

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	29/05/2023 12:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	28/05/2023 13:55 (SGT)
Exact Location of Accident	Upper Serangoon Rd, Singapore
Additional Location Information	Upper Serangoon Road after Bidadari Park Drive at U-turn before Woodleigh Close
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFE9559Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Choy Hong Yeen
NRIC No	S6817136I
Email Address	Stevenchoyhy@yahoo.com.sg
Mobile Phone No	(Phone) +65-96426868
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q2
Variant	Audi Q2 1.0 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 your vehicle?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	999

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1900116590-01

DRIVER

Name of Driver	Choy Hong Yeen
NRIC No	S6817136I
Date Of Birth	17/04/1968

Occupation	Indoor
Date Of Driving Pass	05/01/2004
Driving experience	19 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96426868
Alt. Phone Number	-
Email Address	Stevenchoyhy@yahoo.com.sg
Address	12 Woodleigh Close #10-15
Address complement	-
Postcode	357907
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	Tan Hong Yock
Gender	Female

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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to Traffic Police Report.

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	FBL8353S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Black
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBL8353S
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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

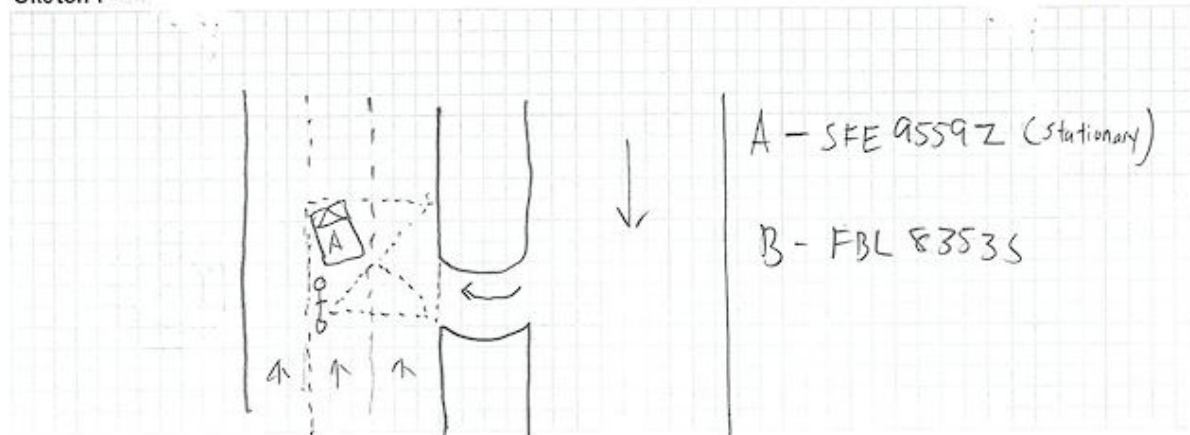
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Chng 29/5/23
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel *Jay Fong*

Sketch Plan



Describe Circumstances of the Accident

Please refer to Traffic Police Report.

Declaration

We declare the foregoing particulars are true in every respect.

[Signature] 29/1/23
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel *Tony Peary*



















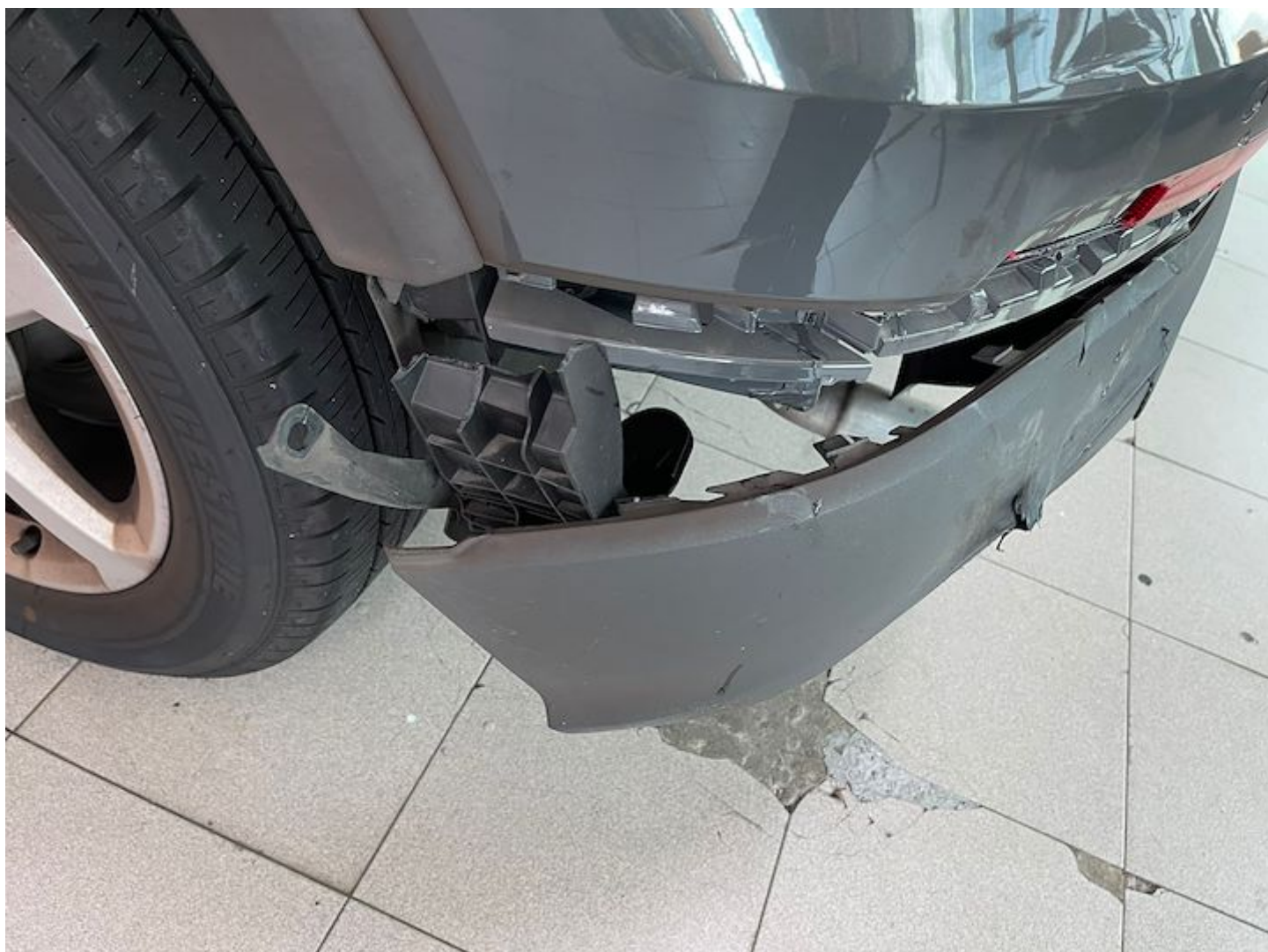


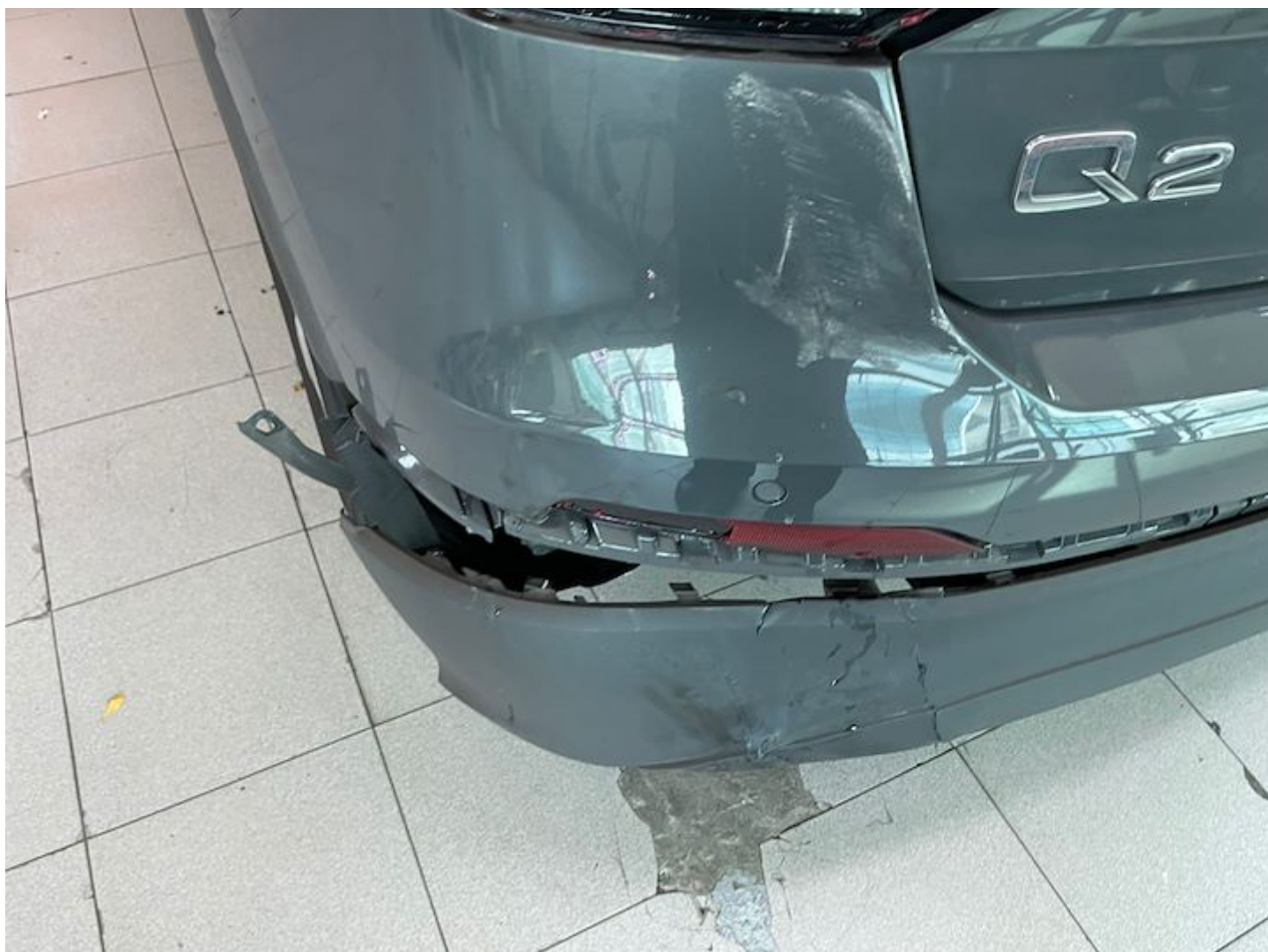














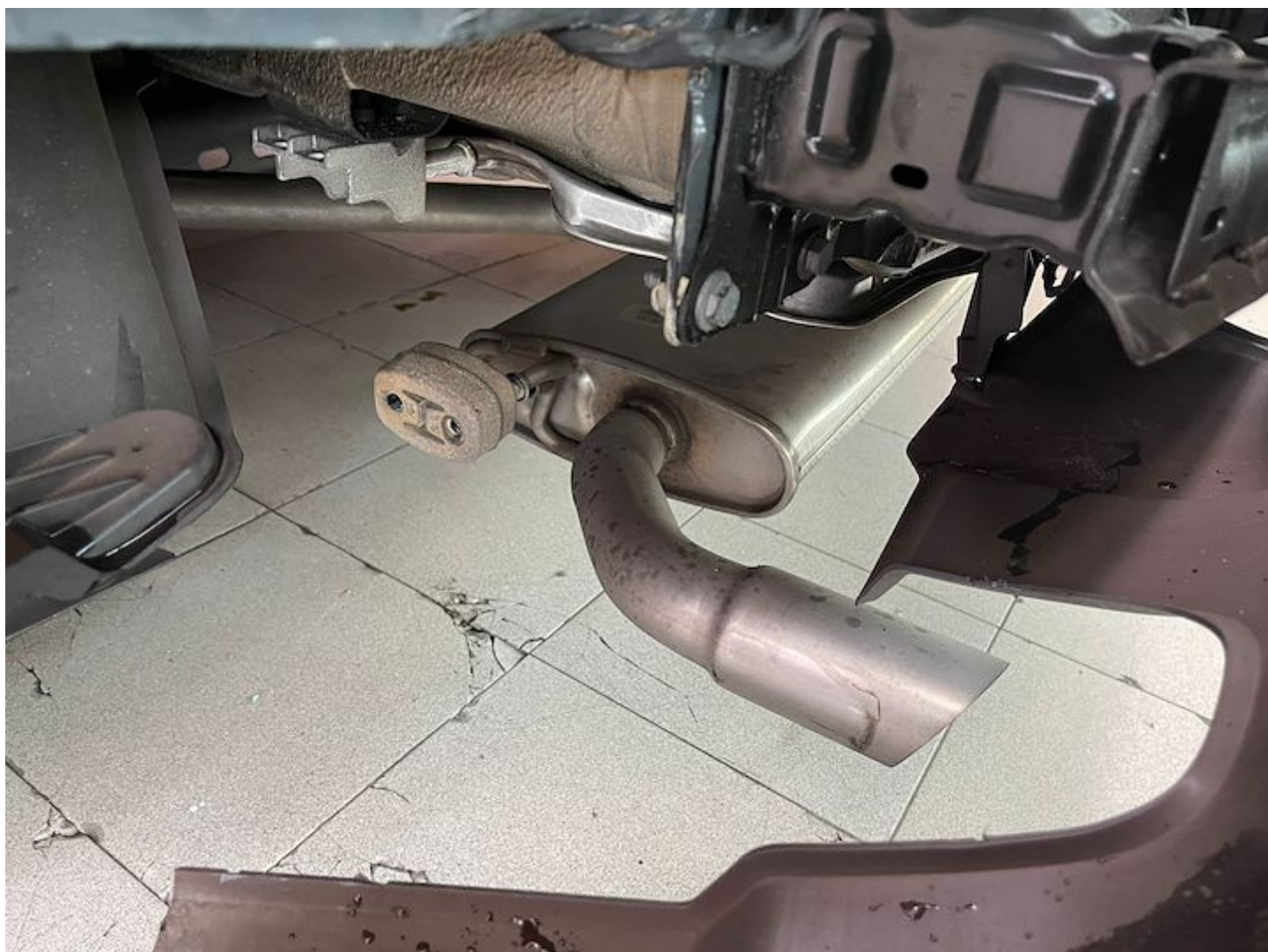
















**SINGAPORE
POLICE FORCE**



T/20230528/7038

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

1 of 3
Report No. T/20230528/7038

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/05/2023 17:19	Vide Report No.: E/20230528/0113	Station Diary No.:
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Informant's Particulars

Name of Informant: CHOY HONG YEEN			Address: 12 WOODLEIGH CLOSE #10-15 SINGAPORE 357907		
ID Type / ID No.: NRIC NO / S6817136I			Contact No.: Home/Office: Mobile: 96426868		
Nationality: SINGAPORE CITIZEN			Email: STEVENCHOYHY@YAHOO.COM.SG		
Sex: Male	Age: 55	Date of Birth: 17/04/1968	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Retiree			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 28/05/2023 13:55	Type of Location: Yellow box junction after u-turn
Location: BIDADARI PARK DRIVE				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBL8353S	Motorcycle			Black		0
SFE9559Z	Car	AUDI	Q2 1.0 TFSI S TRONIC	Grey		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20230528/7038

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

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Report No. T/20230528/7038

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFE9559Z	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900116590-01	11/07/2021	10/07/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	Unknown Rider		ID No.	NIL
Related Vehicle	FBL8353S (Motorcycle)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	Slight
Driver				
Name	CHOY HONG YEEN		ID No.	S6817136I
Related Vehicle	SFE9559Z (Car)		Contact No.	96426868
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

Pls refer to map above. I was driving along upp serangoon road towards potong pasir MRT station. As all vehicles at the opposite side have stopped at the traffic light (after Bidadari Park Drive), I slowed down to make a u-turn (before woodleigh close) to the opp road towards woodleigh close. There is a big yellow box junction just after the u-turn. As i was making the u-turn, the vehicles at the traffic light have just started to move. As there was a motorcycle moving quite fast on the first lane (next to pavement), i stopped at the yellow box junction on the second lane to let it pass. After i stopped and the motorcycle went pass me, another motorcycle hit my car at the rear on the second lane. The back of the car was damaged (see photo). The motorcycle and the rider fell at the yellow box junction (see photo). The front of the motorcycle was damaged (see photo). An ambulance was called as the rider's hand was swollen. No other injuries. Rider was able to walk to the ambulance after his hand was bandaged by the medic. The photos taken are attached.



SINGAPORE
POLICE FORCE



T/20230528/7038

3 of 3

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

Report No. T/20230528/7038

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD RAIMIE BIN ABDUL KARIM
Contact No.: 65476437

Signature Of Informant:

The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
28/05/2023 17:19

Classification Of Case:

NP168