

## 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 .....	08/06/2023 12:28 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	07/06/2023 12:10 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	KEONGSIAK ROAD (CARPARK-PARALLEL)
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SGP3316C
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	CHENG TOH CHIANG KELVIN TRITON
NRIC No .....	S7243756Z
Email Address .....	CYKLON@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-85221222
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Corolla
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 .....	1987

#### INSURANCE COMPANY

Name of Insurance Company .....	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number .....	7230046217

#### DRIVER

Name of Driver .....	CHENG TOH CHIANG KELVIN TRITON
NRIC No .....	S7243756Z
Date Of Birth .....	20/11/1972
Occupation .....	Indoor

Date Of Driving Pass .....	13/12/1993
Driving experience .....	29 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-85221222
Alt. Phone Number .....	-
Email Address .....	CYKLON@HOTMAIL.COM
Address .....	302A JOO CHIAT ROAD
Address complement .....	-
Postcode .....	427553
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) .....	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? .....	Yes
Police Station Name .....	Mountbatten Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18003449999
Alt. Police Station Phone No .....	(Fax) +65-64474185
Police Station Address .....	Blk 60 Dakota Crescent #01-213/ 215 Singapore 390060
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### 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 .....	SKT3232S
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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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:

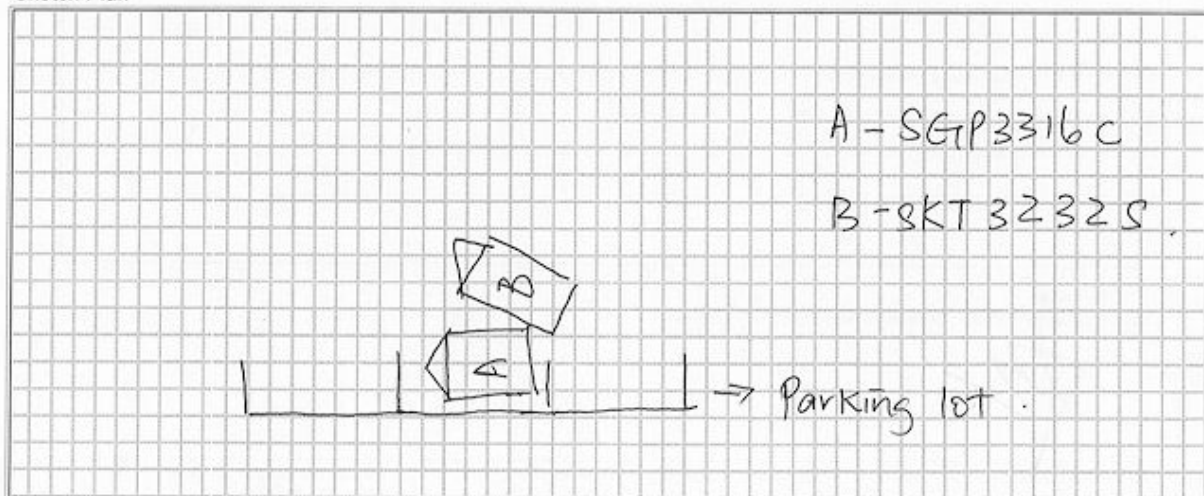
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

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



Describe Circumstance of the Accident

refer police report .

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

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































**SINGAPORE  
POLICE FORCE**



T/20230607/2059

Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

1 of 3

Report No. T/20230607/2059

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 07/06/2023 15:31	Vide Report No.:	Station Diary No.: 20
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**Informant's Particulars**

Name of Informant: CHENG TOH CHIANG KELVIN TRITON			Address: 302A JOO CHIAT ROAD SINGAPORE 427553		
ID Type / ID No.: NRIC NO / S7243756Z			Contact No.: Home/Office: Mobile: 85221222		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 50	Date of Birth: 20/11/1972	Type of Informant: Vehicle Owner		
Race: Chinese			Language:		
Occupation: MANAGER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/06/2023 12:05	Type of Location: Car Park
Location:  KEONG SAIK ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGP3316C	Car				Slightly Damaged	0

**Details of Person Involved**

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



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T/20230607/2059

Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

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Report No. T/20230607/2059

**CONTINUATION OF REPORT**

Vehicle Owner			
Name	CHENG TOH CHIANG KELVIN TRITON		ID No. S7243756Z
Related Vehicle	SGP3316C (Car)		Contact No. 85221222
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,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 07/06/2023 at about 1145hrs, I parked my vehicle at the said location. Shortly after, at about 1230hrs, I came back to my vehicle and found damages at the rear right of my vehicle bearing SGP3316C.

Following that, I made a check on my in-car camera and discovered a vehicle bearing SKT3232S hit on to my rear right side, the incident occurred at about 1205hrs - 1210hrs. The other party's female driver subsequently went out of her vehicle to make a check on both our vehicles exterior, she relocated her vehicle to another parallel lot behind her lot and drove off. I was not able to meet up with the other party's driver.

I affirmed that no one was in my vehicle and no was injured. There's no note on my windscreen or dashboard. I wish to state that I have the footages and SD card to support my claims.



**SINGAPORE  
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T/20230607/2059

Police Station Of Origin:  
Mountbatten NPP  
60 Dakota Crescent #01-213 SINGAPORE  
390060  
Tel No: 1800-3449999

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Report No. T/20230607/2059

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:  
G /  
SGT 2 MUHAMMAD SUFFIYAN  
BIN SAFFII

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
SR STAFF SGT RASHIDAH BINTE AZMAN  
Contact No.: 65476902

Signature Of Informant:

Date/Time:  
07/06/2023 15:31

Classification Of Case:

NP168