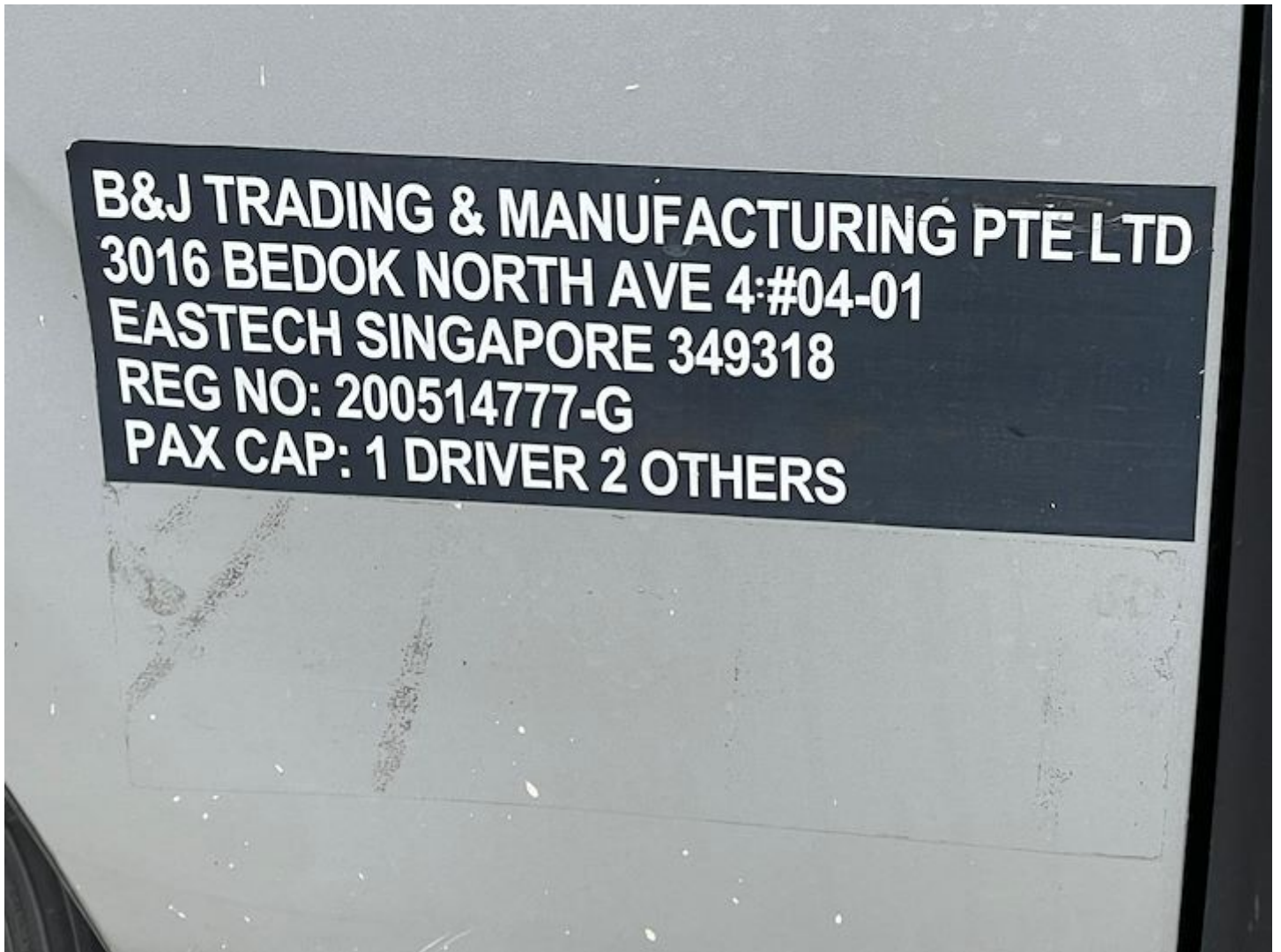













**SINGAPORE  
POLICE FORCE**


T/20221031/2107

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Report No. T/20221031/2107

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

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 31/10/2022 22:07	Vide Report No.:	Station Diary No.: 104
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**Informant's Particulars**

Name of Informant: TAY KWANG SENG		Address: 3 VAUGHAN ROAD SINGAPORE 358077	
ID Type / ID No.: NRIC NO / S7006111B		Contact No.: Home/Office: Mobile: 93851273	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 52	Date of Birth: 29/01/1970	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: SALESMAN		Driving Licence Information: Class: 2B,3	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 28/10/2022 19:25	Type of Location: Bridge
Location:  BARTLEY ROAD EAST				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	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 Passenger
GBE1861A	Van				Slightly Damaged	0
SKU1163R	Car					0





SINGAPORE  
POLICE FORCE



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Report No. T/20221031/2107

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

**Brief Details.**

On 28/10/2022 at about 1925hrs, I was driving my van GBE1861A along Bartley East Road towards Toa Payoh area (Braddell Rd) when a vehicle SKU1163R, suddenly cut into my lane without signalling and hit onto my car. I was travelling on the right most lane (1st lane) of the 3 lanes, and he was from the middle lane (2nd lane). As he had abruptly turned into my lane, we collided and I slowed down. However, the driver continued driving. I then tried to give a chase to the driver however I did not manage to get the driver's particulars as he kept driving. I have reported the matter to my insurance company. My van's left door is unable to open properly and also have dents and paint scrapes as damages. I have an in-car camera working at that point of time and handed over the footage to my insurance company. There was no injuries nor any police called to this incident.

I am lodging this police report as told by my insurance company.

**SINGAPORE  
POLICE FORCE**

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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**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 3 NUR FARAHIN BINTE  
RAHIM

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

31/10/2022 22:07

Officer In Charge Of Case:

TP / HRT /  
SR STAFF SGT IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145

Classification Of Case:

NP168