75.7%	SIGNMENT				
rom: Date:	Veh No: SLA 4469 H. Yr Regn: 2016 / Feb				
stimated Cost;	Type: M.Car / M.Cycle / Bus / Van / Lorry / Taxi / Prime Mover /				
D/TP/WS/TP RES/OD RES/EVA/INV/MV	Truck / Trailer or				
o Inspect Vehicle No:	Make: Adi A3 c.c 1395				
t Workshop m/s	Colour While. A/C: Insured / Std / NI / NA				
	Sp.Reading 106638 T/Radio: Insured / Std / NI / NA				
sured:	Eng/No:				
olicy No.	C/No: WAUZ ZZ SV 6 6 A 0 9 5 683.				
aims No.	Gen. Cond Good / Fair / Poor / Burnt				
ım İnsured: Excess:	Steering: Inorder / Jammed / Leaked / Burnt or				
(Client's Record)	Brake: Inorder / Jammed / Leaked / Burnt or				
ake of Veh:	Modí: Nil / S/Rim / STD A/Rim or				
	Tyre Size: F: 205/55R16_				
(Policy Condition)	R: 205/55RIG				
emark: The veh had commenced its N/S O/S	BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /				
repair at the time of inspection.	TOYO/YOKO or Contract al				
al. or Market Value:	Front Rear				
AC Accident Rport: Consistent? ; Yes or No	R/Bal. 8/Bal. 06 mm				
A / PR Seen: Consistent?: Yes or No	L/Bal. 06 mm L/Bal. 06 mm				
tt. Repairs: days Res.: Yes or No	D.O.A. D.O.I. 21/03/23				
m Sum: % 3 Val.: Yes or No	Survey held at				
A / REV / REP. / 24 HRS	Des. of Damages Frt / Rear / O/S / N/S / U/C / Rooftop or				
Vehicle: IN / OUT					
Pate / Time   Action / Instruction	The U/C / Chassis frame / Body Structure affected due to collision				
ODAIG. Total Loss					
	*				
mv:53k					
PV: 24.8K					
Nett: 28.2k.					
e/Time, File Pass to? : Preli. Report	Days Of Repair:				
The state of the s					
: Final Report	Resurvey No. of Trip: Survey Fee:				
Commence of the Commence of th	Resurvey No. of Trip:  Survey Fee:  Transportation:				

Laurise France I I St. In 700

## > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Singapore NRIC	
Owner ID:	235F	
Vehicle Details		
Vehicle No.:	SLA4469H	
Vehicle to be Exported:	No	
Intended Deregistration Date:	21 Mar 2023	
Vehicle Make:	AUDI	
Vehicle Model:	A3 SB 1.4 TFSI (AMBIENTE)	
Primary Colour:	White	
Manufacturing Year:	2015	
Engine No.:	CZC515128	
Chassis No.:	WAUZZZ8V6GA095683	
Maximum Power Output:	92.0 kW (123 bhp)	
Open Market Value:	\$26,919.00	
Original Registration Date:	29 Feb 2016	
First Registration Date:	29 Feb 2016	
Transfer Count:	0	
Actual ARF Paid:	\$19,687.00	
Intended PARE Rebate Details		
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	28 Feb 2026	
PARF Rebate Amount:	\$11,812.00	
Intended COE Rebate Details	CONTRACTOR OF THE RESIDENCE OF THE PARTY OF	
COE Expiry Date:	28 Feb 2026	
COE Category:	E - Open Category	
COE Period(Years):	10	
QP Paid:	\$44,001.00	
COE Rebate Amount:  Total Rebate Amount:	\$12,925.00 \$24,737.00	

The information contained herein is correct as at 21 Mar 2023

New Cars

**Used Cars** 

Rental Cars

Sell My Car

Directory

Products

Insurance A

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### Car Accessories & Products

Pimping up your ride? Browse thousands of car products for even more choices! Read honest reviews by our trusted consumers before you make a purchase.



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Audi A3 Sedan 1.4A TFSI
Ambiente

\$60,800

roadtax and insurance. Contact our sales agent now to schedule for a test drive!

\$17,070 /yr

20-May-2016

1,395 cc

Luxury

Available

PREMIUM AD

Nev Con

New RS3 Bodykit, New Audi RS3 Tango Red Paintwork! Undercarriage Wear And Tear Replaced. No Repairs Needed. Drive With Confidence. No Wasted Trip To Our Showroom For Sure. Lowest Interest Available. Contact Our Sales Personnel Or Drop By Our Showro...

