

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 repeal date 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 as aforesaid.

ACCIDENT STATEMENT

Date Of Report	05/03/2018 11:41
Date Of Accident	03/03/2018 08:10
Exact Location Of Accident	POTONG PASIR AVE 1 CP LOT 151 / 152
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM5250B
Insured/Policyholder	
Name Of Registered Owner	AZMI BIN SA'AT
NRIC No	S7920191Z
Email Address	AZMISAAT79@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97379942
Alternative Phone No	OTHERS-97379942

Vehicle Particulars

Manufacturer	OPEL
Model	ASTRA 1.0 ST
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	5089905943
Cover Note Number	31/03/2017 - 30/03/2018

Driver

Name of Driver	AZMI BIN SA'AT
NRIC No	S7920191Z
Date Of Birth	20/07/1979
Occupation	INDOOR
Date Of Driving Pass	12/03/2010
Driving Experience	7 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97379942
Fax Number	
Contact Number	OTHERS-97379942
Email Address	AZMISAAT79@GMAIL.COM

Address BLK 120 POTONG PASIR AVE 1 #8-814
 Postcode 350120
 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 -
 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? 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 TRAFFIC POLICE DIVISION HQ
 Police Station Address ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 65470000 - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHED POLICE REPORT (T/20180304/7010)

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBD8689R
 Vehicle Make/Model/Colour LORRY
 Details Of Properties
 Vehicle Category COMMERCIAL VEHICLE
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage

Sketch Plan Pg. 1

NTUC Income Motor Service Centre
Report No: MT: D.O.A:

3 318

Vehicle No:
Make / Model:

SLM 525UR
Opel Astra

Report Date: 3/5/2018 Start Time: 11:50 AM
Reporting Type: TP End Time:

SKETCH PLAN

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 renege policy liability.
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. 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 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.
8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

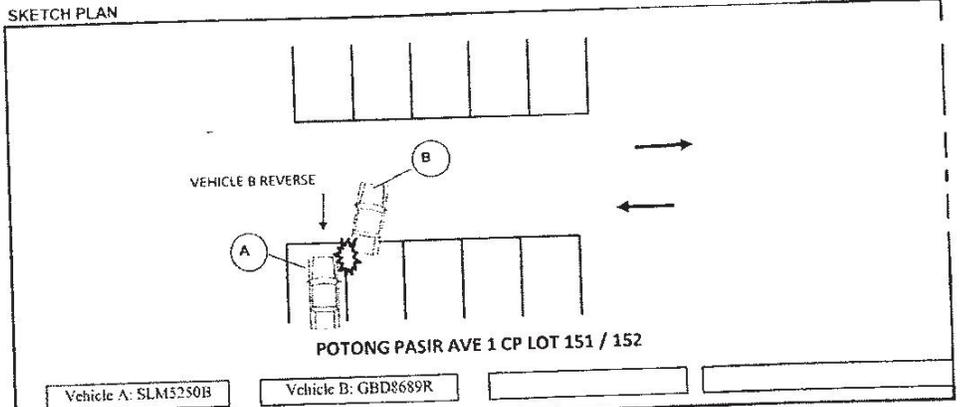
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this form and any other personal information provided by me or possessed by my insurer (collectively the "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 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 reasonable required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, law or court orders.


5 Mar 2018 3/5/2018 11:48
Policyholder's Signature
Date & Time:

3/5/2018 11:48
Driver's Signature (if driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature
Name: Chen Jun Liang
NIC No: S980765

Sketch Plan Pg. 2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT
REFER TO ATTACHED POLICE REPORT (T/20180304/7010)

DECLARATION

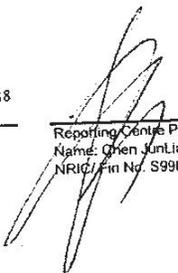
We declare the foregoing particulars are true in every respect.


3/5/2018 11:48

Policyholder's Signature
Date & Time:


3/5/2018 11:48

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



Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC / Fin No. S990765

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180304/7010

1 of 3

Report No. T/20180304/7010

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/03/2018 21:52	Vide Report No.:	Station Diary No.:
--	------------------	--------------------

Informant's Particulars			
Name of Informant: AZMI BIN SA'AT		Address: APT BLK 120 POTONG PASIR AVENUE 1 #08-814 SINGAPORE 350120	
ID Type / ID No.: NRIC NO / S7920191Z		Contact No.:	Mobile: 97379942
Nationality: SINGAPORE CITIZEN		Email: azmisaat79@gmail.com	
Sex: Male	Age: 38	Date of Birth: 20/07/1979	Type of Informant: Vehicle Owner
Race: Javanese		Language: English	Institution / School Name:
Occupation: IT PROJECT MANAGER		Driving Licence Information: Class: 3A	Date of Expiry:

General Information of the Accident				
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/03/2018 08:11	Type of Location: Car Park	
Location: POTONG PASIR AVENUE 1 carpark lots 151 and 152, beside playground, between Blk 120 and Blk 113				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Make	Model	Color	Condition	No. of Passenger	
GBD8689R	Lorry	NISSAN	Blue		0	
SLM5250B	Car	OPEL	astra	Red	Seriously Damaged	4

Details of Vehicle Insurance						
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date		
SLM5250B	NTUC Income Insurance Co-Operative Limited	5089905943	31/03/2017	30/03/2018		



**SINGAPORE
POLICE FORCE**



T/20180304/7010

2 of 3

Report No. T/20180304/7010

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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Vehicle Owner			
Name	AZMI BIN SA'AT	ID No.	S7920191Z
Related Vehicle	SLM5250B (Car)	Contact No.	97379942
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

Lorry vehicle plate number GBD8689R, was reversing into the parking lot beside my parked car. During the reversing manouver, the lorry hit the front side panel of my car, causing a deep scratch and a badly dented panel.

GBD8689R left the parking spot several minutes later and fled the scene, without leaving a note or contact number on my car.

The video of the hit and run accident can be found here -
<https://www.youtube.com/watch?v=SakE2AyFJh8>



**SINGAPORE
POLICE FORCE**



T/20180304/7010

3 of 3

Report No. T/20180304/7010

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

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 04/03/2018 21:52
Officer In Charge Of Case:	Classification Of Case:
Authentication Stamp NP168	