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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

| aloresald. | |
|--|--------------------------------------|
| | ACCIDENT STATEMENT |
| Date Of Report | 22/12/2017 15:39 |
| Date Of Accident | 11/12/2017 12:00 |
| Exact Location Of Accident | ALONG NEW UPP CHANGI RD |
| Country/State of Loss | SINGAPORE |
| | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | SKM8E |
| Insured/Policyholder | |
| Name Of Registered Owner | LIM LEE KIANG |
| NRIC No | S0444959B |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-91563049 |
| Alternative Phone No | OFFICE-91563049 |
| Vehicle Particulars | |
| Manufacturer | MERCEDES-BENZ |
| Model | E250 EXCLUSIVE (R18 LED) |
| 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 | REPORTING ONLY |
| Vehicle Category | PRIVATE CAR |
| Insurance Company | |
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 1700011740 |
| Cover Note Number | |
| Driver | |
| Name of Driver | LIM LEE KIANG |
| NRIC No. | \$0////050B |

Name of Driver

NRIC No

S0444959B

Date Of Birth

12/03/1946

Occupation

INDOOR

Date Of Driving Pass

06/05/1981

Driving Experience 36 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91563049

Fax Number

Contact Number OFFICE-91563049

EMail Address NOEMAIL

28 BEDOK RIA CRESCENT Address

Postcode 489844

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 NO COLLISION

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

0

NO

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Police Station Name TANAH MERAH NEIGHBOURHOOD POLICE POST

NO

ROAD: BLK 51 NEW UPPER CHANGI ROAD #01-1514, POSTCODE: Police Station Address

461051, COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-4499999 - FAX NO: 62447251

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20171222/2081.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC6081R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category **TAXI**

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
 - 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:
 - 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:

NRIC/FIN No.:

Name

Reporting Centre Porso

Accident Sketch Plan

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| CRIBE CIRCUMSTAN | ICES OF THE ACCIDENT |
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| | articulars are true in every respect. |
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Date & Time:

GIARAK: SkenchPlanForm, 9/3

NRIC/FIN No.:





T/20171222/2081

1 of 3

Report No. T/20171222/2081

Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051 Tel No: 1800-4499999

REPORT OF A TRAFFIC ACCIDENT

| Date/Time Report Made: 22/12/2017 14:50 | | lade: | Vide Report No.: | Station Diary No.: | |
|--|-------------------------|------------------------------|--|----------------------------|--|
| Informa | nt's Particu | ulars | Calculation of the same | | |
| Name of | Informant: KIANG | | Address: 28 BEDOK RIA CRESCENT | SINGAPORE 489844 | |
| ID Type | / ID No.: D / S04449 | 59B | Contact No.: Home/Office: 96181188 Mobile: 91563049 | | |
| National | ity: ORE CITIZ | EN | Email: | | |
| Sex: Male | Age: 71 | Date of Birth: 12/03/1946 | Type of Informant: Vehicle Owner | | |
| Race: Chinese | | | Language: | Institution / School Name: | |
| Occupation: Retiree | | | Driving Licence Information Class: 2B,2A,3 | Date of Expiry: | |

| Seneral Inform | mation of the Accide | | | 1= (1 | |
|--|---------------------------|-----------------------|---|--|--|
| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 11/12/2017 12:00 | Type of Location Straight Road | |
| Location: Along Road 1 NEW UPPER Weather: | CHANGI ROAD | Road Surface: | R | toad Speed Limit: | |
| Traffic Flow: Two Way | | Traffic Control: | | Traffic Volume: | |
| Type of Collis | sion: | | а | inyone conveyed by imbulance: lo | |

| Details of V | ehicle Invo | lved | | STEPHEN I | Name of the Owner | |
|--------------|-------------|------------------|--------------------------------|-----------|---|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| SKM8E | Car | MERCEDES BENZ | E250 EXCLUSIVE (R18 LED) | Red | No Damage | 0 |

| Details of Vehicle Insurance | | | | | |
|------------------------------|---------------------------------|--------------|------------|-------------|--|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date | |
| | AIG ASIA PACIFIC INSURANCE PTE. | 1700011740 | 09/06/2017 | 08/06/2018 | |

Police Report



T/20171222/2081

Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051 Tel No: 1800-4499999

2 of 3 Report No. T/20171222/2081

CONTINUATION OF REPORT

| Details of Perso | | | | A IR P | FEB 2 | ASSESSMENT OF STREET |
|------------------|-------------------|-----|-------------|---------|----------------|----------------------|
| Any Pedestrian I | nvolved; No | | | | - | |
| No. of Pedestria | ns Injured: NIL | | Use of Pe | daetria | n Cron | ning: NA |
| Vehicle Owner | | | 10000116 | uestria | II CIOS | sing: NA |
| Name | LIM LEE KIANG | | ID No | 0. | S0444959B | |
| Related Vehicle | SKM8E (Car) | | Contact No. | | 96181188 | |
| Hospital/Clinic | NIL | | Class | | Class: 2B,2A,3 | |
| | | | | Licen | | Date of Expiry: NIL |
| Date Treatment | NIL | | Date Disc | harge | NIL | |
| No. of Days gran | ted Medical Leave | NIL | Degree of | | NIL | |

Brief Details.

On 21/12/2017, I received a TP letter in regards to a hit and run dated on 11/12/2017 at about 1200hrs along New Upper Changi Road. However, as I try to access the in-car camera black box, however as the in-car camera is attached to the car engine, therefore if the engine is not on, the in-car camera will not be on. According to the black box log, the in-car camera is not on. I do not recall driving my car on 11/12/2017 at about 1200hrs and I had checked with all my family members whom are able to access my of this alleged hit and run incident.

TP/IP/67069/2017





Police Station Of Origin: Tanah Merah NPP 51 New Upper Changi Road #01-1514 SINGAPORE 461051

Report No. T/20171222/2081

3 of 3

CONTINUATION OF REPORT

Sketch Plan

Tel No: 1800-4499999

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: G / Sgt 2 SAM YEO WEN MING | Signature Of Informant: |
|--|--------------------------------|
| Signature Of Interpreter: Not applicable | Date/Time: 22/12/2017 14:50 |
| Officer In Charge Of Case: TP / HRT / St Staff Sgt kill WOON TIONG Contact No. 155476418 | Classification Of Case: |
| Authentication Stamp NP 168 SIGNATURE | |



Our Ref Date : TP/IP/67069/2017 : 20 December 2017

Lim Lee Kiang No.28 Bedok Ria Crescent Singapore 489844 Traffic Police 10 Ubi Avenue 3 Singapore 408865 Tel +65 6547 6418 Fax +65 6547 4883 www.police.gov.sg

URGENT

Dear Sir / Madam

ALLEGED HIT-AND-RUN ACCIDENT INVOLVING SHC6081R AND SKM8E ALONG NEW UPPER CHANGI ROAD ON 11^{TH} DECEMBER 2017 AT 12.00 PM

Our investigations showed that you are the registered owner / driver of **SKM8E**, which is alleged to have been involved in a hit and run accident.

- You are required to provide the particulars of the driver on the above date and time within 14 days of receipt of this letter. Under the provisions of the Road Traffic Act, it is an offence not to provide the driver's particulars, and the owner can be liable to a fine of up to \$1,000/- or 6 months' imprisonment.
- In addition, please inform the driver to lodge an online Police Report of a Traffic Accident (NP168) using SingPass via the SPF Electronic Police Centre ¹ (http://www.police.gov.sg/epc). Alternatively, the report may be lodged at any Police Post or Neighbourhood Police Centre. Do note that failure to lodge a report may have an adverse effect against the involved party.
- The information given by the driver in the report will be carefully considered. The driver may not be called upon an interview if the information provided is sufficient for our investigation. If you have video evidence, you can send it to the Investigation Officer (IO) via email mickey_lim@spf.gov.sg. If the file size is too big, you can make arrangements with the IO at his/her office number 65476418 for a convenient method of retrieval.

Yours faithfully,

PUTEH BTE SHARIFF (DSP)
CHIEF INVESTIGATION OFFICER / TRAFFIC POLICE

This is a computer-generated letter. No signature is required.

Particulars of the driver of SKM8E on 11th December 2017 at 12.00 pm :
Name : Lim Let Kings NRIC / FIN / PP No. Address :

Contact No : 9 Life 1185 S04449590 28 Beak Fix Crescent

I affirm that the information I gave above is true and correct

Name / Contact No of Registered owner Signal

Signature of Registered vehicle owner

Date

*Please mail, fax or email a soft copy of the completed form, addressed to the Investigation Officer.

¹ For the purpose of lodging this report, please select "Yes" for "Is this a Hit and Run accident?" under "Step 2: Accident Info", even if the driver is not aware of any accident".















