

# 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 ..... 20/12/2021 14:02 (SGT)  
Date of Accident ..... 18/12/2021 13:50 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... ORCHARD BOULEVARD BEFORE TOMLINSON RD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMX6065T

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... ALEXIUS CHEW HUI JUN  
NRIC No ..... S9132430Z  
Email Address ..... ALEXCHEWHUIJUN@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-93868654  
Alternative Phone No ..... (Home) +65-96800025

### VEHICLE PARTICULARS

Manufacturer ..... Mazda  
Model ..... 2  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1496

### 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 ..... ALEXIUS CHEW HUI JUN  
NRIC No ..... S9132430Z

Date Of Birth .....	15/09/1991
Occupation .....	Indoor
Date Of Driving Pass .....	09/06/2011
Driving experience .....	10 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93868654
Alt. Phone Number .....	(Home) +65-96800025
Email Address .....	ALEXCHEWHUIJUN@GMAIL.COM
Address .....	28A JALAN LEMPENG #06-13
Address complement .....	-
Postcode .....	-
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

#### PASSENGER 1

Name .....	VANESSA LEUNG
Gender .....	Female

#### 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? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACH

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	SD CARD WITH TP
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	TP348B
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Vehicle Manufacturer .....	BMW
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
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 Police for investigation.
6. The 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 lodgment 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)**

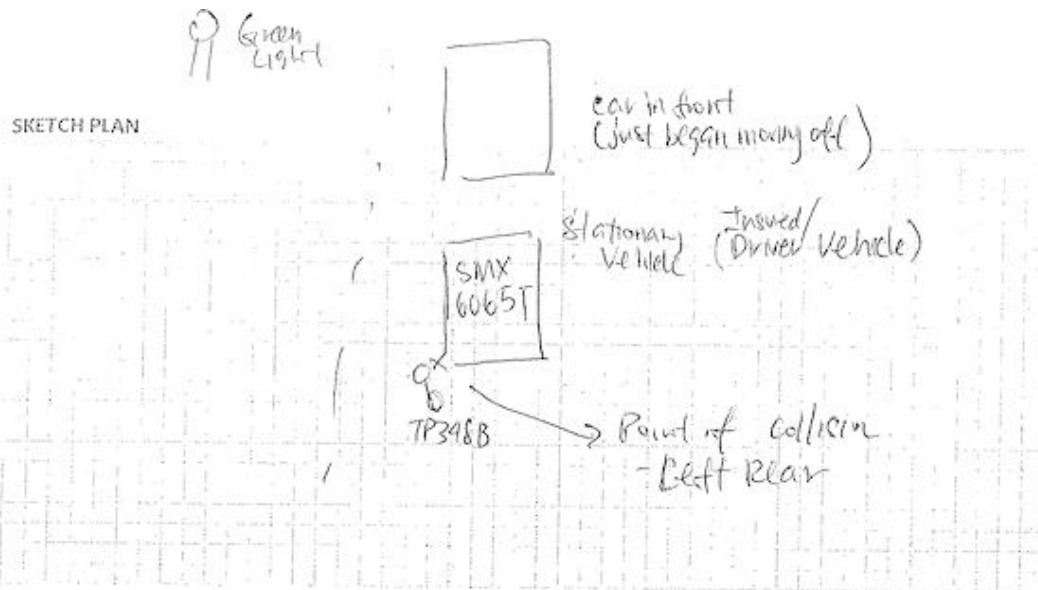
I understand, acknowledge, agree and consent that:

- (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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

X   
 Policyholder's Signature  
 Date & Time: 20 DEC 2021  
 8:52 AM

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

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attached Police Report T / ~~2012~~ 2021/1218 / 7037

DECLARATION

I/We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature  
 Date & Time: 70 DEC 2021

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

  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:







































































