

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	03/07/2024 16:17 (SGT)
Reported by	Actual Driver
Date of Accident	02/07/2024 21:07 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Outside 36 Eastwood Terrace Singapore 486504
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND960S
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Ghoh Chee Yee Bernard
NRIC No	S1807133I
Email Address	Valerieghoh@gmail.com
Mobile Phone No	(Phone) +65-97855555
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	CN7 AVANTE
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	1598

INSURANCE COMPANY

Name of Insurance Company	FWD Singapore Pte. Ltd.
Policy Number / Cover Note Number	PNPV2022-00002361-01

DRIVER

Name of Driver	Valerie Ghoh Jing Yi
NRIC No	S9720877H
Date Of Birth	17/06/1997
Occupation	Indoor

Driving Pass Date	19/12/2015
Driving experience	8 YEARS AND 7 MONTHS
Gender	Female
Mobile Number	(Phone) +65-87686701
Alt. Phone Number	-
Email Address	Valerieghoh@gmail.com
Address	36 Eastwood Terrace
Address complement	-
Postcode	486504
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	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	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)	0
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?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to police report no. T/20240703/7001

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	SHC3032C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
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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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.

Enoh
Policyholder's Signature / Date & Time

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

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

Sketch Plan

36 Eastwood Terrace

A = SND960S
B = SHC 3032C

Describe Circumstance of the Accident

Refer to Police Report

T/20240703/7001

Declaration

I/We declare the foregoing particulars are true in every respect.

Enon

Policyholder's Signature / Date & Time

[Signature]

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

[Signature]

