

## 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 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	30/01/2018 13:29
Date Of Accident	30/01/2018 08:50
Exact Location Of Accident	CENTRAL BLVD NEXT TO ASIA SQUARE TOWER 1
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU7368R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHANG CHIA JOO (ZHENG JIARU)
NRIC No	S8508596D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98224534
Alternative Phone No	OFFICE-98224534
<b>Vehicle Particulars</b>	
Manufacturer	BMW
Model	523I 2.5 AT ABS D/AB 2WD 4DR GAS/D NAV
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097426353
Cover Note Number	-

### Driver

Name of Driver	CHANG CHIA JOO (ZHENG JIARU)
NRIC No	S8508596D
Date Of Birth	26/03/1985
Occupation	INDOOR
Date Of Driving Pass	24/05/2005
Driving Experience	12 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98224534
Fax Number	
Contact Number	OFFICE-98224534
EEmail Address	NOEMAIL

Address	BLK 225 SERANGOON AVE 4 #08-113
Postcode	550225
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	SIDE SWIPE
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.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : SEAH WEI CHIN GENDER: : FEMALE

### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUANG NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 357 HOUANG AVENUE 7 #01-805 , <b>POSTCODE:</b> 530357 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2869999 - <b>FAX NO:</b> 63822066
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

PLEASE 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	SFM1598X
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

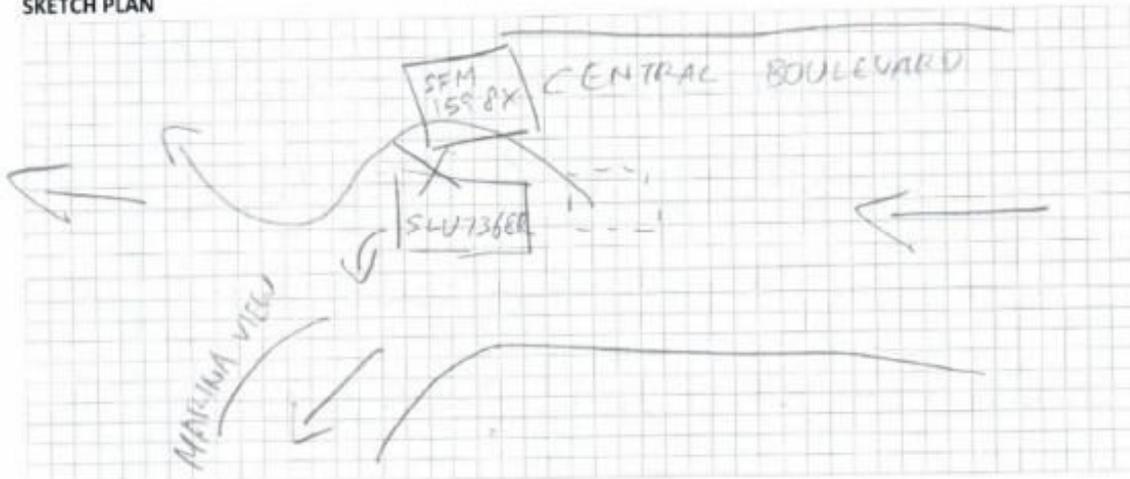
No. Of Passenger (Including Driver)

2



Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report

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 Personnel's Signature  
Name:  
NRIC/FIN No.:

**POLICE REPORT**



**SINGAPORE  
POLICE FORCE**



T/20180130/2058

Police Station Of Origin:  
Hougang NPP  
357 Hougang Avenue 7 #01-805  
SINGAPORE 530357  
Tel No: 1800-2869999

1 of 3  
Report No. T/20180130/2058

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 30/01/2018 12:51	Vide Report No.:	Station Diary No.: 9
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**Informant's Particulars**

Name of Informant: CHANG CHIA JOO		Address: APT BLK 225 SERANGOON AVENUE 4 #08-113 SINGAPORE 550225	
ID Type / ID No.: NRIC NO / S8508596D		Contact No.: Home/Office:                      Mobile: 98224534	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 32	Date of Birth: 26/03/1985	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SELF EMPLOYED		Driving Licence Information: Class:	Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 30/01/2018 08:50	Type of Location: Straight Road
Location: Along Road 1 CENTRAL BOULEVARD  Central boulevard next to asia square tower				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision:			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFM1598X	Car					1
SLU7368R	Car	BMW	523I 2.5 AT ABS D/AB 2WD 4DR GAS/D NAV	Blue	Slightly Damaged	1

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

POLICE REPORT



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T/20180130/2058

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357 Hougang Avenue 7 #01-805  
SINGAPORE 530357  
Tel No: 1800-2869999

2 of 3  
Report No. T/20180130/2058

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLU7368R	NTUC Income Insurance Co-Operative Limited	5097426353	16/01/2018	15/01/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHANG CHIA JOO	ID No.	S8508596D
Related Vehicle	SLU7368R (Car)	Contact No.	98224534
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

**Brief Details.**

On 30/01/2018 at about 0850hrs, I was driving along central boulevard in my car bearing registration number SLU7368R with my wife namely, Seah Wei Chin HP: 96729357. There was heavy traffic at that point of time and I was at the third lane of the road. Just as I was about to switch lane to the left, a car bearing registration number SFM1598X that was behind me at the third lane squeezed in between the third and second lane and tried to overtake me.

When the car was squeezing through, the said car bang against my driver's side mirror. I was shocked and immediately take note of the car plate number. The driver of the said car did not stop upon colliding and simply just drove off heading towards Cross street.

I wish to inform that my wife sitting beside me can serve as a witness as she witnessed the whole incident. I am making this police report as the driver did not stop and this is the first time such incident happened to me.

POLICE REPORT



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357 Hougang Avenue 7 #01-805  
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3 of 3  
Report No. T/20180130/2058

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 MUHAMMAD IZZUWAN BIN SYED	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 30/01/2018 12:51
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt LIM WOON TIONG Contact No.: 65476418	Classification Of Case: 
Authentication Stamp NP168	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