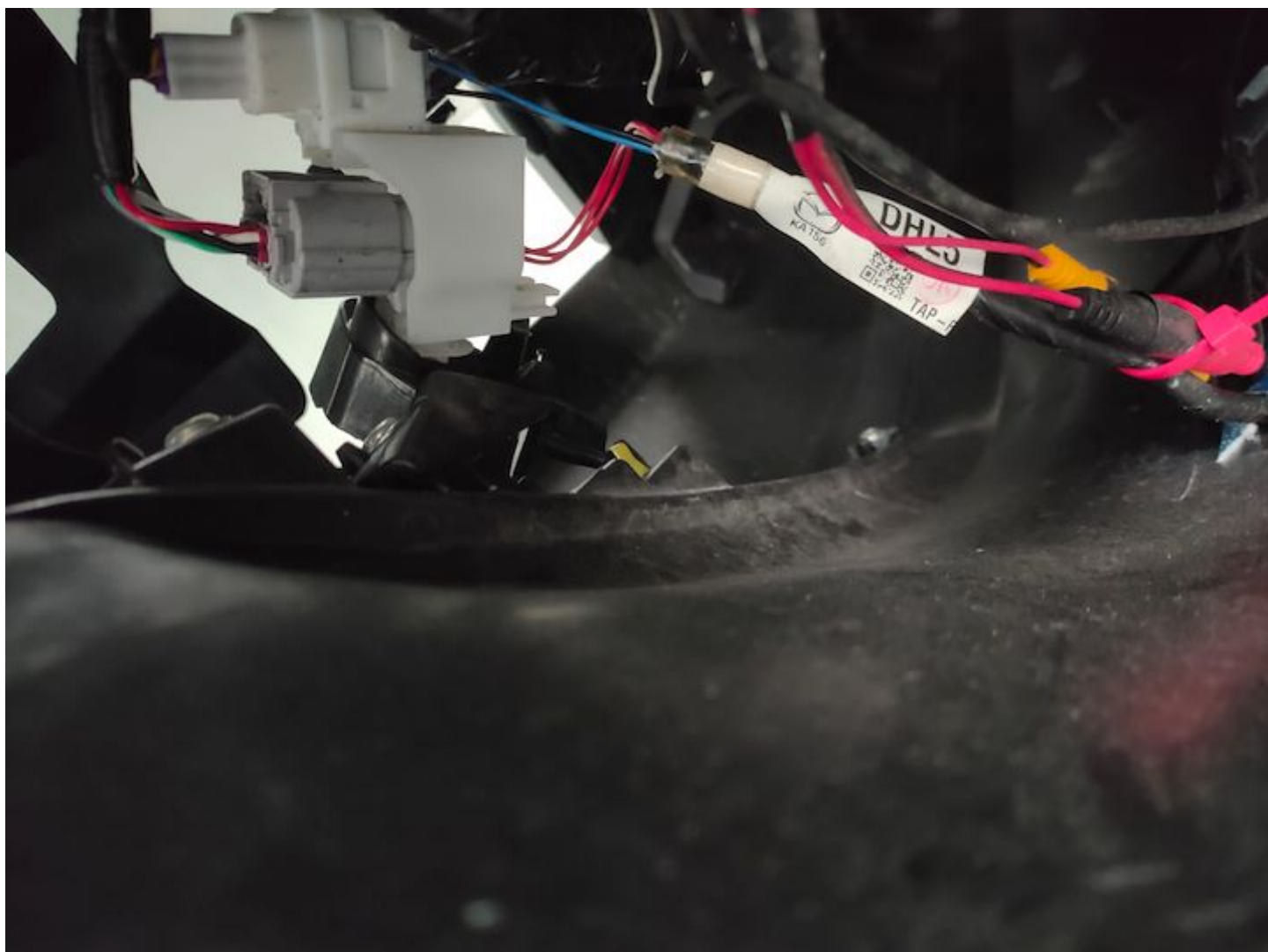








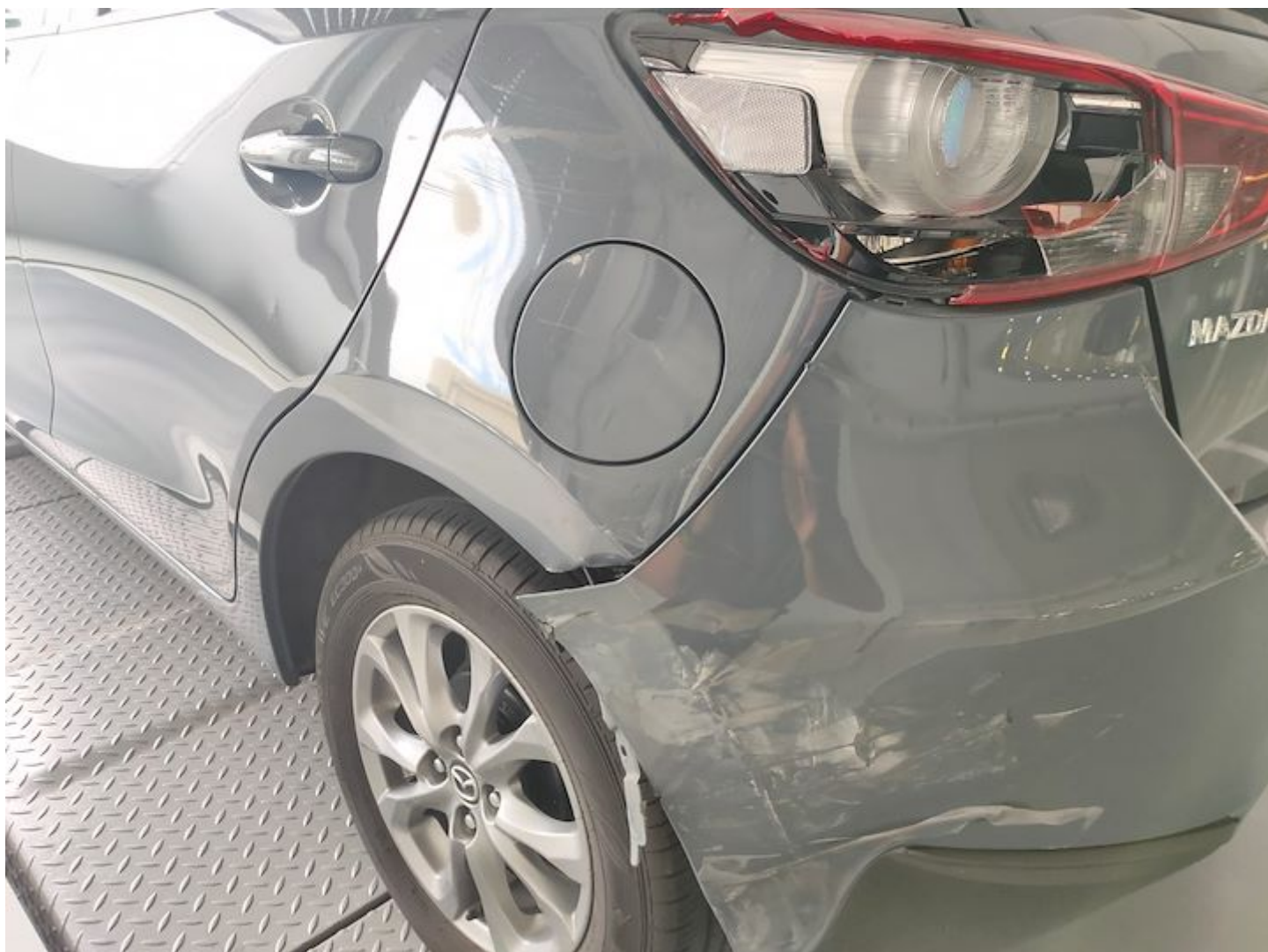















**SINGAPORE  
POLICE FORCE**


T/20211218/7037

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

1 of 4

Report No. T/20211218/7037

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/12/2021 15:52		Vide Report No.: F/20211218/0099		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: ALEXIUS CHEW HUI JUN			Address: 28A JALAN LEMPENG #06-13 SINGAPORE 128808		
ID Type / ID No.: NRIC NO / S9132430Z			Contact No.: Home/Office: Mobile: 93868654		
Nationality: SINGAPORE CITIZEN			Email: alexchhewhuijun@gmail.com		
Sex: Male	Age: 30	Date of Birth: 15/09/1991	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Advocate/Solicitor			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 18/12/2021 13:50	Type of Location: Straight Road
Location: Orchard Bouelvard before Tomlinson Road (Orc Boul Bus stop 05)				
Lamp Post Number: 52				
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: Head (TP motorcycle) to Rear (My Vehicle - Stationary vehicle)				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMX6065T	Car	MAZDA	2	Blue	Slightly Damaged	1
TP348B	Motorcycle	BMW		White	Slightly Damaged	0





**SINGAPORE  
POLICE FORCE**



T/20211218/7037

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

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Report No. T/20211218/7037

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMX6065T	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2070171356	21/01/2021	20/01/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	VANESSA LEUNG		ID No. S9109000G
Related Vehicle	SMX6065T (Car)		Contact No. 96800025
Hospital/Clinic	NIL		Class of Class: NIL
			Driving Licence & Expiry Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	ALEXIUS CHEW HUI JUN		ID No. S9132430Z
Related Vehicle	SMX6065T (Car)		Contact No. 93868654
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.

Vehicles along the 4 lane road were stationary, traffic light had just turned green and vehicles were slowly moving off. At the material time, my vehicle was still stationary as the vehicles in front of my had not moved off yet. While waiting for the car in front to begin moving forward, the traffic police motorcycle (veh no TP348B) hit the rear of my vehicle on the left side damaging the left rear, left rear light and left side mirror. TP motorcyclist thereafter fell to the ground about 10-15metres in front. TP officer got up and i check if he was ok - he stated he was ok with no injuries. driver of vehicle in front of me also stepped out to check on the TP officer and TP officer was ok.

After the accident, another TP officer showed up to investigate and IO Esmond Phua was assigned to the case. The TP / IO also took possession of the SD card (one black 32 GB micro SD card) for the dash cam (acknowledgement slip from SSS Haidil).

Damage:





SINGAPORE  
POLICE FORCE



T/20211218/7037

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

3 of 4

Report No. T/20211218/7037

CONTINUATION OF REPORT

- to the TP motocyce
- scratches to right side of motocyce
- to my vehicle (Mazda 2 vehicle no SMX6065T)
- left rear bumper scratches plus protrusion
- left rear headlight dmanged / glass cracked / broken
- left side mirrorr
- scratch on left side

IO Esmond Phua assigned - contact no 65472077



**SINGAPORE  
POLICE FORCE**

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



T/20211218/7037

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Report No. T/20211218/7037

**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 / TPB /  
YUS MASTARI I KHAZALI  
Contact No.: 65476347

This report is lodged at Clementi NPC Kiosk 1  
NP168

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

Date/Time:  
18/12/2021 15:52

Classification Of Case:



**SINGAPORE POLICE FORCE**  
**ACKNOWLEDGEMENT SLIP**

10 Edmund  
muir 65472077  
RTH car and police  
with.  
Orchard Blvd x  
Dunlop Rd  
118 52  
Lodge Accident RPT

Ref: Report No: F/2021/12/18/0099

I, SSS Hui Jun

(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 One black 32GB Hella Micro SD card

2

3

4

5

6

7

8

9

10

from Alexius Chew Hui Jun S9132430Z

HP 93868624

(Name, NRIC or Passport No. / Rank and No.)

of 20A Jalan Kemping #06-13 9128808

(Address / Police Station / NPC / NPP)

on 18/12/21

(Date)

at 1941

(Time)

Witnessed by / \* Handed over by:

(\* Delete if applicable)

(Signature)

ALEXIUS CHEW HUI JUN S9132430Z

(Name, NRIC or Passport No. / Rank and No.)

Received by:

(Signature)

SSS Hui Jun

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks:



**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 : ST0B21CK0001 Vehicle Registration No: 9MX 6065T  
Name (as shown in NRIC) : Alexis Lim Hui Jia NRIC/FIN/Passport No : \_\_\_\_\_  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : \_\_\_\_\_  
Email Address : \_\_\_\_\_  
Date of Accident : 18.12.2021 Time of Accident : 1350  
Place of Accident : Orchard Boulevard before Robinson rd  
Insurance Company : ALH

#### (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:

No attach police Report.

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: