

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 | 30/11/2017 09:32 |
| Date Of Accident | 08/10/2017 11:00 |
| Exact Location Of Accident | 421 TAGORE INDUSTRIAL AVE (TAGORE 8) |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------------|
| Vehicle Registration Number | PA6609K |
| Insured/Policyholder | |
| Name Of Registered Owner | LOONG EXPRESS SERVICES |
| Co Reg No | 53228074A |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-97960305 |

Vehicle Particulars

| | |
|------------------------------------------------------------------------------|----------------|
| Manufacturer | TOYOTA |
| Model | HIACE 2.5 M |
| Exact Purpose for which vehicle was being used at time of accident | WORKING |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | REPORTING ONLY |
| Vehicle Category | BUS |

Insurance Company

| | |
|---------------------------|----------------------------------------|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | THIRD PARTY FIRE AND/OR THEFT |
| Fleet Policy | NO |
| Policy Number | 5086218943 |
| Cover Note Number | - |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | CHEN WAN SIEW |
| NRIC No | S0106078C |
| Date Of Birth | 07/04/1952 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 13/12/2011 |
| Driving Experience | 5 YEARS AND 9 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-97960305 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |

| | |
|-----------------------------------------------------|-------------------------------|
| Address | BLK 576 HOUGANG AVE 4 #10-612 |
| Postcode | 530576 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|------------|
| Type Of Accident | SIDE SWIPE |
| 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) | 1 |

Details of Police Action

| | |
|-------------------------------------------|-------------------------------------------------------------------------------------|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | HOUGANG NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-4890999 - FAX NO: 63128989 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE 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 | SCF38A |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

Details of Witness

| | |
|--------------|--|
| Name | |
| Phone Number | |

Email Address

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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5. **Any false reporting may be referred to the Police for investigation.**
6. The 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 lodgment 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.
- (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.:

Accident Sketch Plan

SKETCH PLAN

Handwritten sketch plan on a grid background:

- A horizontal line represents a road.
- Below the line, a box labeled 'A' with a downward arrow indicates a vehicle.
- Above the line, a box labeled 'X' with a rightward arrow indicates a vehicle.
- An arrow points from box 'A' to box 'X' with the word "Reversed" written next to it.
- Below the road line, the text "421 Tagore Industrial Ave" is written.
- On the right side of the grid, the following text is written:
 - A = PA 6609K
 - B = SCF 38A
 - X = Lorry

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description box:

Please Refer to Police Report

The rest of the box is crossed out with a diagonal line.

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:

Handwritten signature of the driver.

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

Handwritten signature of the reporting centre personnel.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20171115/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No. T/20171115/2026

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--------------------------------------------|------------------|--------------------------|
| Date/Time Report Made: 15/11/2017 11:03 | Vide Report No.: | Station Diary No.: 46 |
|--------------------------------------------|------------------|--------------------------|

Informant's Particulars

| | | | | |
|------------------------------------------|------------|------------------------------|-------------------------------------------------------------------|----------------------------|
| Name of Informant: CHEN WAN SIEW | | | Address: APT BLK 576 HOUGANG AVENUE 4 #10-612 SINGAPORE 530576 | |
| ID Type / ID No.: NRIC NO / S0106078C | | | Contact No.: | Mobile: 97960305 |
| Nationality: SINGAPORE CITIZEN | | | Home/Office: | |
| | | | Email: | |
| Sex: Male | Age: 65 | Date of Birth: 07/04/1952 | Type of Informant: Driver | |
| Race: Chinese | | | Language: Mandarin | Institution / School Name: |
| Occupation: DRIVER | | | Driving Licence Information: Class: 2B,2A,2,3 | |
| | | | Date of Expiry: | |

General Information of the Accident

| | | | | |
|------------------------------------------------------------------------------------------------------|------------------------|------------------|-----------------------------------------|-------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 08/10/2017 11:00 | Type of Location: |
| Location: Along Road 1 TAGORE INDUSTRIAL AVENUE 421 Tagore Industrial Avenue (TAGORE 8) | | | | |
| Weather: | | Road Surface: | Road Speed Limit: | |
| Traffic Flow: | | Traffic Control: | Traffic Volume: | |
| Type of Collision: | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|-----------------------|------------------|-------|--------|---------------------|-----------------|
| PA6609K | Bus/Coach/Mi nibus | TOYOTA | HIACE | Silver | Slightly Damaged | 0 |
| SCF38A | Car | MERCEDES BENZ | | Black | | 0 |

Details of Person Involved

| | |
|---------------------------------|--------------------------------|
| Any Pedestrian Involved: No | |
| No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA |

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20171115/2026

2 of 3

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/20171115/2026

CONTINUATION OF REPORT

| Driver | | | |
|-----------------------------------|-----------------------------|----------------------------------------|-----------------------------------------|
| Name | CHEN WAN SIEW | ID No. | S0106078C |
| Related Vehicle | PA6609K (Bus/Coach/Minibus) | Contact No. | 97960305 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 2B,2A,2,3 Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 08/11/2017 at about 1100 hrs, I was reversing my silver Toyota Hiace minibus (PA6609K) from the car park lot number 13 and I felt an slight impact. I looked through my rear view mirror and saw my friend's lorry. As such, I did not alight to make a check. When I arrived home, I discovered a slight dent on the rear left side of my minibus.

Subsequently, I received a letter from Traffic Police (Ref: T/IP/57729/2017) informing that my vehicle was involved in an alleged hit and run accident with another vehicle SCF38A. I wish to state that I am not aware of the incident as I thought it involved my friend's lorry.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20171115/2026

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20171115/2026

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Sgt 2 YAP WEI YANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Sr Staff Sgt ESTHER CHONG

Contact No.: 65476368

Signature Of Informant:

Date/Time:

15/11/2017 11:03

Classification Of Case:

Authentication Stamp

NP158

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

