SN0922C10006 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 01/12/2022 14:23 (SGT) SUBMITTED BY: AZRIL VERSION: 1 (01/12/2022 14:23 (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 01/12/2022 14:23 (SGT) Reported by Date of Accident 21/11/2022 07:30 (SGT) Exact Location of Accident Singapore Additional Location Information HOUGANG AVENUE 6 CARPARK Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SMQ7335U INSURED/POLICYHOLDER Is company? No Name Of Registered Owner HONG KIAN PENG (FANG JIANPING) NRIC No SXXXX816C Email Address g-max_scoot@hotmail.com Mobile Phone No (Phone) +65-96457667 Alternative Phone No VEHICLE PARTICULARS Manufacturer Honda Model Fit 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? No - Reporting only Vehicle Category Private car Transmission Auto CC 1317 **INSURANCE COMPANY** Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number

7220036253

SXXXX816C

27/10/1980

Indoor

HONG KIAN PENG (FANG JIANPING)

DRIVER

NRIC No

Name of Driver

Date Of Birth

Occupation

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	16/07/1999 23 YEARS AND 4 MONTHS Male (Phone) +65-96457667 - g-max_scoot@hotmail.com BLK 529 HOUGANG AVENUE 6 #12-257 - 530529 Yes - No
Type of Accident Weather Conditions Road Surface	No Collision Clear Wet
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? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name Gender	No 1 No - No 2 No
DETAILS OF POLICE ACTION	
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 Hougang Neighbourhood Police Centre (Phone) +65-18004890999 (Fax) +65-63128989 60 Hougang Ave 9 Singapore 538775 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO ATTACHED REPORT	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No

Accident report SN0922C10006

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 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 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/maili 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 tawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

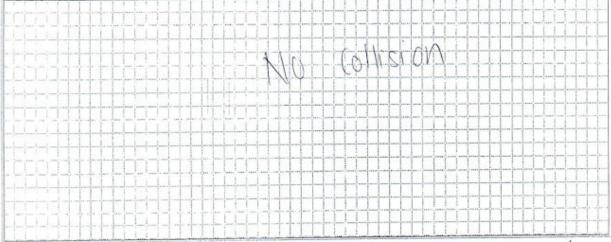


Policyholder's Signature / Date & Time

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

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

Sketch Plan



v.hon2022

Describe	Please refer to Police Report/. T/2022/121/2120
	/

Declaration

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

Policyholder's Signature / Date & Time Actual Driver's Signature (if driver is not the policyholder) / Date & Time (Name as in NRIC/ID card)

v.Jun2022





Report No. T/20221121/2120

Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

CONTINUATION OF REPORT

Vehicle Owner		MODEL OF STATE	AND RESIDENCE AND ADDRESS.	ID No.		S8033816C	
Name	HONG KIAN PENG			ID No.		300330100	
Related Vehicle	SMQ7335U (Car)			Conta	ct No.	96457667	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: 2B,2A,2,3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	Date Discharge NI		L	
No. of Days granted Medical Leave NIL			Degree o	f Injury	NIL		

Brief Details.

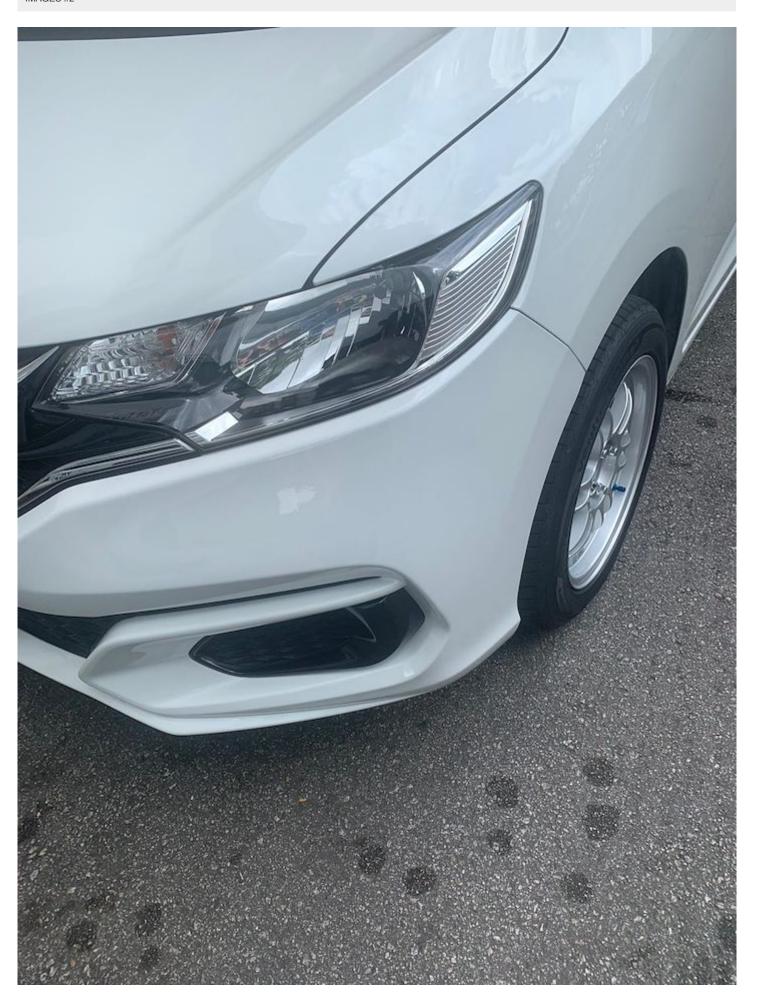
On 20/11/2022 at about 1130hrs, I parked my vehicle bearing SMQ7335U at my house Blk 529 Hougang Avenue 6 carpark (HG 37, 38, 39), lot 871. Since then, I did not drove my vehicle.

On 21/11/2022 at about 0730hrs, I drove my vehicle out to head to work. On the same day at about 2000hrs, I came back home and parked at a different lot. A female subject (Yvonne hp:93216574) approached me and claimed that I had hit and run her vehicle (SNE9704B) this morning at about 0730hrs. She informed that she had already lodged a police report about the matter. She also claimed that her in car camera had captured that there were 3 black patches on different parts on my left side vehicle and she insisted that we had collided on to her vehicle within 0725hrs to 0730hrs. There were damages to her right front side bumper.

I wish to inform that I did not felt any collision when I drove out of from the lot earlier this morning. There were also no damages to my vehicle.

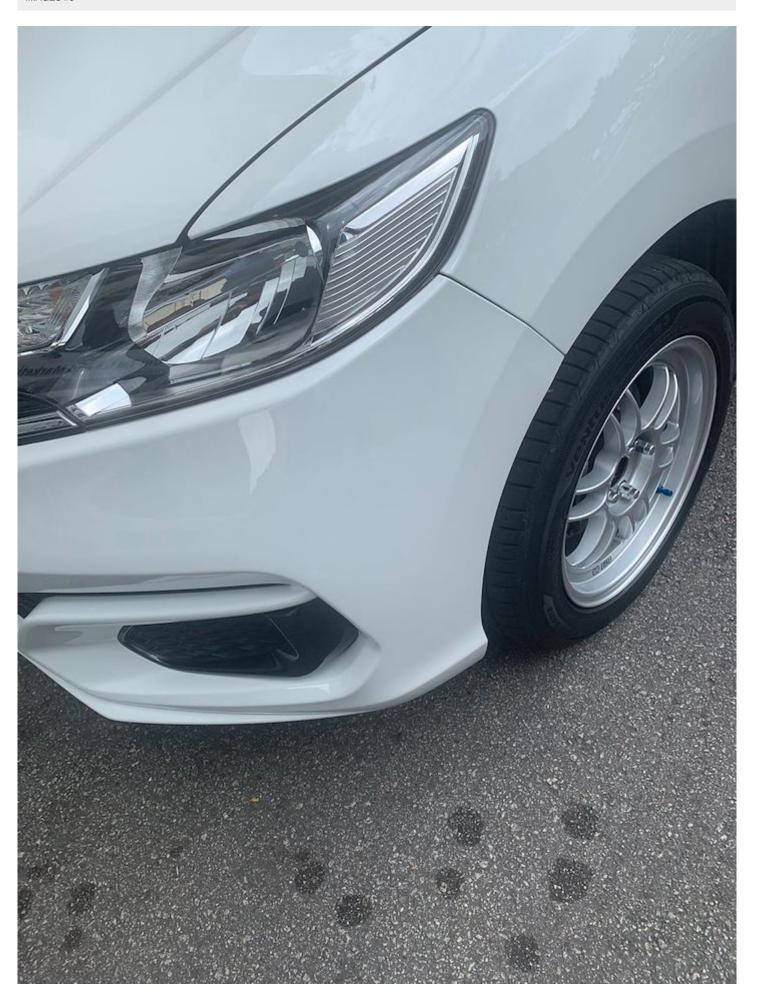
There is in car camera installed in my vehicle however there was no footages captured regarding the incident.

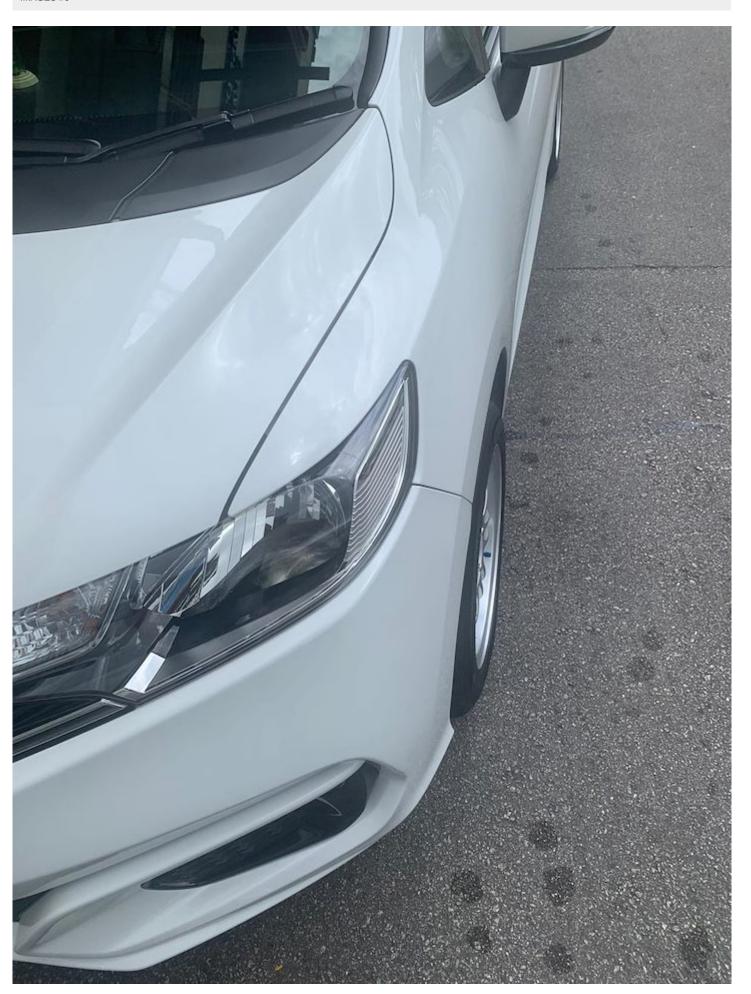


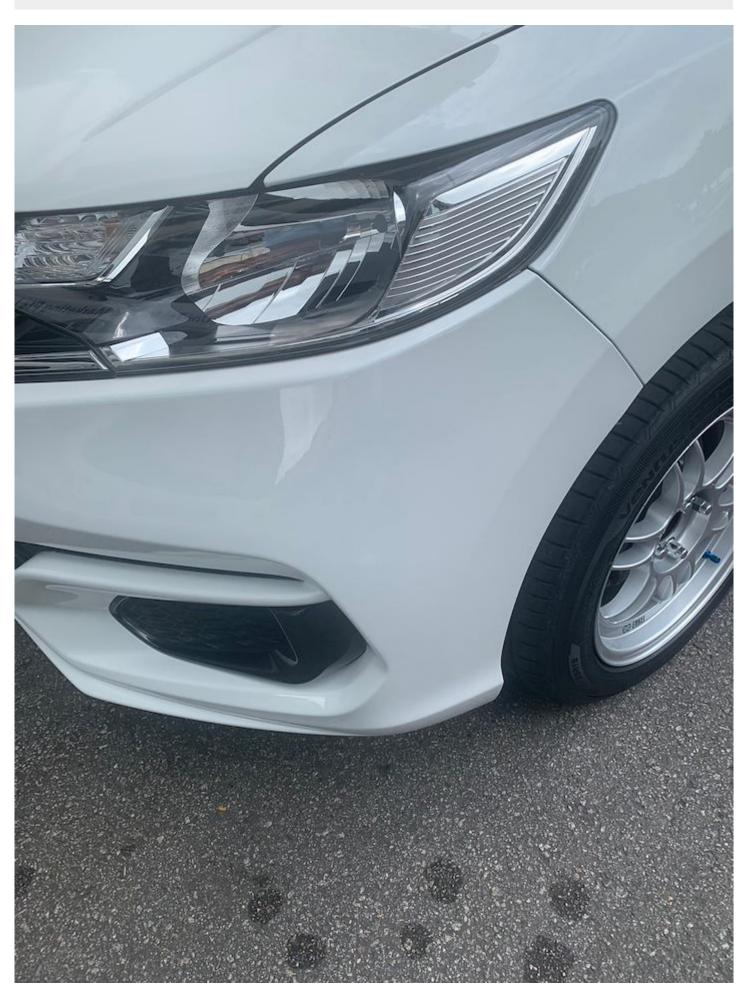




















T/20221121/2120

1 of 3

Report No. T/20221121/2120

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999

REPORT O	F A TRAFFIC	ACCIDENT		Station Diary No.	
Date/Time Report Made: 21/11/2022 23:28		ade:	Vide Report No.:	152	
	nt's Particu	ılars		NAME OF TAXABLE PARTY.	
Name of	Informant: IAN PENG		Address: APT BLK 529 HOUGANG AV 530529	/ENUE 6 #12-257 SINGAPORE	
ID Type / ID No.: NRIC NO / S8033816C Nationality: SINGAPORE CITIZEN		16C	Contact No.: Home/Office: Mobile: 96457667		
			Email: g-max_scoot@hotmail.com		
Sex: Age: Date of Birth:			Type of Informant: Vehicle Owner		
Race: Chinese Occupation: TECHNICIAN			Language: English	Institution / School Name:	
			Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:	

eneral Intori	mation of the Accide	Difete	Date/Time of	Type of Location	
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Accident: 21/11/2022 07:30	Car Park	
Location: HOUGANG A	VENUE 6				
Weather: Clear		Road Surface: Wet		Road Speed Limit:	
		Traffic Control:		Traffic Volume:	
Type of Colli: UNKNOWN	sion:			Anyone conveyed by ambulance: No	

o of Passenge	N	Condition	Color	Model	Make	Property of the last of the la	Details of Ve
	0	No	1475-14	model	The state of the s	Туре	Vehicle No.
	_	Damage	White		HONDA	Car	SMQ7335U
	0	Slightly	Silver		DMM		
		Slightly Damaged	Silver		BMW		SNE9704B

5. 图 2012 19 19 19 19 19 19 19 19 19 19 19 19 19
Use of Pedestrian Crossing: NA





Report No. T/20221121/2120

Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999 CONTINUATION OF REPORT

Vehicle Owner		Markey Committee		ID No.		S8033816C
Name	HONG KIAN PENG		ID No.		S8033616C	
Related Vehicle	SMQ7335U (Car)		Conta	ct No.	96457667	
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days granted Medical Leave NIL			Degree o	f Injury	NIL	

Brief Details.

On 20/11/2022 at about 1130hrs, I parked my vehicle bearing SMQ7335U at my house Blk 529 Hougang Avenue 6 carpark (HG 37, 38, 39), lot 871. Since then, I did not drove my vehicle.

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There is in car camera installed in my vehicle however there was no footages captured regarding the incident.





2.7

Report No. T/20221121/2120

Police Station Of Origin: Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

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 LEE JIA YI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 21/11/2022 23:28
Officer In Charge Of Case: TP / HRT / STAFF SGT SUFIYAN BIN KHAIRI Contact No.: 65476148	Classification Of Case:
NP168	