

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	19/12/2017 15:30
Date Of Accident	18/12/2017 22:00
Exact Location Of Accident	BLK 347A ANG MO KIO AVE 3 (MSCP DECK E LOT 195)
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	EH1998M
Insured/Policyholder	
Name Of Registered Owner	TAN LEONG HOCK SEBASTIAN(CHEN LIANGFU)
NRIC No	S8821862J
Email Address	SBTSEBASTIAN@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-83821998
Alternative Phone No	OTHERS-83821998
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER-1.5 MIVEC GLS 4A/T (A)
Exact Purpose for which vehicle was being used at time of accident	CAR WAS PARKED
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	PRIVATE CAR
Insurance Company	
Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3092991701
Cover Note Number	
Driver	
Name of Driver	TAN LEONG HOCK SEBASTIAN(CHEN LIANGFU)
NRIC No	S8821862J
Date Of Birth	20/06/1988
Occupation	INDOOR
Date Of Driving Pass	13/02/2008
Driving Experience	9 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83821998
Fax Number	
Contact Number	OTHERS-83821998
Email Address	SBTSEBASTIAN@HOTMAIL.COM

Address	BLK 472 CHOA CHU KANG AVENUE 3 #03-151
Postcode	680472
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20171219/7011

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	DARK BLUE MERCEDES
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

Sketch Plan

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 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 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. 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: 19 DEC 2017

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

19/12/2017
Reporting Centre Personnel's Signature
Name: ROSE WATERS
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

UNKNOWN CAR WAS PARKED
PLS REFER 2 VIDEO

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER 2 POLICE REPORT
7/20/7/219/2011

DECLARATION

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


Policyholder's Signature
Date & Time: 19 DEC 17

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


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

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20171219/7011

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

1 of 4

Report No. T/20171219/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2017 12:51		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: TAN LEONG HOCK, SEBASTIAN		Address: APT BLK 472 CHOA CHU KANG AVENUE 3 #03-151 SINGAPORE 680472	
ID Type / ID No.: NRIC NO / S8821862J		Contact No.: Home/Office: Mobile: 83821998	
Nationality: SINGAPORE CITIZEN		Email: SBTSEBASTIAN@HOTMAIL.COM	
Sex: Male	Age: 29	Date of Birth: 20/06/1988	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Company director		Driving Licence Information: Class: 2B,3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Drink & Drive	Drink Drive: Yes	Date/Time of Accident: 18/12/2017 22:00	Type of Location: Car Park
Location: ANG MO KIO AVENUE 3 Multi-Storey Carpark Deck E. My Car parked at Lot 195.			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Light	
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
EH1998M	Car	MITSUBISHI	LANCER 1.5 MIVEC GLS 4A/T	Grey		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
EH1998M	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN30929917 01	11/02/2017	10/02/2018

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20171219/7011

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

2 of 4

Report No. T/20171219/7011

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN LEONG HOCK, SEBASTIAN	ID No.	S8821862J
Related Vehicle	EH1998M (Car)	Contact No.	83821998
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 18th December 2017, I parked my vehicle with the registration plate of EH1998M at the HDB Multi-storey carpark labelled as AMA23 since about 08:30pm.

I was visiting my in-laws residence until 11:30pm same-day, however when I return to my carpark to retrieve my said vehicle, I saw that my car had sustained damage (as per attached photo).

There is no note or any memo left on my car, thus I had retrieved the memory card from my in-car video recorder (as attached) which clearly shown that my car was hit multiple times by the dark blue car (believed to be a Mercedes-Benz as my passenger recalled that the vehicle was parked before myself), the driver then drove off without returning which conclude as a hit-and-run case.

Therefore, I would like to seek the Authority to investigate and retrieved the police camera footage located at the said carpark around 9:30pm to 10:30pm as I hope to identify the dark blue Mercedes-Benz as it is bound to exit from the carpark which the camera is located.

Sincerely hope that the Authority can help retain the footage since yesterday as I hope it is not overwrite.

Greatly appreciated if the Authority can quickly retrieved the evidencing video from the said carpark at the said time and furnish to me with at least the registration plate number of the dark blue Mercedes-Benz for my insurance reporting purpose.

On the side note, I had left a note on the door knot of vehicle SJE3146Z whom also had a video recorder that is actively recording that was parked opposite me earlier than 08:30pm, my note indicated that I would need his or her help to see whether any evidence was recorded in his or her recorder.

Thank you.

*My video that evidenced that my car was hit multiple times by the dark blue car was 36MB. Kindly provide an email address or branch to visit. As I hope this is resolved as soon as possible.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**

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



T/20171219/7011

3 of 4

Report No. T/20171219/7011

CONTINUATION OF REPORT

Sketch Plan #6



**SINGAPORE
POLICE FORCE**

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



T/20171219/7011

4 of 4

Report No. T/20171219/7011

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

Authentication Stamp
NP168

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

Date/Time:
19/12/2017 12:51

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