United Motoring Pte Ltd

Compare A

Posted: 26-Jan-2023

Posted: 16-Mar-2023

# C

## 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.

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 20/03/2023 17:57 (SGT)
Reported by Driver
Date of Accident 18/03/2023 04:30 (SGT)
Exact Location of Accident Yishun Street 71, Singapore
Additional Location Information YISHUN STREET 71, NEAR BLOCK 730
Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SLA4469H

#### INSURED/POLICYHOLDER

 Is company?
 No

 Name Of Registered Owner
 CHIN MAY HIANG

 NRIC No
 SXXXX235F

 Email Address
 CHEWYUDE@GMAIL.COM

 Mobile Phone No
 (Phone) +65-97335983

 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

your vehicle? Yes
Vehicle Category Private car
Transmission Auto
CC 1390

### INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 2100454915-07

### DRIVER

 Name of Driver
 CHEW YU DE

 NRIC No
 SXXXX360Z

 Date Of Birth
 18/05/1994

 Occupation
 Indoor

Date Of Driving Pass 21/03/2013 Driving experience 10 YEARS Gender Male Mobile Number (Phone) +65-97536583 Alt. Phone Number Email Address CHEWYUDE@GMAIL.COM Address 1 ROSEWOOD DRIVE Address complement #11-01 Postcode 737934 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Child 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? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 1 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?

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

Traffic Police

(Phone) +65-65470000

(Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

### CIRCUMSTANCES OF ACCIDENT

THE INCIDENT TOOK PLACE WHEN I WAS DRIVING ON A STRAIGHT ROAD ALONG YISHUN RING ROAD TOWARDS CHONG PANG DIRECTION. I WAS HEADING HOME URGENTLY DUE TO A FAMILY EMERGENCY AND ACCIDENTALLY SWERVED TO THE LEFT AT THE CROSS JUNCTION AND HIT THE TRAFFIC LIGHT / LAMP POST. NO PEDESTRIANS AND TRAFFIC WERE PRESENT ON THE ROAD.

### ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

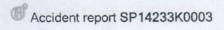
Reasons for not uploading a video of the accident

SD CARD WITH TP

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

TRAFFICLIGHT



Vehicle Manufacturer	
Vehicle Model	-
Vehicle Variant	
Vehicle Colour	-
Vehicle Category	NA / Unknown
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)	-
3 - 11 - 17	-

### 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.
- 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.
- 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)

l 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' 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), w hich may be sited outside of Singapore, for one or more of the above Purposes.

1

Policyholder's Signature / Date & Time

Driver's Signature (# driver is not the policyholder) / Date & Time 20/3/2 3 - 12.00 kg

Witnessed by Reporting Cent Personnel Tony Foors

Sketch Plan

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Declaration

IWe 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 2-0 | 5 | 2023 - 1200

7 13

Witnessed by Reporting Centre Personnel Tony From





Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3

Report No. T/20230318/7048

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/03/2023 19:49			Vide Report No.: L/20230318/0036	Station Diary No.:			
Informant	t's Partic	ulars					
Name of Informant: ZOE TAN			Address: 119 YISHUN RING ROAD #01-455 SINGAPORE 760119				
ID Type / ID No.: NRIC NO / S9700855H			Contact No.: Home/Office: Mobile: 96450535				
Nationality: SINGAPORE CITIZEN			Email: 203TAN@GMAIL.COM				
Sex: Female	Age: 26	Date of Birth: 12/01/1997	Type of Informant: Friend of driver				
Race: Chinese			Language: English	Institution / School Name:			
Occupation:			Driving Licence Information: Class:	Date of Expiry:			

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/03/2023 04:30	Type of Location: X-Junction	
Location: YISHUN STR	EET 71				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 40 Km/h	
Traffic Flow: Dual Carriage	Way	Traffic Control: Traffic Light - Wor	rking	Traffic Volume: No Traffic	
Type of Collis	ion: le Against - Lamp Post			Anyone conveyed by ambulance:	

Details of Vo	enicle invo	Ived				
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLA4469H	Car	AUDI	A3	White	Seriously Damaged	0

Details of Vo	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLA4469H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100454915-07	01/03/2023	29/02/2024





2 of 3

Report No. T/20230318/7048

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

### CONTINUATION OF REPORT

Any Pedestrian II	nvolved: No			
No. of Pedestriar	The same and the s	Use of Per	destrian Cro	ossing: NA
Driver				
Name	CHEW YU DE		ID No.	S9418360Z
Related Vehicle	SLA4469H (Car)		Contact N	o. 97536583
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NII	
No. of Days gran	ted Medical Leave NIL	Degree of	NII	
Friend of driver				
Name	ZOE TAN		ID No.	S9700855H
Related Vehicle	NIL		Contact N	o. 96450535
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NII	7
No. of Days gran	ted Medical Leave NIL	Degree of	NII	

### Brief Details.

The incident took place when driver was driving in a straight road along Yishun Ring Road towards Chong Pang Direction. He was heading home urgently due to a family emergency, and accidentally swerved to the left at the cross junction and hit the traffic light / lamp post. No pedestrians were present and there were no traffic along the road. Airbag was activated upon collision, but driver did not suffer any injuries. Driver further inspected the surroundings and reconfirmed that no one else was involved.

Driver then urgently called for a friend to assist with the respective reporting / towing of vehicle. Upon her arrival, driver rushed home to attend to the fall accident of his father who was undergoing night dialysis.





3 of 3

Report No. T/20230318/7048

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

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: 18/03/2023 19:49
Officer In Charge Of Case: TP / TPIB / TAN JUN YAN Contact No.: 65476311	Classification Of Case: