

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	01/02/2018 12:29
Date Of Accident	01/01/2018 01:30
Exact Location Of Accident	RAFFLES BOULEVARD MARINA SQUARE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF3623H
Insured/Policyholder	
Name Of Registered Owner	CARWISE PTE LTD
Co Reg No	201725931G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94309849
Alternative Phone No	OFFICE-94309849

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER 1.6 A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5094372947
Cover Note Number	

Driver

Name of Driver	TAN JIE YING, CELIN (CHEN JIEYING, CELIN)
NRIC No	S8142189G
Date Of Birth	27/12/1981
Occupation	OUTDOOR
Date Of Driving Pass	07/10/2003
Driving Experience	14 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-88090369
Fax Number	
Contact Number	OFFICE-88090369
Email Address	NOEMAIL

Address	BLK 899A TAMPINES STREET 81 #05-764
Postcode	521899
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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	CLEAR
Road Surface	DRY

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.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT- F/20180101/2147.

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	PA8050H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
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

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

Accident Sketch Plan

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - #201802101/2147.

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**



F/20180101/2147

1 of 2

POLICE REPORT (NP299)

Report No. F/20180101/2147

Police Station Of Origin
Yishun North N.P.C
31 Yishun Central SINGAPORE 758827
Tel No: 1800-8529999

Date/Time Report Made 01/01/2018 20:26	Vide Report No. A/20180101/0130	Station Diary No. 123	
Name Of Informant NG YEE CHUNG	Address APT BLK 298 YISHUN STREET 20 #05-41 SINGAPORE 760298		
ID Type / ID No. NRIC NO / S7124707D	Contact No. Home/Office	Mobile 94309849	
Nationality SINGAPORE CITIZEN	Email Address		
Occupation Company director	Sex Male	Age 46	Date of Birth 09/07/1971
Institution/School Name	Race Chinese		
	Language English		
Date/Time Of Incident 01/01/2018 08:45 - 01/01/2018 08:45	Location Of Incident C/O 6 RAFFLES BOULEVARD MARINA SQUARE SINGAPORE 039594 PAN PACIFIC HOTEL		

Brief details.

I wish to state that I am the director of my own car rental company named Carwise Pte Ltd.

On 01/01/2018 at about 0845hrs, I received a call from Inspector William Chia Tel: 62240000 from Central Police Division. He informed me that (V1) one red Mitsubishi Lancer GLX (SJF3623H) registered under my company was found abandoned with its front portion damaged at Pan Pacific Hotel since

Signature Of Officer Recording The Report: F / Staff Sgt MUHAMMAD FATHI BIN TALHAH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 01/01/2018 20:26
Officer In-Charge Of Case: F / Ang Mo Kio Police Divisional Investigation Branch / Staff Sgt MUZZAMMIL BIN OMAR Contact No.: 62180000	Classification Of Case:

Authentication Stamp

Police Report



SINGAPORE
POLICE FORCE



F/20180101/2147

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180101/2147

0200hrs. He also informed me that the Police have attended to the incident vide incident no. A/20180101/0130.

I then instructed my tow truck to proceed down to the location to tow the vehicle to my company workshop named Fong Workshop located at 160 Sin Ming Drive #08-08 Sin Ming Autocity. When the tow truck reached at the hotel, the driver send a picture of the damages to me. Base on the picture, (V1) front bumper and hood was badly damaged and it looked like the car had hit onto something.

I wish to state that (V1) was rented out by a customer named Tan Jie Ying, Celin F/36 IC: S8142189G of Blk 889A Tampines Street 81 #05-784 Hp: 88090369. She rented the vehicle from me since 20/12/2017 and the rental will last till 19/05/2018 as she is a Grab/Uber driver.

I have tried calling her numerous times but she did not answer. I also messaged her at her mobile but she did not reply. I am uncertain of what happened to the vehicle or even my client.

I am lodging this report for my own record purpose as well as future reference as I intend to take necessary action against my client. I was also advised by Inspector William Chia to lodge a Police report as well.

Signature Of Officer Recording The Report:

F / Staff Sgt MUHAMMAD FATHI BIN TALHAH

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio Police Divisional Investigation Branch /
Staff Sgt MUZZAMMIL BIN OMAR
Contact No.: 62180000

Authentication Stamp

Signature Of Informant

Date/Time:
01/01/2018 20:26

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

