

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 | 01/07/2022 16:26 (SGT) |
| Reported by | Both |
| Date of Accident | 29/06/2022 02:16 (SGT) |
| Exact Location of Accident | Guillemard Rd, Guillemard Road Open Space, Singapore |
| Additional Location Information | GUILLEMARD ROAD |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------------|----------|
| Vehicle Registration Number | SLF8283Z |
|-----------------------------------|----------|

INSURED/POLICYHOLDER

| | |
|--------------------------------|----------------------|
| Is company? | No |
| Name Of Registered Owner | WU JIANWEI |
| NRIC No | SXXXX610H |
| Email Address | IMKENRY@HOTMAIL.COM |
| Mobile Phone No | (Phone) +65-81332270 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|--------------|
| Manufacturer | Audi |
| Model | RS E-TRON GT |
| Variant | RS E-TRON GT |
| 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 | 0 |

INSURANCE COMPANY

| | |
|---|--------------------------------------|
| Name of Insurance Company | AIG Asia Pacific Insurance Pte. Ltd. |
| Policy Number / Cover Note Number | 7210114406 |

DRIVER

| | |
|----------------------|------------|
| Name of Driver | WU JIANWEI |
| NRIC No | SXXXX610H |
| Date Of Birth | 14/03/1982 |
| Occupation | Indoor |

| | |
|--|------------------------|
| Date Of Driving Pass | 23/07/2002 |
| Driving experience | 19 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-81332270 |
| Alt. Phone Number | - |
| Email Address | IMKENRY@HOTMAIL.COM |
| Address | 37 GOODMAN ROAD |
| Address complement | - |
| Postcode | 439003 |
| 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 | Collided into Property |
| Weather Conditions | Clear |
| Road Surface | Dry |

OTHER INFORMATION

| | |
|---|-----|
| Was any foreign vehicle involved in the accident? | No |
| Number of vehicles involved in the accident | 1 |
| Was anybody injured in the Accident? | Yes |
| Was any injured conveyed to hospital by ambulance? | Yes |
| Was any other vehicle or property damaged? | No |
| 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 | PAN MIN |
| 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

THE CAR SPIN OUT AND LANDED ON THE OTHER SIDE OF THE ROAD.

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 | WITH TRAFFIC POLICE |

INJURED PERSONS DETAILS


INJURED 1

| | |
|---|----------------------|
| Name of injured person | WU JIANWEI |
| Gender | Male |
| Phone No | (Phone) +65-81332270 |
| Address | - |
| Address Complement | - |
| Post Code | - |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | SLF8283Z |
| Were seat belts worn? | Yes |
| Was this injured conveyed to hospital by ambulance? | Yes |

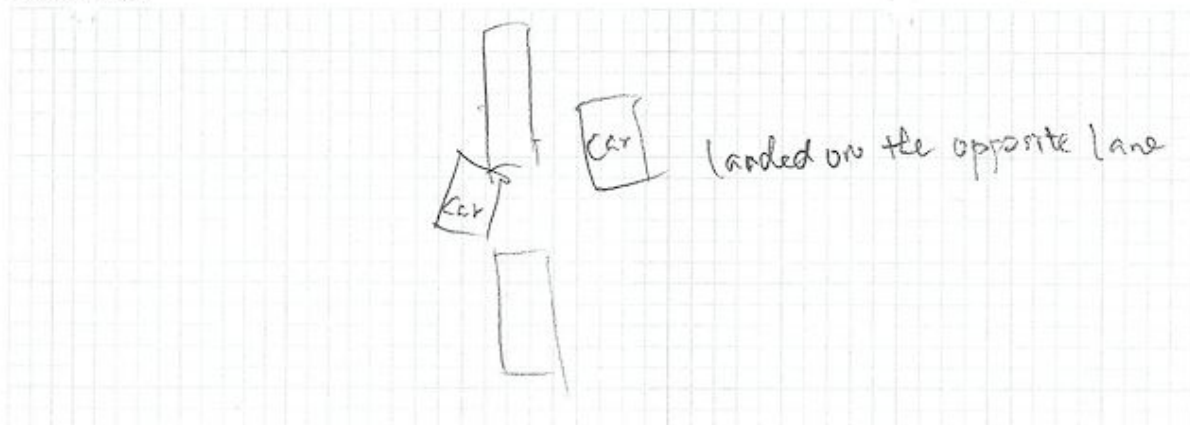
SKETCH PLAN**IMPORTANT NOTICE**

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 Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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. 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 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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre
Personnel *Jay Fong*

Sketch Plan

Describe Circumstances of the Accident

The car spin out and landed on the other side of the road.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



Witnessed by Reporting Centre
Personnel Tony Foong

















ROAD TRAFFIC ACT 1961
(SECTIONS 133, 134, 135)

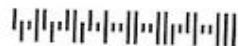
DATE OF ISSUE : 28 Oct 2022

WU JIANWEI
37 GOODMAN ROAD
SINGAPORE 439003

Report No. 2260 9096 9711



Driving Licence/ID No. /Ref:
S8275610H



NOTICE OF TRAFFIC OFFENCE(S)

Dear Wu Jianwei,

A serious traffic offence(s) has been committed. It could have resulted in injury or death.

Please pay \$500 by **25 Nov 2022**. If the fine is not paid you will have to go to Court and pay a higher fine.

In addition, the demerit points are prescribed by law.

Yours sincerely,

HEAD INVESTIGATION
TRAFFIC POLICE

How to pay?

Pay your fine of \$500 by **25 Nov 2022**.

Pay now at
www.police.gov.sg/pay

Use your Singpass or Driving Licence to log in.

You can also pay via AXS or SAM.

Note: If you are convicted of a road traffic offence in future, the Court sentencing you for that future offence, may take into account your previous compounded traffic offence(s) as an aggravating factor.

NP 403A

www.police.gov.sg/pay

METHODS OF PAYMENT**Payment via QR Code**

Payment can be made directly through scanning of the embedded QR Code.

Payment at AXS payment channels

Payment can be made at any AXS payment channels - AXS Station, AXS e-Station (Internet portal) AXS m-Station (mobile application).

- Please use the 16-digit numeric **Payment Reference Number** or **Vehicle Number** when making payment.
- Payment can only be made after 3 working days from the date of offence.
- For enquiries regarding the use of AXS payment channels, please visit www.axs.com.sg or contact AXS Hotline: 6560 2727.

Payment at Self-Service Automated Machine (S.A.M.)

Payment can be made at any Singapore Post's Self-Service Automated Machine (S.A.M.). S.A.M. machines are conveniently located island wide.

- Please use the 16-digit numeric **Payment Reference Number** or **Vehicle Number** when making payment.
- For location of S.A.M., please call 1605 or go to URL: <http://singpost.com/downloads/sam.pdf>.

Payment through vBox

Virtual Post or vBox is an online bill payment service by Singapore Post that allows you to make composition payment at URL: <http://www.vbox.com.sg>

- Please use the 16-digit numeric **Payment Reference Number** or **Vehicle Number** when making payment.

For Notice of Traffic Offence that is issued on the spot by Traffic Police officers, payment can only be made at **S.A.M. or vBox 2 working days after the date of offence**. For Notice of Traffic Offence that are mailed to offenders, payment can be made at S.A.M. and vBox **immediately**.

Payment by VISA/MasterCard or Internet Banking

Payment can be made using **VISA/MasterCard** or **Internet Banking** through our Electronic Police Centre (ePC) website. To access the website:

1. Go to <http://www.police.gov.sg/e-services>
2. Click on 'Outstanding Traffic Offence' under 'Find Out' to make payment.

Payment using **VISA/MasterCard** or **Debit Card** can also be made at Traffic Police Department located at 10 Ubi Avenue 3, Singapore 408665 during the following hours (except public holidays):

8:30 am - 5:30 pm (Weekdays)
 8:30 am - 1:00 pm (Saturdays)
 (Q-Ticket Issuing Hours: Weekdays - 8:30am to 5pm, Saturdays - 8:00am to 12:30pm)
 (Note: This mode of payment is not available for pedestrian and bicycle offences)

Payment by CashCard or through NETS with ATM Card

Payment by CashCard or through NETS with ATM Card can be made at Traffic Police Department located at 10 Ubi Avenue 3, Singapore 408665 during the following hours (except public holidays):

8:30 am - 5:30 pm (Weekdays)
 8:30 am - 1:00 pm (Saturdays)
 (Q-Ticket Issuing Hours: Weekdays - 8:30am to 5pm, Saturdays - 8:00am to 12:30pm)

Information on Demerit Points

For information on **demerit points**, please go to <https://www.police.gov.sg/resources/traffic-matters/already-have-a-licence/dips>

Financial Assistance

If you require financial assistance, please visit <https://www.supportgowhere.gov.sg>

For Enquiries


Contact the Traffic Police Information Centre: 6547 0000 between
 8:30 am - 5:30 pm (Weekdays)
 8:30 am - 1:00 pm (Saturdays)
 (except public holidays)

ROAD TRAFFIC ACT 1961

(SECTIONS 133, 134, 135)

| | | | |
|--|--|------------------|-----------------------|
| Date of Offence : | 29 Jun 2022 2:16am | Vehicle Number : | SLF8283Z |
| Place of Offence : | GUILLEMARD ROAD (OUTSIDE KALLANG FIRE STATION) | Vehicle Type : | MOTOR CAR |
| Offence(s): | | Amount | Demerit Points |
| YOU WU JIANWEI ARE CHARGED THAT YOU ON 29 JUNE 2022 AT ABOUT 2.16 AM ALONG GUILLEMARD ROAD (OUTSIDE KALLANG FIRE STATION) SINGAPORE DID DRIVE/RIDE MOTOR VEHICLE SLF8283Z ON A ROAD WITHOUT DUE CARE AND ATTENTION FOR OTHER PERSONS USING THE ROAD. TO WIT, BY FAILING TO HAVE A PROPER CONTROL OF VEHICLE AND RESULTING YOUR VEHICLE TO VEER TO THE RIGHT BEFORE COLLIDING INTO A LAMP POST AND A TRAFFIC LIGHT POLE THAT WERE ON THE CENTRE DIVIDER, YOU HAVE THEREBY COMMITTED AN OFFENCE UNDER SECTION 65(1)(a) OF THE ROAD TRAFFIC ACT, 1961. | | 500 | 6 |

Note: If you are convicted of a road traffic offence in future, the Court sentencing you for that future offence, may take into account your previous compounded traffic offence(s) as an aggravating factor.

| | | |
|---|--------------------|----------------------|
| PAYMENT Details | Due Date: | Total Amount: |
| Payment Reference No. : 0022 2609 0969 7114 | <u>25 Nov 2022</u> | <u>\$500</u> |
|  | | |

NP 403A

www.police.gov.sg/pay



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: S66SS0020G / 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 : 7210114406 Vehicle Registration No: SLF82832
Name (as shown in NRIC) : Wu Jianwei NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : _____ Time of Accident : _____
Place of Accident : _____
Insurance Company: _____

(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:

- convert OD claim
- upload PIR result
- amend accident date & time

Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name: Tony Tang
NRIC/FIN No.: S666948E
Date: