SN0823580003-01 / National Assessment Centre Services [159721]
ENTRY DATE & TIME: 08/05/2023 11:52 (SGT)
SUBMITTED BY: Rosli Bin Abdul Wahab
VERSION: 2 (15/05/2023 11:17 (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.
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	08/05/2023 11:52 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/05/2023 17:50 (SGT)
Exact Location of Accident	Tampines Ave 4, Singapore
Additional Location Information	JUNCTION WITH TAMPINES CENTRAL 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5332E

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEO SUNNY (ZHANG SUNNY)
NRIC No	SXXXX818C
Email Address	sunnijul@yahoo.com.sg
Mobile Phone No	(Phone) +65-93266215
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
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 - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1197

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1800049530-04

DRIVER

Name of Driver	TEO SUNNY (ZHANG SUNNY)
NRIC No	SXXXX818C
Date Of Birth	02/10/1980
Occupation	Indoor

Date Of Driving Pass	26/07/1999
Driving experience	23 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93266215
Alt. Phone Number	-
Email Address	sunnijul@yahoo.com.sg
Address	BLK 364 TAMPINES STREET 34 #08-125
Address complement	-
Postcode	520364
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	Collision - Head to Rear
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)	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	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Changi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005872999
Alt. Police Station Phone No	(Fax) +65-65872900
Police Station Address	9 Simei Street 2 Singapore 529914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH AND POLICE REPORT T/20230506/2080

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FY462Y
Vehicle Manufacturer	Honda
Vehicle Model	PHANTOM
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 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 Traffic Police Department for investigation.**
6. 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.
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.

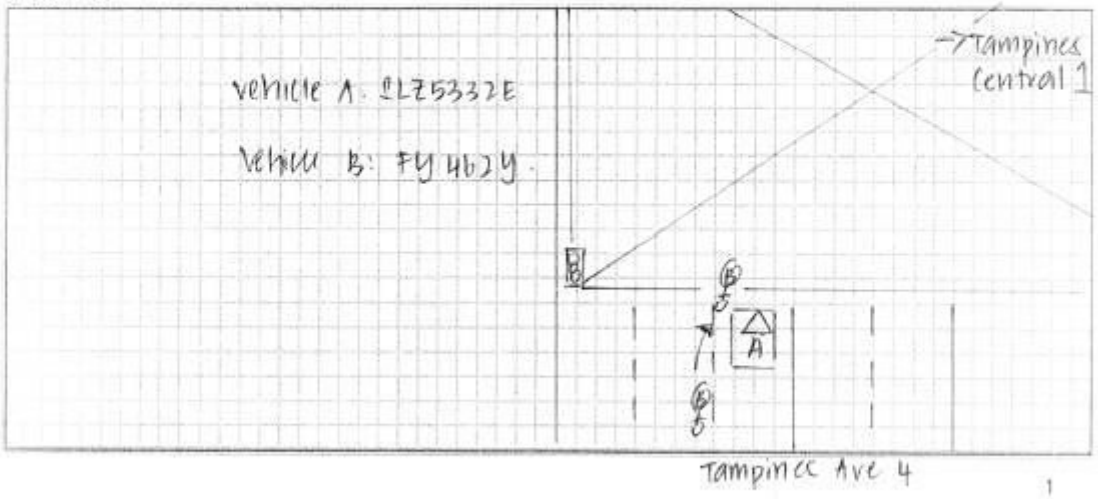
08/05/2023

Policyholder's Signature / Date & Time

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

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

Sketch Plan



1

Describe Circumstance of the Accident

On the stated date and time, I, vehicle 'A' was travelling along the stated vehicle. As it was green arrow, I released my brakes. Before I could accelerate, Motorcycle - FY 462Y, cut in front of my vehicle and slammed on his brakes. There was no time for me to react and my vehicle's front left portion collided onto the motorcycle. I signalled to the rider to stop at Tampines One. But the said rider rode off.

POLICE REPORT T/20230506/2080

Declaration

I/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

08/05/2023

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

2

IMAGES

IMAGES #2

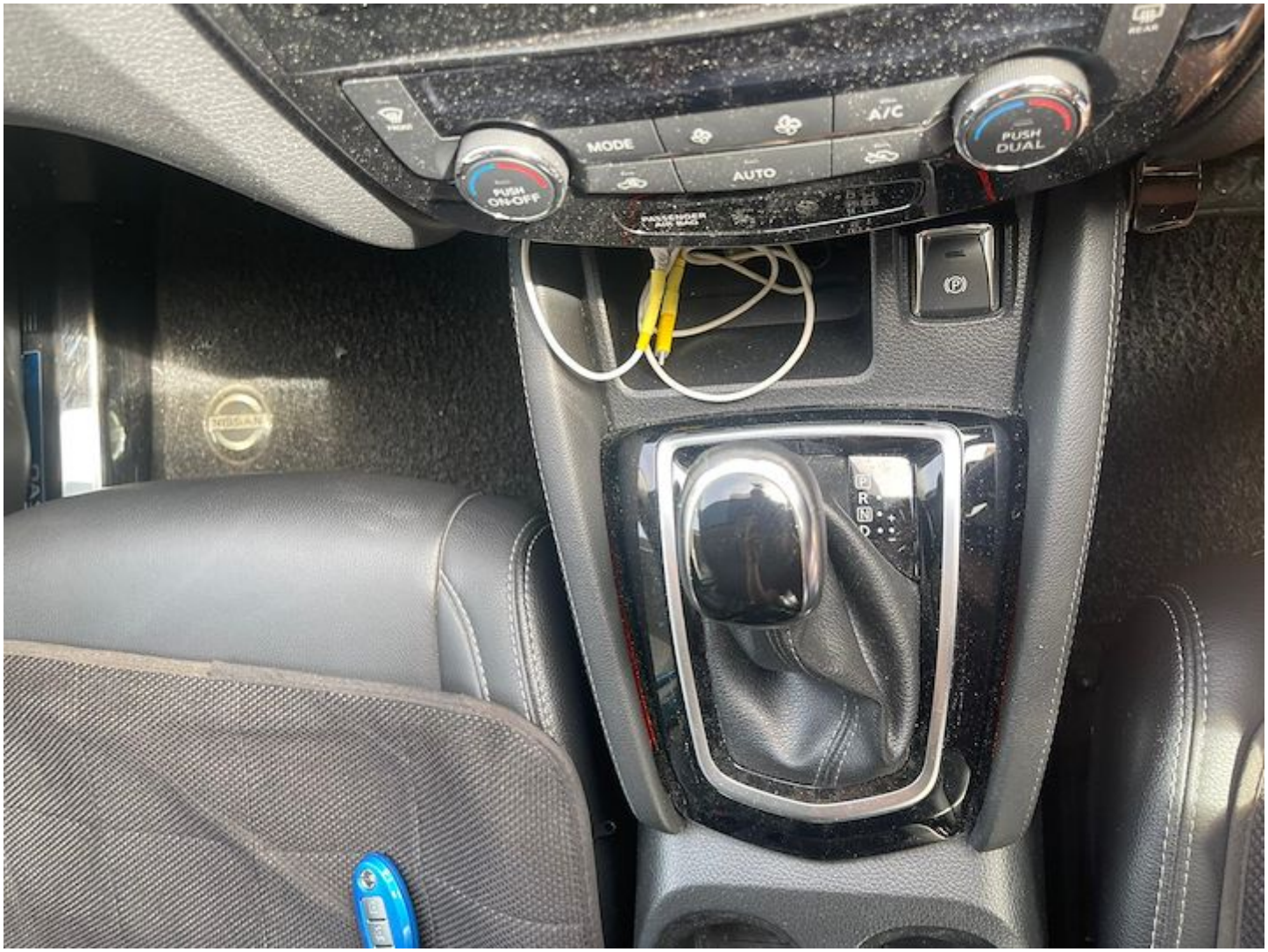
IMAGES #3

IMAGES #4

IMAGES #5


NISSAN
SJNFEAJ11U2233575
1790 kg
2790 kg
1- 965 kg
2- 875 kg
Type FEAJ11 Colour, Trim RCA G
Model FRLARDWJ11USA--A--
TIRE PRESSURE
PRESIÓN DEL NEUMÁTICO
TABELA DE PRESSÃO DOS PNEUS
PRESSION DU PNEU
REIFENLUFTDRUCK
kPa (bar)
(psi)
1-3

IMAGES #6



IMAGES #7

IMAGES #8

IMAGES #9

SINGAPORE POLICE FORCE

T/20230506/2080

Report No: T/20230506/2080

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
06/05/2023 19:53		42

Informant's Particulars

Name of Informant: TEO SUNNY			Address: APT BLK 364 TAMPINES STREET 34 #08-125 SINGAPORE 520364
ID Type / ID No.: NRIC NO / S8030818C			Contact No.: Home/Office: Mobile: 93266215
Nationality: SINGAPORE CITIZEN			Email:
Sex: Male	Age: 42	Date of Birth: 02/10/1980	Type of Informant: Driver
Race: Chinese			Language:
Occupation: aircraft technician			Driving Licence Information: Class: 3 Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 06/05/2023 17:30	Type of Location: X-Junction
Location: TAMPINES AVENUE 4				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FY462Y	Motorcycle	HONDA	PHANTOM200M	Blue		0
SLZ5332E	Car	NISSAN	QASHQAI 1.2 DIG-T CVT	Blue		1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

SINGAPORE POLICE FORCE

T/20230506/2080

2 of 3

Report No. T/20230506/2080

Police Station Of Origin
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No. 1800-5872000

CONTINUATION OF REPORT

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLZ5332L	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800049539-04	08/05/2022	07/05/2023

Details of Person Involved

Any Pedestrian Involved: No
No. of Pedestrians Injured: Nil | Use of Pedestrian Crossing: NA

Driver

Name	TEO SUNNY	ID No.	S8030818C
Related Vehicle	SLZ5332E (Car)	Contact No.	93266215
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.
On the 06/05/2023 at about 1750hrs, I was driving my vehicle bearing the plate no. SLZ5332E along Tampines Avenue 4, while I was at the junction, before turning into Tampines Central 1, a motorcycle bearing the plate no.FY462Y suddenly came into my lane and stopped completely when the lights were in our favor. His actions caused me to hit onto his right side of the vehicle. I tried to signal him to stop and exchange particulars, but he carried on riding off.

SINGAPORE
POLICE FORCE

Police Station Of Origin
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

CONTINUATION OF REPORT

3 of 3
Report No: [redacted]

Signature of Officer Recording The Report: G / SGT 2 LIM YE ZHAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/05/2023 19:53
Officer In Charge Of Case: TP / GIA / SSI TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:

NP168

GENERAL INSURANCE ASSOCIATION
RECORD MANAGEMENT CENTRE

IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN0823580003 Vehicle Registration No: SLZ5332E

Name (as shown in NRIC): Teo Sunny (ZHANG SUNNY) NRIC/FIN/Passport No: SXXXX818C

(*Vehicle Driver/Policyholder) (*) Please delete as appropriate

Address: Singapore ( )

Contact (Tel): Mobile No.: 93266X15

Email Address:

Date of Accident: 06/05/2023 Time of Accident: 17:50

Place of Accident: TAMPINES AVE 4

Insurance Company: AIG

(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:

POLICY NUMBER T. 1800049X30-04

Policyholder / Actual Driver's Signature
Date:

15/05/2023
Reporting Centre Personnel's Signature
Name (as in NRIC/ID card):
Date: