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 30/01/2023 11:18 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 28/01/2023 21:30 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE TO TUAS, AT AROUND EXIT 20A Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

1984

Vehicle Registration Number SLN4822C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner LIU NA NRIC No SXXXX277F Email Address UULIUNA@GMAIL.COM Mobile Phone No (Phone) +65-96738362 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Audi Model A4 Variant 2.0 TFSI S-TRONIC 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 Yes your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7210041208-01

DRIVER

CC

Name of Driver LIU NA NRIC No SXXXX277F Date Of Birth 21/07/1978 Occupation Indoor

Date Of Driving Pass 07/04/2011 Driving experience 11 YEARS AND 9 MONTHS Gender Female Mobile Number (Phone) +65-96738362 Alt. Phone Number Email Address UULIUNA@GMAIL.COM Address BLK 103 JURONG EAST ST 13 Address complement #09-210 Postcode 600103 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 Side Swipe Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? Yes Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement **FOREIGN VEHICLE 1** Vehicle Registration Number JQX7261 Vehicle Category Motorcycle PASSENGER 1 Name YANG SHUYI Gender Female PASSENGER 2 Name YANG JIE Gender Female PASSENGER 3 Name LIU CHUN LIN Gender Male 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

10 Ubi Avenue 3 Singapore 408865

No

Was notice of intended Prosecution given?

If yes, against whom?

Police Station Address

ON JAN 28,2023 AT AROUND 9:30PM, I WAS DRIVING THE CAR TO HOME AT JURONG EAST ON PIE FROM TUAS AT AFTER EXIT OF 20A. DUE TO THE RAIN AND THE DARKNESS, I DROVE AT QUITE A SLOW SPEED OF AROUND 50-60KM/HR. AT THAT MOMENT, I WAS DRIVING IN THE LANE 3. I CAREFULLY CHECKED ALL THE MIDDLE BACK, LEFT, RIGHT MIRRORS, AND I ALSO TURNED MY HEAD TO DOUBLE CHECK ON THE BLIND SPOT. WHEN I MADE SURE THERE WERE NO CARS/MOTORCYCLES TO BE SEEN BESIDES MY CAR, I GOT READY TO CHANGE TO LANE 4. HOWEVER, JUST WHEN I STARTED CHANGING TO LANE 4, I HEARD A SOUND FROM THE BACK OF MY CAR SO I STOPPED MY CAR. I SAW A MOTORCYCLE ON THE ROAD AND QUICKLY WENT TO CHECK THE MOTORCYCLIST'S CONDITION. AS FOR THE EXACT LOCATION, TIME, AND THE ENTIRE SITUATION, PLEASE REFER TO MY DASHCAM, WHICH HAS BEEN COLLECTED BY POLICE.

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 THE DASHCAM HAS BEEN COLLECTED BY POLICE.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JQX7261
Vehicle Manufacturer	_
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

IMPORTANT NOTICE

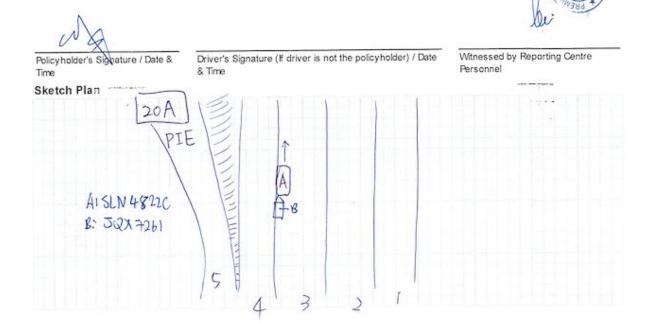
- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts 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.
- 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)

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



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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

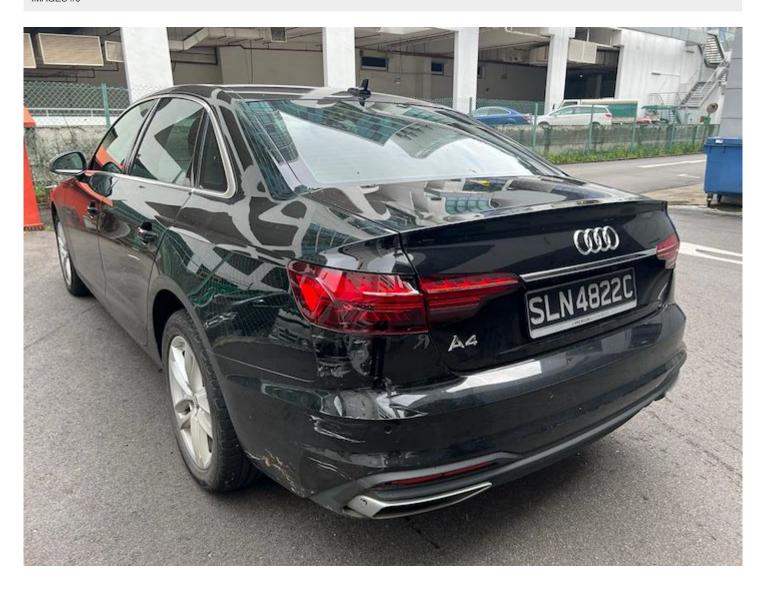






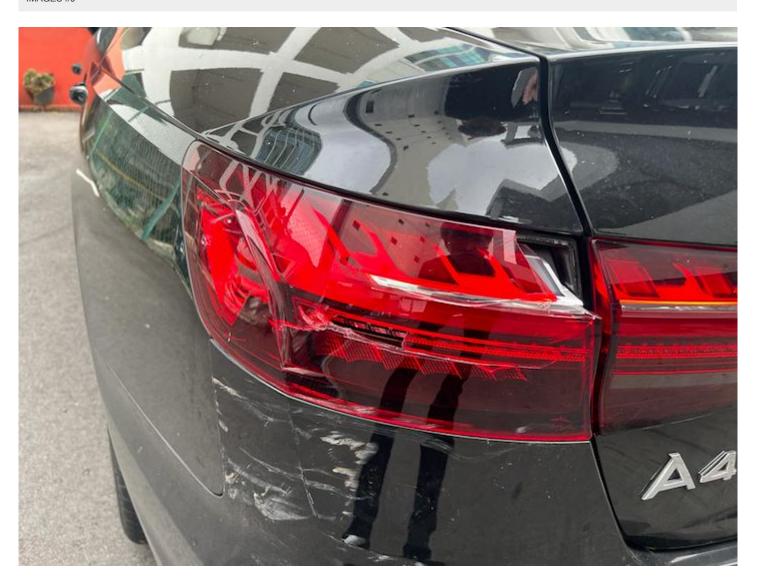




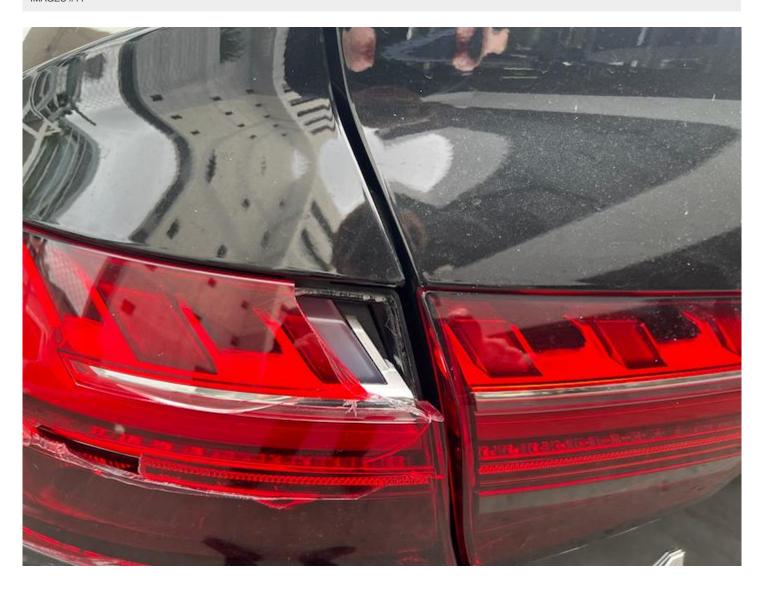


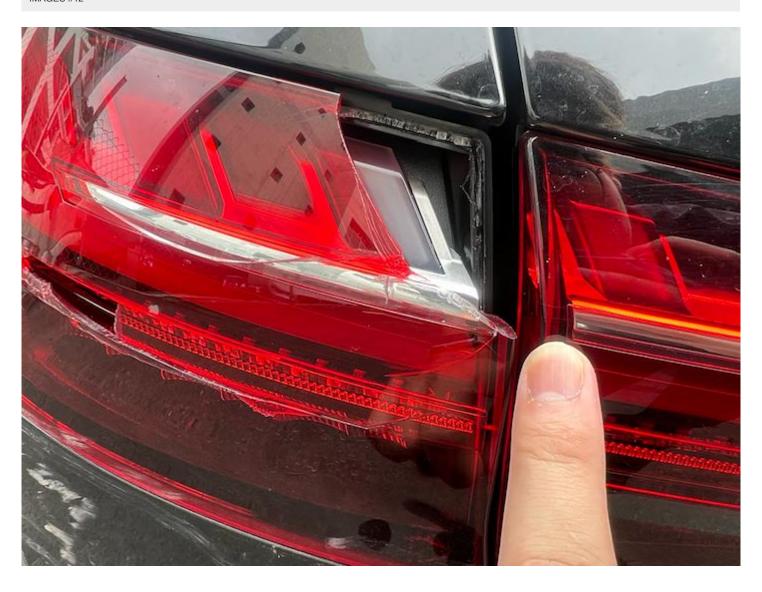


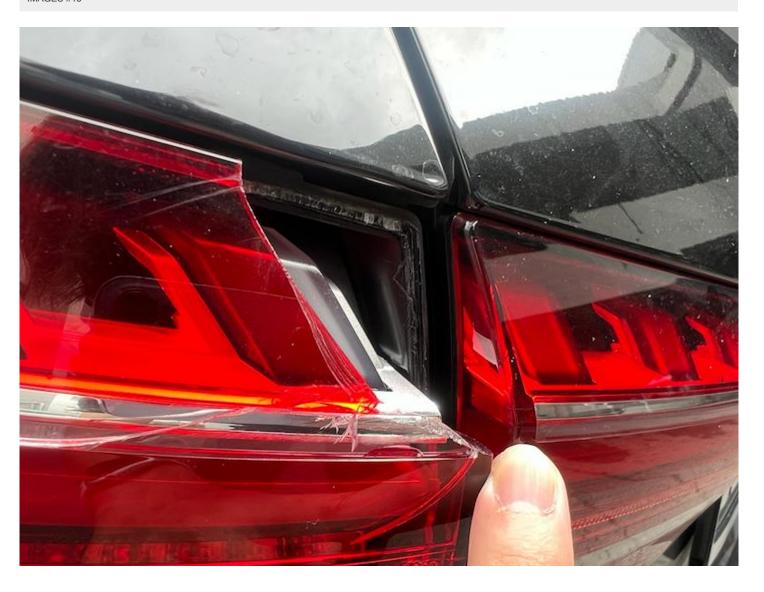


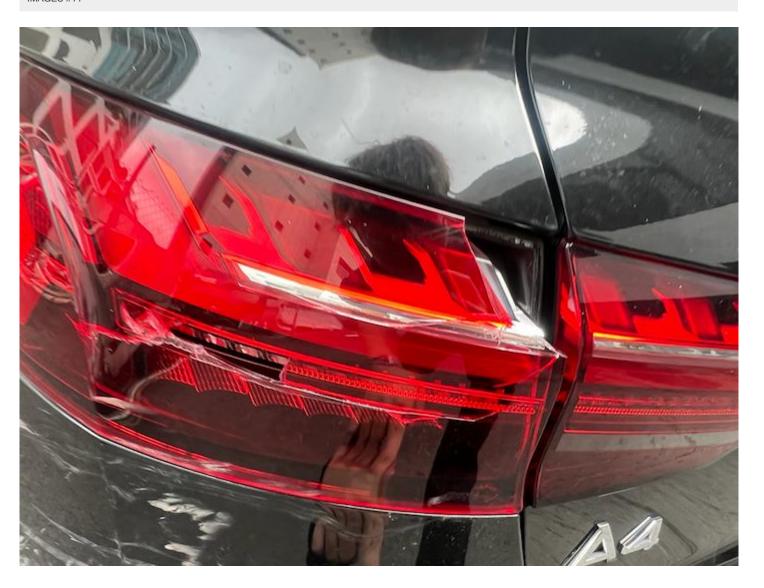


























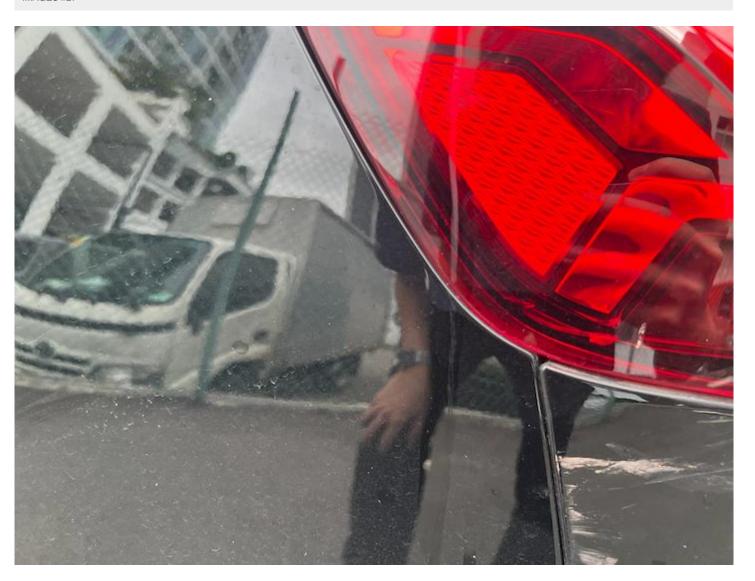


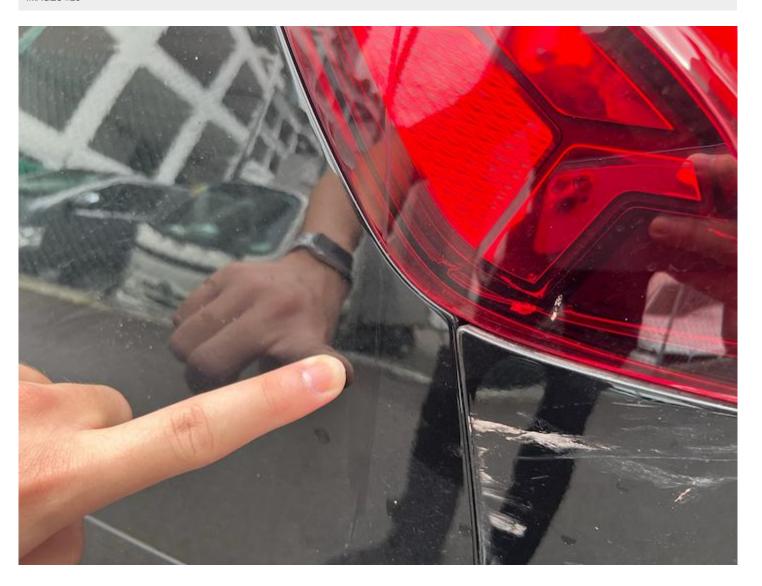


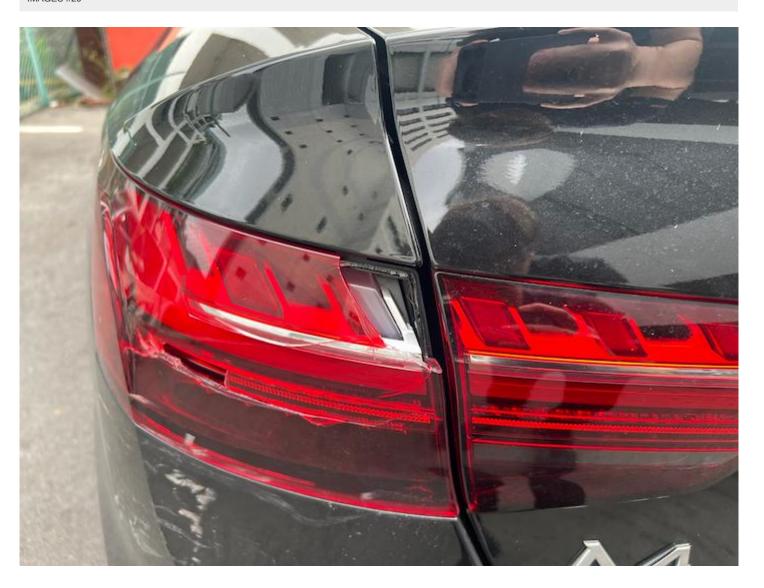


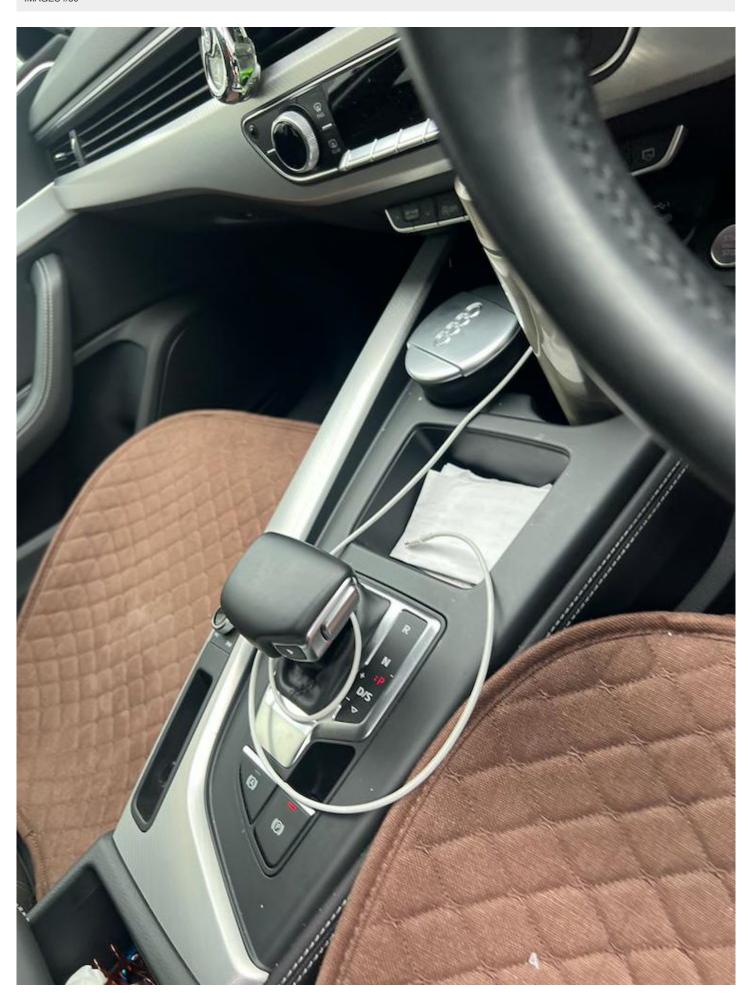








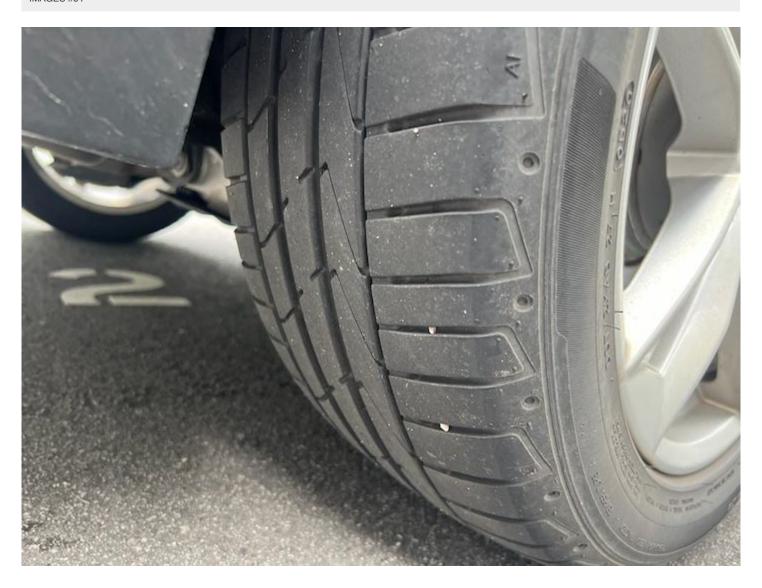


















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20230129/7034

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/01/2023 18:07			Vide Report No.: J/20230128/0133	Station Diary No.:	
Informan	t's Partic	ulars			
Name of Informant: LIU NA			Address: 103 JURONG EAST STREET 13 #09-210 SINGAPORE 600103		
ID Type / ID No.: NRIC NO / S7884277F			Contact No.: Home/Office: Mobile: 96738362		
Nationality: CHINESE			Email: UULIUNA@GMAIL.COM		
Sex: Age: Date of Birth: Female 44 21/07/1978			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Teacher			Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/01/2023 21:30	Type of Location PIE to tuas
Location: JALAN SEJA	RAH			
Weather: Roa Raining Wet		Road Surface:		Road Speed Limit:
Raining		vvet		80 Km/h
Raining Traffic Flow: One Way		Traffic Control: Not Controlled		80 Km/h Traffic Volume: Heavy

Vehicle No.	Type	Make	Model	Color	Conditio	No of
JQX7261	Motorcycle					0
SLN4822C	Car	AUDI	A4 2.0 TFSI S TRONIC	Black		0

Details of V	ehicle Insurance		Lateral Service	他是是2000年
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



Report No. T/20230129/7034

2 of 3

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

CONTINUATION OF REPORT

Details of V	ehicle Insurance	NOR OF PROCESS OF A PROCESS	F. (1 - 1)	Francis Deta
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
		7210041208-01	24/04/2022	23/04/2023

Any Pedestrian Ir	volved: No					
No. of Pedestrian			Use of Pedestrian Crossing: NA			
Driver	27.18 J. 17.13 3 M.	Carlot F	是一些的数据	ust like	154	· 大学 12.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.
Name	LIU NA		ID No.		S7884277F	
Related Vehicle	SLN4822C (Car)			Conta	ct No.	96738362
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL	
No. of Days granted Medical Leave NIL			Degree of		NIL	
Rider	PALIS (BUSINESS)	2512-58	The CHARLES		14 000	
Name	Unknown Rider			ID No		NIL
Related Vehicle	NIL			Conta	ct No.	NIL
Hospital/Clinic	NIL			Class Drivin Licen Expir	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days granted Medical Leave NIL			Degree of Slight		t	

Brief Details.

On Jan 28, 2023 at around 9:30pm, I was driving the car to home at Jurong East on PIE from Tuas at after Exit of 20A. Due to the rain and the darkness, I drove at quite a slow speed of around 50-60km/hr. At that moment, I was driving in the lane 3. I carefully checked all the middle back, right, left mirrors, and I also turned my head to double check on the blind spot. When I made sure there were no cars/motorcycles to be seen besides my car, I got ready to change to lane 4. However, just when I started changing to lane 4, I heard a sound from the back of my car so I stopped my car. I saw a motorcycle on the road and quickly went to check the motorcyclist's condition. As for the exact location, time, and the entire situation, please refer to my dashcam, which has been collected by police.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230129/7034

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/01/2023 18:07
Officer In Charge Of Case: TP / TPIB / MUHAMMAD ISMAIL BIN AMZAH Contact No.: 65476185	Classification Of Case:

NP168



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

GENERAL INSURANCE ASSOCIATION 6 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: \$66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

		ADDE	NDUM		
A)	PARTICULARS OF PER	SONMAKINGTHEAMENDM	IENTS:		
	Original Report No : SP14231U0003		Vehicle Registration No:		
	Name(as shownin NRIC):		NRIC/FIN/Passport No : SXXXX277F		
		icle Owner) (*) Please delete	as appropriate		
	Address : BLK 103 JURONG EA		AST ST 13, #09-210Singapore(600103		
	Contact (Tel) :		Mobile No. : 96738362		
		UULIUNA@GMAIL.COM			
	Date of Accident :	28/01/2023	Time of Accident :21:30		
	Place of Accident :	PIE TO TUAS, AT ARO			
		AIG ASIA PACIFIC INSU	RANCE PTE LTD		
		IATION / AMENDMENTS:			
	0.5.1.1.1.20.1.1	Cinnabura	Reporting Colors Residently Signature		
	Policyholder / Driver's Date:	Signature	Reporting Centre Personnel's Signature Name: UM 00 50-3 NRIC/FIN No.: Ganga 566 Date: 7/2/23		