

## 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	02/01/2018 16:59
Date Of Accident	30/12/2017 15:30
Exact Location Of Accident	YISHUN ST 21 OSCP
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW5509M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PAULINE TAN SIEW HOON
NRIC No	S7424370C
Email Address	PAULINETAN@STAFFINGNETWK.COM
Mobile Phone No	(LOCAL) +65-97651987
Alternative Phone No	OTHERS-96999665

### Vehicle Particulars

Manufacturer	HONDA
Model	S2000-2.2 TYPE-S 2.2 M (A)
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA257513
Cover Note Number	15/08/2017 - 22/07/2018

### Driver

Name of Driver	ON SHAW MING
NRIC No	S7714070J
Date Of Birth	07/05/1977
Occupation	INDOOR
Date Of Driving Pass	05/01/2004
Driving Experience	13 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96999665
Fax Number	
Contact Number	OTHERS-97651987
Email Address	ONFERRE@GMAIL.COM

Address	BLK 223 YISHUN ST 21 #09-475
Postcode	760223
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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	DRIZZLING
Road Surface	WET

#### 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.	YES
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
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE POLICE REPORT & SKETCH PLAN BY DRIVER

#### 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 Witness 1

Name	SHAH
Phone Number	98456851
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC8039B
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)

## Sketch Plan Pg. 1

### SKETCH PLAN


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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.

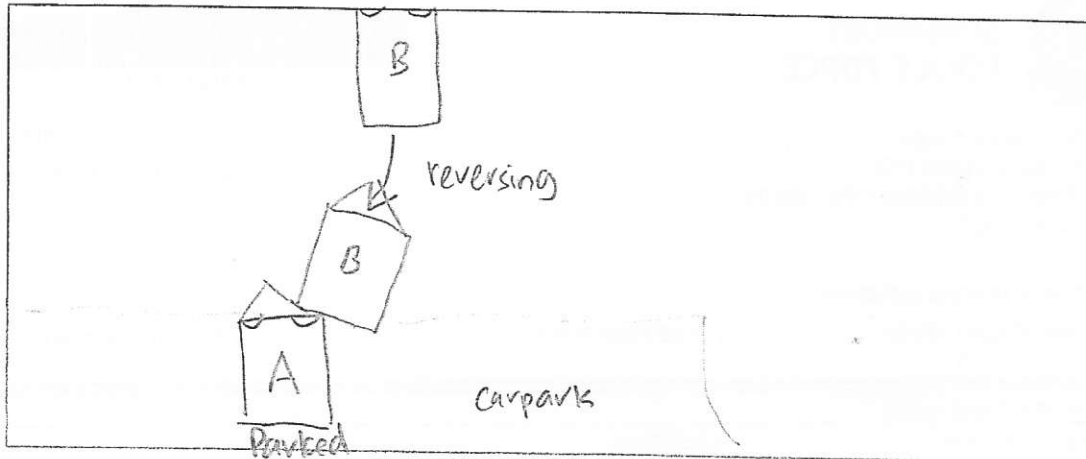
\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

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

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

# Sketch Plan Pg. 2

Date of accident: 30th Dec Time: 1530 Location: YISHUN ST. 21  
 My Vehicle A: SGW 5509M Vehicle B: SHC 8039 B Vehicle C: NA  
 SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 30th Dec 2017, my in car camera recorded a mercedes taxi SHC 8039 B reversing & hitting the front right side of my car resulting in cracked lines & scratches. My car was parked and nobody was in the car. The taxi drove off after hitting my car. I have a video recording of this incident.

At the point of hitting my car, a passer-by saw the accident and informed him that he has hit my car and told him to check it. However, the taxi driver still drove off. Half hour later, when I returned to my car, the passer-by informed me that there was a hit & run accident on my car. He can be a witness and I have his contact number. I made a report to the Police & my car insurance.

On 1st Jan 2018, I decided to call the taxi company to locate him. He contacted me subsequently and denied he knew anything about hitting my car.

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☒ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address : ON FERRE @ GMAIL . com

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

## 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 Centre/Repairs Signature

Name:

NRIC/FIN No.:

[AH LIM MOTOR COMPANY]



**SINGAPORE  
POLICE FORCE**



T/20171231/7007

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

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Report No. T/20171231/7007

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 31/12/2017 16:58		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of informant: ON SHAW MING		Address: APT BLK 223 YISHUN STREET 21 #09-475 SINGAPORE 760223			
ID Type / ID No.: NRIC NO / S7714070J		Contact No.: Home/Office: Mobile: 96999665			
Nationality: SINGAPORE CITIZEN		Email: onferre@gmail.com			
Sex: Male	Age: 40	Date of Birth: 07/05/1977	Type of informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: MINDEF WARRANT OFFICER		Driving Licence information: Class: 3		Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/12/2017 00:00	Type of Location: Car Park
Location: YISHUN STREET 21 Car park at Yishun st 21				
Weather: Raining	Road Surface: Wet		Road Speed Limit:	
Traffic Flow:	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
SGW5539M	Car	HONDA	S2000	White	Slightly Damaged	0
SHC3039B	Car	MERCEDES BENZ	taxi	White		0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGW5539M	AXA INSURANCE SINGAPORE PTE		15/01/2017	30/07/2018



**SINGAPORE  
POLICE FORCE**



T/20171231/7007

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408665  
Tel No: 65470000

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Report No. T/20171231/7007

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: Nil		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	ON SHAW MING	ID No.	37714070.1
Related Vehicle	8QW5559M (Car)	Contact No.	66589665
Hospital/Clinic	Nil	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: Nil
Date Treatment	Nil	Date Discharge	Nil
No. of Days granted Medical Leave	Nil	Degree of Injury	Nil

Free Data's

On 30th December 2017, my in car camera recorded a Mercedes taxi SH5 5039 R reversing and hitting the front of my car resulting in cracked lines and scratches. My car was parked and nobody was in the car. The taxi drove off after hitting my car. I have a video recording of this incident.



**SINGAPORE  
POLICE FORCE**



I/20171231/7007

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408866  
Tel No: 65470000

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Report No. I/20171231/7007

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:  
TP / TPR /

Signature Of Informant:

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

Date/Time:  
31/ 2/2017 16:58

Classification Of Case: