

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 Authorised 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 ability.
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 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 Report	27/09/2017 11:28
Date Of Accident	20/09/2017 07:45
Exact Location Of Accident	CAMBRIDGE VILLAGE CONDO - OPEN SPACED CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA6766L
Insured/Policyholder	
Name Of Registered Owner	STARHIGH ASIA. PACIFIC (PTE. LTD.)
Co Reg No	NA
Email Address	SANDY@STARHIGH.COM.SG
Mobile Phone No	(LOCAL) +65-86129091
Alternative Phone No	OFFICE-86129091

Vehicle Particulars

Manufacturer	BMW
Model	M6
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 28699848 MPC
Cover Note Number	

Driver

Name of Driver	LEE XIANZHENG JOSHUA
NRIC No	S8209310I
Date Of Birth	23/03/1982
Occupation	INDOOR
Date Of Driving Pass	27/09/2003
Driving Experience	13 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90263227
Fax Number	
Contact Number	
EMail Address	JOSHUALEEE@STARLD.COM

Address	BLK 466 PASIR RIS STREET 41 #09-38
Postcode	510466
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Was any body injured in the Accident?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	0

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KAMPONG JAVA NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 KAMPONG JAVA ROAD , POSTCODE: 228892 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2959999 - FAX NO: 63918499
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?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH6777K
Vehicle Make/Model/Colour	TAXI
Details Of Properties	
Name of Driver	PETER NEO KEE WEE
NRIC/Passport Number	S1522420G
Contact Number	97423885
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name

Phone Number

Email Address

Sketch Plan

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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

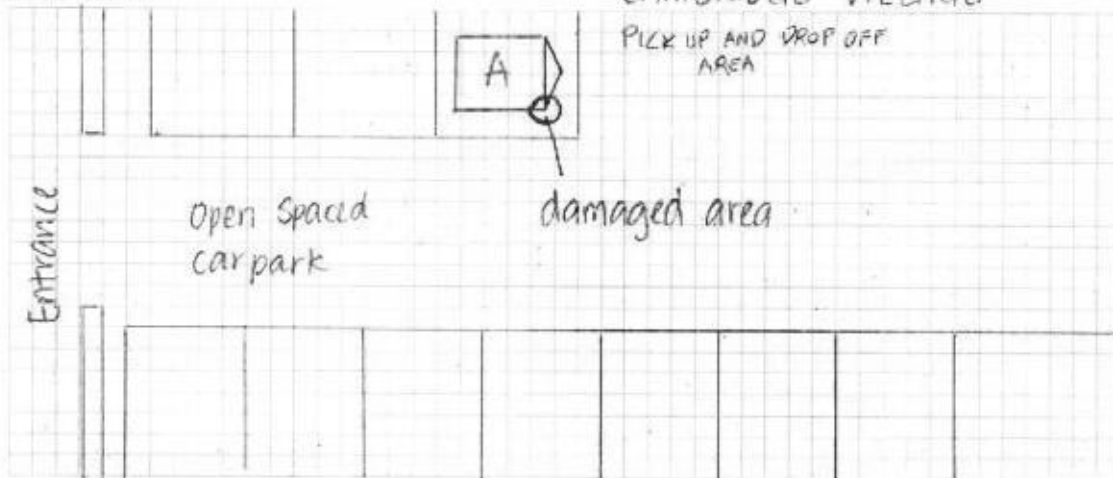
Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. E/20170920/2027

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:

Reporting Officer: Personnel's Signature
Name:
NRIC/FIN No.:

Common Statement



POLICE FORCE



E/20170920/2027

1 of 2

POLICE REPORT (NP299)

Report No. E/20170920/2027

Police Station Of Origin
Kampong Java N.P.C
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-2959999

Date/Time Report Made 20/09/2017 12:39		Vide Report No.		Station Diary No 199	
Name Of Informant NAN SANDY MYAT MOE		Address 2A CAMBRIDGE ROAD #03-01 CAMBRIDGE VILLAGE SINGAPORE 219679			
ID Type / ID No. FIN NO / G0787905P		Contact No. Home/Office Mobile 86129091			
Nationality MYANMAR		Email Address			
Occupation Housewife		Sex Female	Age 27	Date of Birth 26/06/1990	Race Burmese
Institution/School Name		Language			
Date/Time Of Incident 20/09/2017 08:00 - 20/09/2017 09:00		Location Of Incident 2A CAMBRIDGE ROAD CAMBRIDGE VILLAGE SINGAPORE 219679 OPEN SPACED PARKING AREA			

Brief details.

On the evening of 17/09/2017 (Sunday), my sister-in-law's husband assisted to park my husband's car (SLA6766L) at the visitor's lot at the open spaced car park within our condominium compound. My husband is SI THU PHYO (NRIC: S8271666A, HP: 98277645).

On 20/09/2017 (Wednesday) at about 7.45am, my domestic helper went to the car to vacuum its interior.

Signature Of Officer Recording The Report:

E / Staff Sgt NURSYAZRINA BINTE MOHAMMED
FEROZANSignature Of Interpreter:
Not applicableOfficer In-Charge Of Case:
E / Tanglin Police Divisional Investigation Branch /
Sgt 2 WONG KEE YONG
Contact No.: 63914731

Authentication Stamp

Signature Of Informant:

Date/Time:
20/09/2017 12:39

Classification Of Case:



Common Statement



**SINGAPORE
POLICE FORCE**



E/20170920/2027

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20170920/2027

At about 8am, the condominium security officer did his rounds and also walked by our car. Both of them affirmed that the car was still intact at that period of time. On the same day at about 9am, the said security officer called to inform me that he noticed damages on the car. He then told me that after doing his rounds, he left briefly to get a drink and when he returned to resume his rounds, he spotted the damages.

I made a check and noticed that the front right headlight was damaged and there are multiple light blue scratches around the headlight area. The front right side of the car, near to the front right wheel, is also damaged. I tried to check the in-car camera footages to see if it had captured the driver who hit the car, however it was low on battery. There are no CCTV cameras in the immediate vicinity of where the car was parked. There was a piece of paper left on the windscreen; however it was a torn piece of 'Coffee Bean' receipt with the name PETER NEO. No contact number or other details were indicated.

I am lodging this report to facilitate in insurance claims.

Signature Of Officer Recording The Report: E / Staff Sgt NURSYAZRINA BINTE MOHAMMED FEROZAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2017 12:39
Officer In-Charge Of Case: E / Tanglin Police Divisional Investigation Branch / Sgt 2 WONG KEE YONG Contact No.: 63914731	Classification Of Case:

Authentication Stamp

