

REF:

CS3/SM024/20335/Amp3

## ASSIGNMENT

From: \_\_\_\_\_ Date: \_\_\_\_\_

Estn: \_\_\_\_\_

OD / TP RES / CD RES / EVA / INV / MVTo in Vehicle No: \_\_\_\_\_at Work / Home / Other

of \_\_\_\_\_

Insured: \_\_\_\_\_

Policy No: \_\_\_\_\_

Claims No: \_\_\_\_\_

Sum Insured: \_\_\_\_\_ Excess: \_\_\_\_\_

(Client's Record)

Make of Vehicle: \_\_\_\_\_

(Policy Condition)

Remarks: Vehicle had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: \_\_\_\_\_

IDAC Accident Report: \_\_\_\_\_ Consistent? : Yes or No

GIA / PR Seen: \_\_\_\_\_ Consistent? : Yes or No

Est. Repairs: \_\_\_\_\_ days Res.: Yes or No

Lum Sum: \_\_\_\_\_ % 3 Val: Yes or No

CA / REV / REP. / 24 HRS

Date: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Vehicle: IN / OUT

Veh No: SGK6243K Yr Regn: 2006, AugustType: M. Car / M. Cycle / Bus / Van / Lorry / Taxi / Prime Mover /

Truck / Trailer or

Make: Toyota Vios CD 1497Colour: Grey A/C: Insured / Std / NI / NASp. Reading: 233065 T/Radio: Insured / Std / NI / NA

Eng/No: \_\_\_\_\_

C/No: MR053H Y4204200006Gen. Cond: Good / Fair / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or

Brake: In order / Jammed / Leaked / Burnt or

Mod: Nil / S/Rim / STD A/Rim or

Tyre Size: F: 175/70R14R: 175/70R14

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or

Front

R/Bal. 06 mm

Rear

R/Bal. 06 mmL/Bal. 06 mmL/Bal. 06 mm

D.O.A. \_\_\_\_\_

D.O.I. 03/01/25Survey held at Elite Auto Restoration

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

Front N/S, u/c

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	<u>TP Sampo (PRS)</u>
	<u>COE Expiry: 30/06/2026</u>
	<u># 2000 - # 3000</u>
	<u>Estimate given during: Yes ( )</u>
	<u>1st Survey: No ( )</u>
	<u>MV: 14K</u>
	<u>PV: 7K</u>
	<u>Nett: 7K</u>

Date/Time, File Pass to?

☐ : Prel. Report

1)

Date/Time, File Return to?

☐ : Final Report

2)

Days Of Repair: 4

Resurvey No. of Trip: \_\_\_\_\_

Add Fee: ☐ : Site Insp (\$)☐ : Interview (\$)☐ : Tech. Invt (\$)

Survey Fee:

Transportation:

3 + RS 31

Photos

Others

Report Format:

1. Report 2. Form 3. P.P. 4. C.P.

## 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 First Submission	18/12/2024 15:02 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	16/12/2024 18:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	In front of Katong 112, Joo Chiat Road
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK6243K
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Goh Thye Hock
NRIC No	SXXXX664E
Email Address	thyesin8@gmail.com
Mobile Phone No	(Phone) +65-93802946
Alternative Phone No	-

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vios
Variant	Vios
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	1400
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

### INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MT 01072236

### DRIVER

Name of Driver	Goh Thye Hock
NRIC No	SXXXX664E
Date Of Birth	22/03/1971
Occupation	Outdoor
Driving Pass Date	02/08/1991
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	33 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93802946
Alt. Phone Number	-
Email Address	thyesin8@gmail.com
Address	Blk 33 Marine Crescent #15-93
Address complement	-
Postcode	440033
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 - Change/cross lane
Weather Conditions	Raining
Road Surface	Wet

#### 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	Marine Parade Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004428999
Alt. Police Station Phone No	(Fax) +65-62447678
Police Station Address	300 Marine Parade Road Singapore 449296
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

Report refer police report

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	Video file to big

# DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMY2772G
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**

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:

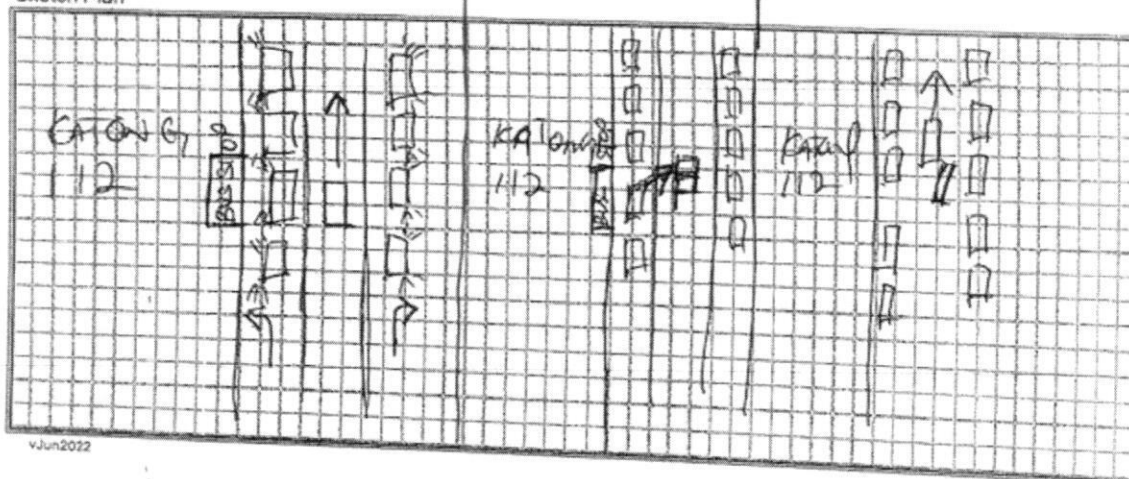
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

Policyholder's Signature / Date & Time

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

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

Sketch Plan




vJun2022

Describe Circumstance of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.

 18/12/24

Policyholder's Signature / Date & Time

Actual 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/20241217/2081

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

1 of 3

Report No. T/20241217/2081

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 17/12/2024 17:02	Vide Report No.:	Station Diary No.: 22
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**Informant's Particulars**

Name of Informant: GOH THYE HOCK			Address: 33 MARINE CRESCENT #15-93 SINGAPORE 440033		
ID Type / ID No.: NRIC NO / S7109664E			Contact No.: Home/Office: Mobile: 93802946		
Nationality: SINGAPORE CITIZEN			Email: thyesin8@gmail.com		
Sex: Male	Age: 53	Date of Birth: 22/03/1971	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Private Yacht Captain			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/12/2024 18:00	Type of Location: X-Junction
Location:  JOO CHIAT ROAD				
Weather: Drizzling		Road Surface: Wet		
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGK6243K	Motor car	TOYOTA	Vios	Silver	Slightly Damaged	1
SMY2772G	Motor car	BMW	318i			0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMY2772G	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/01072236	21/08/2024	20/08/2025



**SINGAPORE  
POLICE FORCE**



T/20241217/2081

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

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Report No. T/20241217/2081

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GOH THYE HOCK	ID No.	S7109664E
Related Vehicle	SGK6243K (Motor car)	Contact No.	93802946
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On 16 December 2024 at about 1800hrs, I was driving my vehicle bearing vehicle registration number SGK6243K (Silver Toyota Vios) along Joo Chiat Road towards Koon Seng Road.

I was travelling on the centre of the three-lane road along Joo Chiat Road (i12 Katong Shopping Centre was on my left) whereby the centre lane was meant to drive straight ahead. As I was approaching the junction of Joo Chiat Road and East Coast Road, there was a vehicle that was on my left did an abrupt lane change to the lane that I was driving at. Due to the lane change without due care, the front right side of the said vehicle had collided against the front left portion of my vehicle.

The said driver did not stop and continue to drive straight ahead towards Koon Seng Road even though, I honked at the driver once to alert the driver. I tried to lookout for the vehicle involved along Joo Chiat Road but to no avail.

During that point of time, my wife was seated on the front left passenger seat. No one was injured and I did not call for the Traffic Police for assistance.

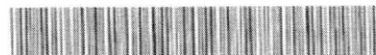
Due to the collision, the front left portion of my vehicle was damaged.

I wish to state that I have an in-car camera and the whole incident was captured in my footage.





**SINGAPORE  
POLICE FORCE**



T/20241217/2081

3 of 3

Police Station Of Origin:  
Marine Parade N.P.C  
300 Marine Parade Road SINGAPORE  
449296  
Tel No: 1800-4428999

Report No. T/20241217/2081

## CONTINUATION OF REPORT

Signature of Officer Recording The  
G /  
SI FARIDAH BINTE ABU BAKAR

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
SR STAFF SGT NEO ZHI YUAN  
Contact No.: 65476079

NP168

Signature Of Informant:

Date/Time:  
17/12/2024 17:02

Classification Of Case: