#### 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 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 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	22/01/2018 09:54
Date Of Accident	20/01/2018 19:20
Exact Location Of Accident	BETWEEN BLK 52 & 53 MARINE TERRACE CARPARK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	PC4697H
Insured/Policyholder	
Name Of Registered Owner	JK SINCERE TRANSIT SERVICES
Co Reg No	53213662D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HIACE COMMUTER GL 3.0A
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	BUS
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5078285261-01
Cover Note Number	
Driver	

**EMail Address** 

**CHIA PENG KOON** Name of Driver NRIC No S1649662F Date Of Birth 14/07/1964 Occupation **OUTDOOR Date Of Driving Pass** 18/12/2000 **Driving Experience** 17 YEARS AND 1 MONTH Gender MALE Mobile Number (LOCAL) +65-93512272 Fax Number **Contact Number** OFFICE-93512272

**NOEMAIL** 

Address BLK 53 MARINE TERRACE

#02-215

Postcode 440053

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

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Insurance Company of Driver's Own Vehicle

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**General Information of the Accident** 

Type Of Accident HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED

Weather Conditions CLEAR
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?

Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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 MARINE PARADE NEIGHBOURHOOD POLICE CENTRE

NO

Police Station Address ROAD: 300 MARINE PARADE ROAD, POSTCODE: 449296, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-4428999 - **FAX NO**: 62447678

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT - T/20180122/2006.

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 UNKNOWN

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

#### **Accident Sketch Plan**

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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:
  - (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.

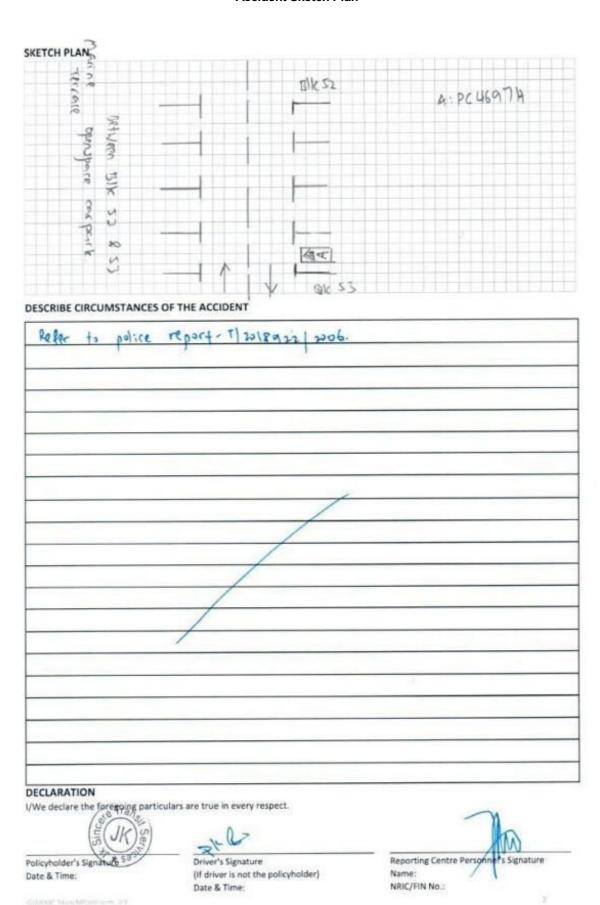
Policyholder's Signature Date & Time: Driver's Signature (if driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

#### **Accident Sketch Plan**



#### **Police Report**





Report No. T/20180122/2006

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

REPORT OF A TRAFFIC ACCIDENT

Dgte/Time Report Made: 22/01/2018 01:32		lade:	Vide Report No.:	Station Diary No. 10	
orma	nt's Particu	ulare			
Name of Informant CHIA PENG KOON			Address: APT BLK 53 MARINE TERRACE #02-215 SINGAPORE 440053		
ID Type / ID No.: NRIC NO / S1649652F		92F	Contact No.: Home/Office:	Mobile: 93512272	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 53	Date of Birth: 14/07/1964	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Driver			Driving Licence Information: Class:	Date of Expiry:	

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident 20/01/2018 19:20	Type of Location Car Park	
t scation: Along Road 1 MARINE TER	RACE arpark in between Blo	ck 52 and 53 Marine T	errace lot number 37		
Weather: F		Road Surface:	R	Road Speed Limit	
A ACTUMENT					
Traffic Flow:		Traffic Control:	T	raffic Volume:	

Details of a	ehicle Involved			THE NAME OF THE OWNER.	100	AL
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC4697H	Bus/Coach/Mi	TOYOTA	Hiace	Silver	Slightly Damaged	0

Details of V	ehicle insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
PC4697H	NTUC Income Insurance Co-Operative	KDH2230028873	12/03/2017	11/03/2018

#### **Police Report**





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Report No. 7/20180122/2006

Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449295

Tel No: 1800-4428999

#### CONTINUATION OF REPORT

#### Brief Details.

On 19/01/2018 at about 1930hrs, I parked my vehicle bearing vehicle registration number PC4897H (Silver Toyota Hiace) at the open carpark in between Block 52 and 53 Marine Torrace of lot number 37. I left my vehicle at the said carpark for days and everything was last seen intact with no scratches.

On 21/01/2018 at about 1630hrs, I went to my vehicle and discovered that there were scratches found on top of the rear right wheel of my vehicle. There were also some white paint stains left on the said affected area.

I wish to state that I have an in-car camera and it was on recording mode. I then viewed the CCTV footage and suspected that it was one white vehicle of an unknown vehicle registration number that was parked beside my vehicle had collided against the side of my vehicle. The said vehicle was parked an 20/01/2018 at about 1920hrs and left on the same day at about 2100hrs.

I wish to further informed that there was no note left on vehicle.



#### **Police Report**





3 of 3

Report No. 1/20180122/2006

POLICE FORCE

Police Station Of Origin: Marine Parade N.P.C. 300 Marine Parade Road SINGAPORE 449296 Tel No: 1800-4428999

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 tax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: G / Sr Staff Sgt FARIDAH BINTE ABU BAKAR	Signature Of Informatic
Signature Of Interpreter: Not applicable	Date/Time: 22/01/2018 01:32
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE: Contact No.: 65476079	Classification Of Case:
Authentication Stamp	































