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.

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 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 26/06/2023 16:50 (SGT) Reported by **Actual Driver** Date of Accident 23/06/2023 14:35 (SGT) Exact Location of Accident Singapore Additional Location Information CARPARK LOT OF UPPER PAYA LEBAR ROAD Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SLG2889K INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner ASIA CAR LEASING PTE LTD Company Reg No 2XXXXX397C Email Address gwen@asiacarrental.com.sg Mobile Phone No (Phone) +65-62828585 Alternative Phone No VEHICLE PARTICULARS Manufacturer Toyota Model Camry Variant Exact purpose for which vehicle was being used at time of accident **Employment** Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1998 **INSURANCE COMPANY** Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.

7990000052-01 / 1210001294-01

NG LI MIN

SXXXX880Z

09/04/1993

Indoor

Policy Number / Cover Note Number

DRIVER

NRIC No

Name of Driver

Date Of Birth

Occupation

Date Of Driving Pass 09/05/2013 Driving experience 10 YEARS AND 1 MONTH Gender Female Mobile Number (Phone) +65-81834993 Alt. Phone Number Email Address gwen@asiacarrental.com.sg Address 131B LORONG 1 TOA PAYOH Address complement # 13-538 Postcode 312131 Is the driver the policyholder? If No, Relationship of the Driver with the Insured **OWNER'S DAUGHTER** Does Driver Own Other Vehicles? 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 Hit and run / Vandalism / Damaged whilst parked Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No 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? 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 Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230623/7065 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 SNJ2249T 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

IMPORTANT NOTICE

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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.

- 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.
- 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.

SING A

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Narge as in NRICTID card)

A=SLG12889K

B=SNJ2249T

A

Carpark lot along

Upper Raya Lebar Road

1

escribe Circumstance of the Acci	dent	
		/
	Refer to Police Report	
-		
Po	slice Report No: 7/20230623/7065	
eclaration		
We declare the foregoing particulars	s are true in every respect.	
S S S S S S S S S S S S S S S S S S S		
(5)	day MI	1
olicyholder's Signature / Date & Time	Driver's Signature (if driver is not the policyholder) / Date Winessed by Reporting Centre Personnel	120

2



T/20230623/7065

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

2 of 3 Report No. T/20230623/7065

CONTINUATION OF REPORT

Details of Perso	n Involved							
Any Pedestrian I	nvolved: No							
	No. of Pedestrians Injured: NIL Use of				of Pedestrian Crossing: NA			
Vehicle is leased					0,000	g. 147 t		
Name	NG LI MIN			ID No.		S9312880Z		
Related Vehicle	NIL			Contac	t No.	81834993		
Hospital/Clinic	NIL			Class of Driving Licence Expiry	M.	Class: NIL Date of Expiry: NIL		
Date	NIL		Date	-	NIL			
No. of Days gran	ted Medical Leave	NIL	Degree of					

Brief Details.

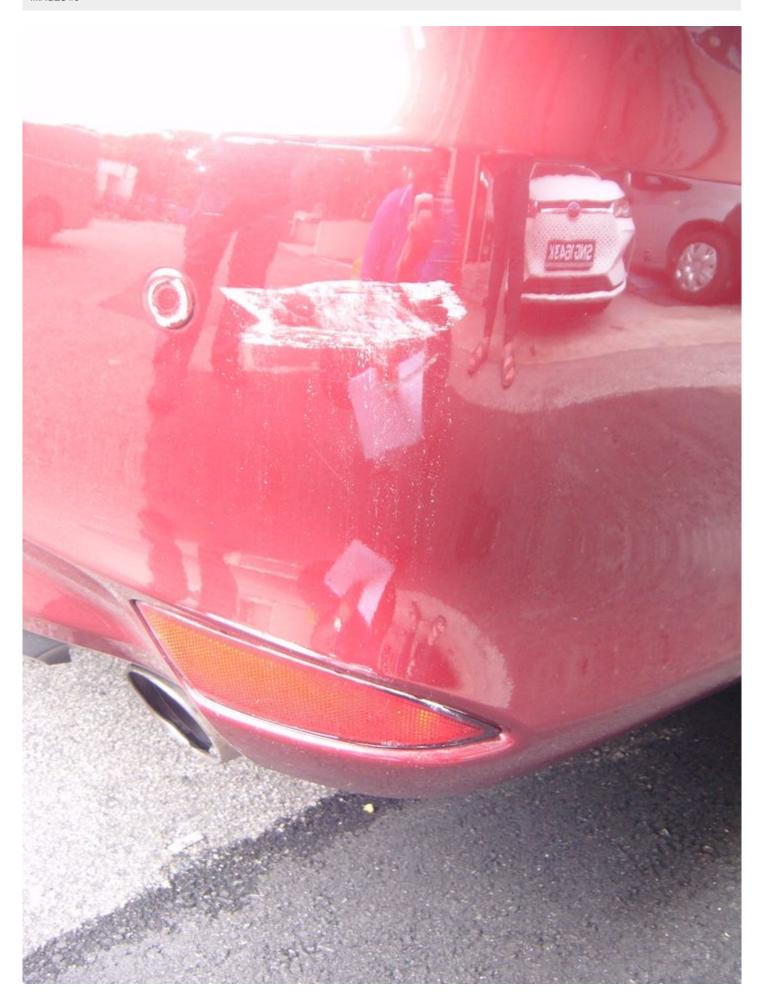
My leased vehicle, SLG2889K was parked in the car park lot along Upper Paya Lebar Road. At around 2.35PM, a Hyundai Avante, SNJ2249T (Getgo car) was seen exiting his lot from behind my parked car, causing damages to the right back side of my car. Driver did not stop or leave any contact and just drove off. Video was captured by CCTV that belongs to Asia Car Leasing Pte Ltd at 167 Upper Paya Lebar Road. Please get in touch with me for the video recording.

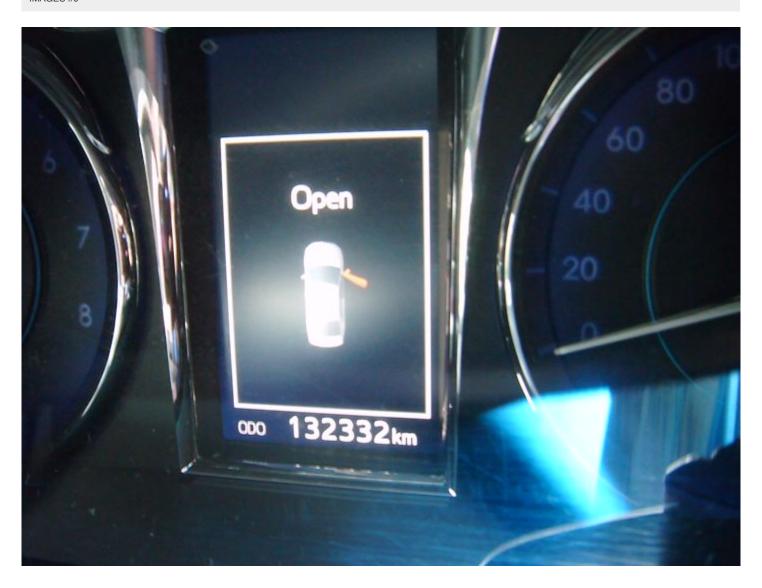


















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20230623/7065

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/06/2023 17:50		Made:	Vide Report No.:	Station Diary No.:
Informan	t's Partic	ulars		
Name of Informant: Address: NG LI MIN 131B LORONG 1 TOA PAYOH #13-538 SINGAPO			YOH #13-538 SINGAPORE 312131	
ID Type / ID No.: NRIC NO / S9312880Z			Contact No.: Home/Office:	Mobile: 81834993
Nationality SINGAPO		EN	Email: NGLIMIN.NLM@GMAIL.CO	
Sex: Age: Date of Birth: Female 30 09/04/1993			Type of Informant: Vehicle is leased	
Race: Chinese		W	Language: English	
Occupation: Sales manager			Driving Licence Information Class:	: Date of Expiry:

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 23/06/2023 14:35	Type of Location: Car Park	
Location: UPPER PAYA Weather: Clear	A LEBAR ROAD	Road Surface: Dry			
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Light	
		Not Controlled		Light	

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
SLG2889K	Car	ТОУОТА	CAMRY	Red	Slightly Damaged	0
SNJ2249T	Car	HYUNDAI	AVANTE			0



T/20230623/7065

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

2 of 3 Report No. T/20230623/7065

CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian			Use of Pe	edestriar	Cross	sing: NA
Vehicle is leased					. 0.000	
Name	NG LI MIN			ID No		S9312880Z
Related Vehicle	NIL			Conta	ict No.	81834993
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f	NIL	

Brief Details.

My leased vehicle, SLG2889K was parked in the car park lot along Upper Paya Lebar Road. At around 2.35PM, a Hyundai Avante, SNJ2249T (Getgo car) was seen exiting his lot from behind my parked car, causing damages to the right back side of my car. Driver did not stop or leave any contact and just drove off. Video was captured by CCTV that belongs to Asia Car Leasing Pte Ltd at 167 Upper Paya Lebar Road. Please get in touch with me for the video recording.



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



3 of 3

Report No. T/20230623/7065

CONTINUATION OF REPORT

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: 23/06/2023 17:50
Officer In Charge Of Case: TP / TPIB / RASHIDAH BINTE AZMAN Contact No.: 65476902	Classification Of Case:
NP168	