

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 16/01/2023 20:09 (SGT)
Reported by Both
Date of Accident 15/01/2023 12:34 (SGT)
Exact Location of Accident Singapore
Additional Location Information CARPARK LOT 89 & 109 AT BLOCK 347 UBI AVENUE 1
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SML4760X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JULIAN ANG KIAN HENG (JULIAN HAN JIANXING)
NRIC No SXXXX344H
Email Address julian_ang@hotmail.com
Mobile Phone No (Phone) +65-96260036
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Rav4
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 1987

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number DMPCSNW00111942202

DRIVER

Name of Driver JULIAN ANG KIAN HENG (JULIAN HAN JIANXING)
NRIC No SXXXX344H
Date Of Birth 26/05/1973
Occupation Indoor

Date Of Driving Pass	02/02/1993
Driving experience	29 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96260036
Alt. Phone Number	-
Email Address	julian_ang@hotmail.com
Address	APT BLK 352 UBI AVENUE 1
Address complement	# 06-979
Postcode	400352
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 Parked Vehicle
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)	0
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED STATEMENT

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	SLF6779Z
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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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.

[Signature] 16/JAN/23

Policyholder's Signature / Date & Time

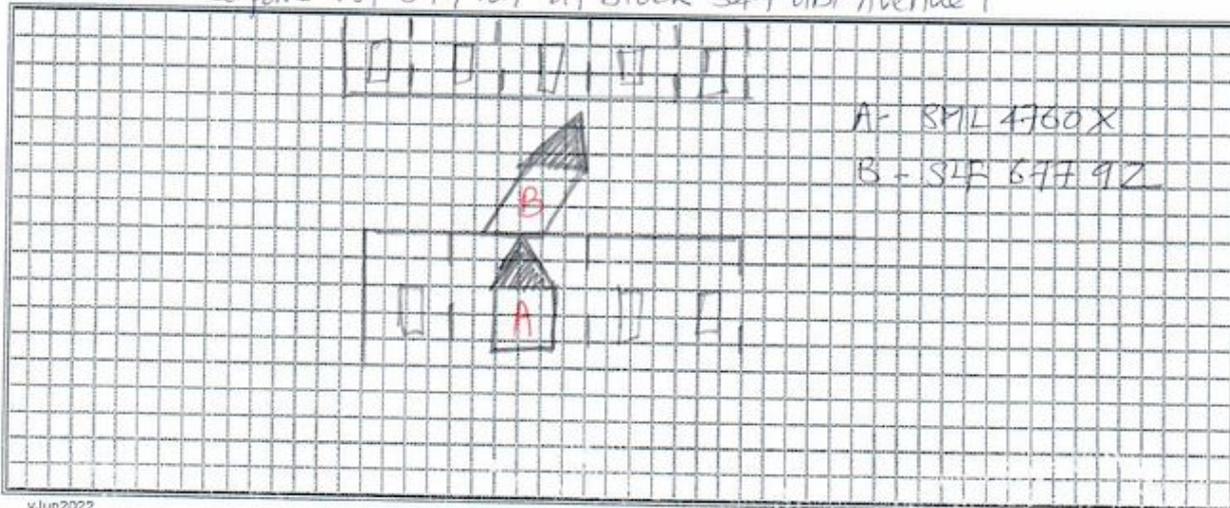
[Signature] 16/1/23

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

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

Sketch Plan

Carpark lot 89 & 109 at Block 347 Ubi Avenue 1

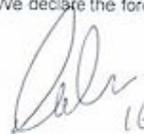


Describe Circumstance of the Accident

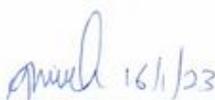
on 15 Jun 2023, 1234 hours, SLF 67792 reversing to exit car park lot 109. He failed in the first attempt, so he head-on back to parking lot 109 where he mounted the grass patch. then he made a 2nd attempt to reverse out of parking lot 109, however this time he failed to stop and reared crash onto vehicle SML 4760X which was parked at parking lot 89 which is directly opposite of parking lot 109. This crash had caused damage to my vehicle. He left the scene without leaving any contact to me.

Declaration

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


16/JAN/23
Policyholder's Signature / Date & Time

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


16/1/23
Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

212061 : 16/01/2023 : 13:13

Date: 16 Jan 2023

Accident on 15 Jan 2023 Involving SLF6779Z & SML4760X at the Car park LOT 89 & 109 at Block 347 Ubi Avenue 1

Dear Owner of Vehicle SLF6779Z

On 15 Jan 2023, Sunday, 1234hours, when you are reversing vehicle SLF6779Z to exit car park LOT 109, you failed in the 1st attempt. You head-on back to parking LOT 109 where you mounted the grass patch.

You made a 2nd attempt to reverse vehicle SLF6779Z out of parking LOT 109, however, this time you failed to stop vehicle SLF6779Z and reared crash onto to vehicle SML4760X parked at parking LOT 89 which is directly opposite of parking LOT 109. This crash had caused damage to vehicle SML4760X. You left the scene without leaving any contact to the owner of vehicle SML4760X

Kindly contact owner of vehicle SML4760X immediately upon receipt of this letter.

Regards
Mr. Ang
96260036

2023 年 1 月 15 日涉及 SLF6779Z 和 SML4760X 的事故发生在乌美一道，大牌 347 座 停车位 89 和 109

Dear SLF6779Z 车主

2023 年 1 月 15 日，星期日，1234 时，当你倒车 SLF6779Z 离开停车位 109 时，你在第一次尝试中失败后，你把车 SLF6779Z 驶回到停车位 109，这次还将车 SLF6779Z 开上路边草地。

你第二次尝试将车辆 SLF6779Z 倒出停车位 109，这次车辆 SLF6779Z 未能及时停车就撞上了停在停车位 89 的车辆 SML4760X，该停车位 89 是正对着停车位 109。这次碰撞到车辆 SML4760X 还造成了损坏。你在没有留下任何与车辆 SML4760X 的车主联系方式就离开了现场。

请在收到此信后立即联系车辆 SML4760X 的车主。

以上
Mr. Ang
96260036

