

## 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	09/01/2018 09:53
Date Of Accident	08/01/2018 11:00
Exact Location Of Accident	53 SERANGOON NORTH AVENUE 4 OPEN SPACE CAR PARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB4801U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	EDWARD AUDIO & ELECTRONICS PTE LTD
Co Reg No	199708306H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94375516
Alternative Phone No	OFFICE-67411958

### Vehicle Particulars

Manufacturer	FIAT
Model	DOBLO 1.3
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5036112085-08
Cover Note Number	COMPREHENSIVE

### Driver

Name of Driver	TAN SWEE KUAN
NRIC No	S6812898F
Date Of Birth	25/04/1968
Occupation	OUTDOOR
Date Of Driving Pass	25/02/1995
Driving Experience	22 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98733546
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 512 SERANGOON NORTH AVENUE 4 #04-414
Postcode	550512
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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	PAYA LEBAR NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 114 HOUGANG AVENUE 1 #01-1270 , <b>POSTCODE:</b> 530114 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2899999 - <b>FAX NO:</b> 62815961
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	YM6304U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LOH KIM YAM
NRIC/Passport Number	S1128141I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Sketch Plan Pg. 1

INCOME MOTOR SERVICE CENTRE

Vehicle No: GBB4801U

Report Date & Start Time: 09/01/18 / 9:45

Report No: MT/ \_\_\_\_\_

D.O.A: 08/01/2018

Make / Model: FIAT DOBLO 1.3

Reporting Type: \_\_\_\_\_ End Time: \_\_\_\_\_ / \_\_\_\_\_

Time: 11:00 hrs

### SKETCH PLAN

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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.

EDWARD AUDIO & ELECTRONICS PTE LTD

53 Serangoon North Ave 4

#03-06 Singapore 555852

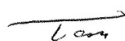
Tel: 6741 1958 Fax: 6741 1013

Email: edworks@singnet.com.sg

GST Reg. No: 199708306H

09/01/18 / 9:45

Policyholder's Signature / Date & Time



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

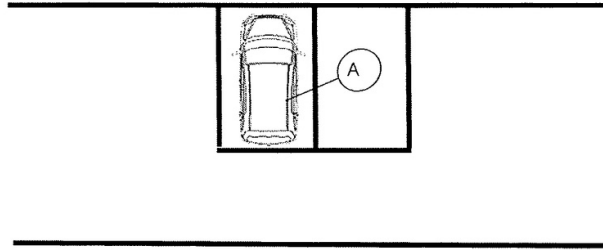
09/01/18 / 9:45

  
Thomas Chen (S098890)  
Customer Care Executive  
Motor Service Centre

Witnessed by Reporting Centre Personnel

Sketch Plan Pg. 2

SKETCH PLAN



53 Serangoon North Avenue 4 Open  
Space Car Park

Vehicle A: GBB4801U

Vehicle B: YM6304U

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report.

Declaration

EDWARD AUDIO & ELECTRONICS PTE LTD  
We declare the foregoing particulars are true in every respect.

53 Serangoon North Ave 4  
#03-06 Singapore 555852  
Tel: 6741 1958 Fax: 6741 1013  
Email : edworks@singnet.com.sg  
GST Reg. No: 1997089001

Policyholder's Signature / Date & Time

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

1/9/2018 9:45

Thomas Chen (S098890)  
Customer Care Executive  
Motor Service Centre

Witnessed by Reporting Centre Personnel

## Police Report Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20180108/2143

1 of 3

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

Report No. T/20180108/2143

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/01/2018 17:08		Vide Report No.:		Station Diary No.: 60	
<b>Informant's Particulars</b>					
Name of Informant: TAN SWEE KUAN			Address: APT BLK 512 SERANGOON NORTH AVENUE 4 #04-414 SINGAPORE 550512		
ID Type / ID No.: NRIC NO / S6812898F			Contact No.: Home/Office: Mobile: 98733546		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 49	Date of Birth: 25/04/1968	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRiver			Driving Licence Information: Class: 2B,3,4,5 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/01/2018 11:00	Type of Location: Car Park
Location: Along Road 1 SERANGOON NORTH AVENUE 4				
Open Car Park located at 53 Serangoon North Avenue 4				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
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
GBB4801U	Van	FIAT		Blue	Slightly Damaged	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20180108/2143

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

2 of 3

Report No. T/20180108/2143

**CONTINUATION OF REPORT**

Driver			
Name	TAN SWEE KUAN		ID No. S6812898F
Related Vehicle	GBB4801U (Van)		Contact No. 98733546
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 08/01/2018 at about 0930hrs, I parked my vehicle GBB4801U at the open car park of 53 Serangoon North Avenue 4 and everything was intact and in order. Subsequently I left for work. On 08/01/2018 at about 1100hrs, I came back to my vehicle and discovered that the rear right windscreen was smashed and the rear portion of my vehicle had a big dent. I then managed to view the CCTV footage of the CCTV located within the car park. In the footage, it only showed clearly that the rear portion of my vehicle was hit by another 10-feet Lorry believed to be silver in colour. The license plate number was not clear. I do not have any in-car CCTV installed in my vehicle. I am lodging this report for investigation purposes.



**SINGAPORE  
POLICE FORCE**



T/20180108/2143

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

3 of 3


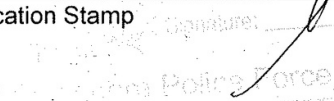
Report No. T/20180108/2143

**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 ASHLEY TOH	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 08/01/2018 17:08
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
Authentication Stamp NP168 	





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo





Accident Photo





Accident Photo





Accident Photo