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









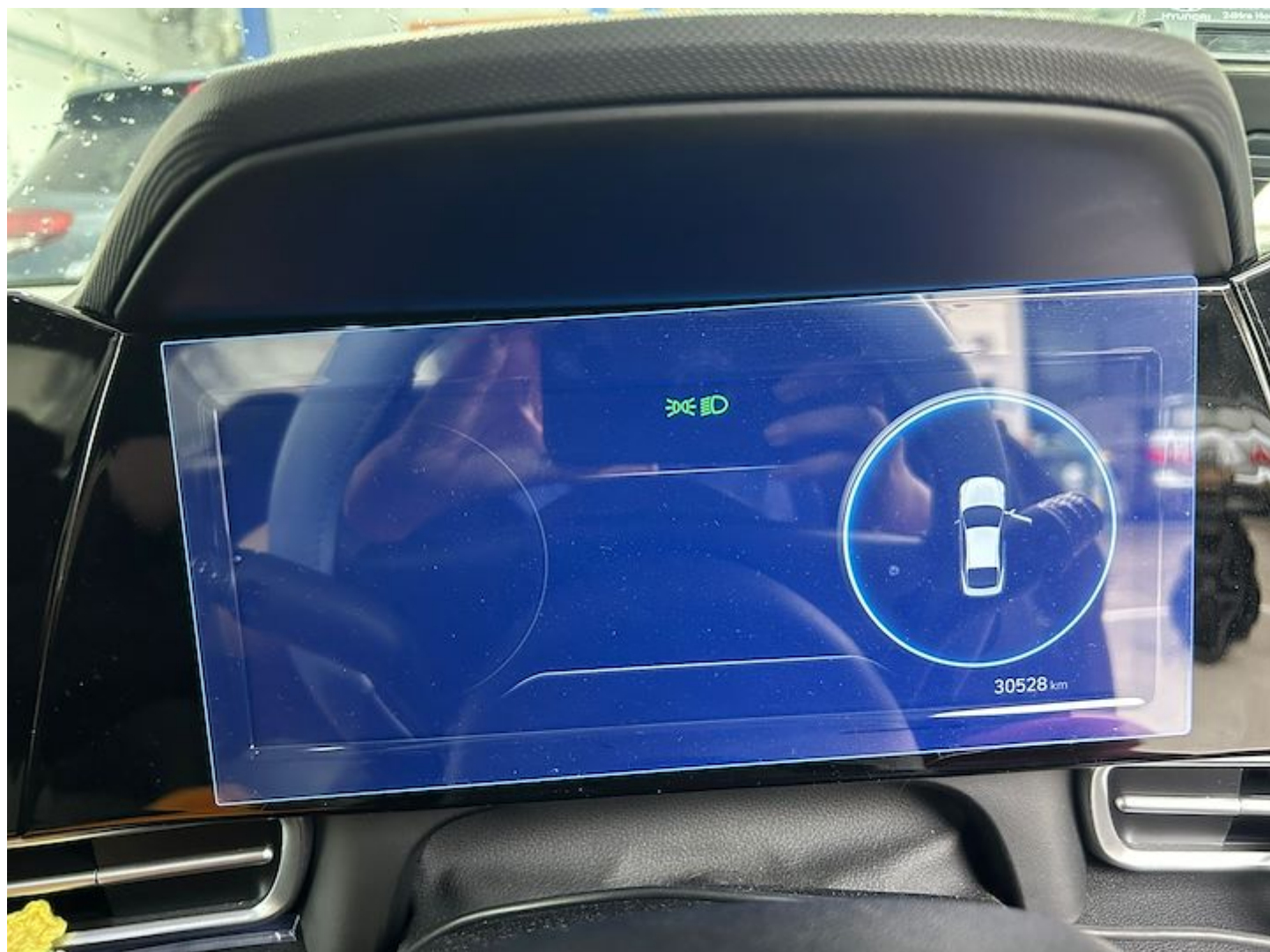


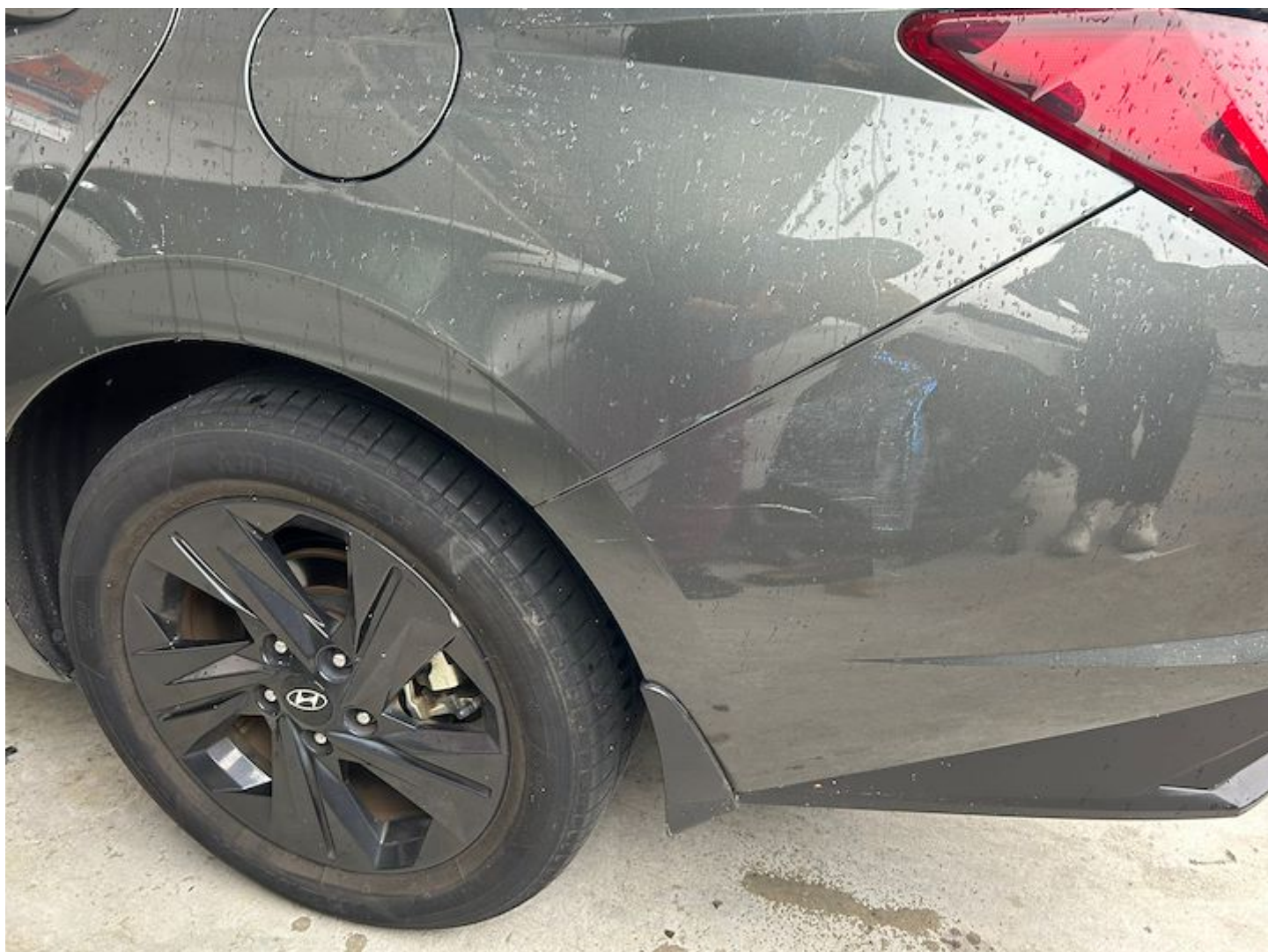














SINGAPORE POLICE FORCE



T/20240703/7001

1 of 3

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

Report No. T/20240703/7001

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/07/2024 00:14		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: VALERIE GHOSH JING YI			Address: 36 EASTWOOD TERRACE SINGAPORE 486504		
ID Type / ID No.: NRIC NO / S9720877H			Contact No.: Home/Office: Mobile: 87686701		
Nationality: SINGAPORE CITIZEN			Email: VALERIEGHOSH@GMAIL.COM		
Sex: Female	Age:	Date of Birth: 17/06/1997	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		
Occupation: Other administration professionals			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/07/2024 21:05	Type of Location: T-Junction
Location: EASTWOOD TERRACE				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
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
SHC3032C	Motor car		AE IONIQ HEV 1.6 DCT	Blue		0
SND960S	Motor car	HYUNDAI	AVANTE CN7	Grey	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SND960S	FWD SINGAPORE PTE. LTD.	PNPV2022- 00002361-01	22/10/2023	21/10/2024



**SINGAPORE
POLICE FORCE**



T/20240703/7001

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

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Report No. T/20240703/7001

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	VALERIE GHOSH JING YI	ID No.	S9720877H
Related Vehicle	SND960S (Motor car)	Contact No.	87686701
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL

Brief Details.

My vehicle SND960S was parked outside my house when the hit and run accident occurred. According to the dashcam recording from a vehicle parked directly opposite, a blue colour comfort delgro taxi vehicle bearing license plate no. SHC3032C was doing a three point turn and reversed into the rear end of my car, causing damages. The taxi driver did not attempt to leave his contact details or alight from his vehicle to check the damages, the driver simply drove off. A passer-by witnessed the incident and recorded down the taxi driver's license plate number and informed me.

The dashcam video file is too large to be uploaded. You may message me at 8768 6701 if you require a copy of the recording.



**SINGAPORE
POLICE FORCE**

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



T/20240703/7001

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Report No. T/20240703/7001

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

NP168

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

Date/Time:
03/07/2024 00:14

Classification Of Case: