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## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

EMail Address

- 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.

- 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

foresaid.	ACCIDENT STATEMENT
Date Of Report	20/03/2018 11:27
	26/02/2018 23:55
Exact Location Of Accident	BLK 824 TAMPINES STREET 81 CARPARK
EXACT FORBION OF NOOLOOM	SINGAPORE
Displace of Edge	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLU9917T
Insured/Policyholder	
	JAS & KEN FASHION
Co Reg No	53369317M
Email Address	KEN_NBK@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81218878
Alternative Phone No	OFFICE-81218878
Vehicle Particulars	
Manufacturer	TOYOTA
Model	VELLFIRE
Exact Purpose for which vehicle was being used at time of accident	GOING OUT FOR DINNER
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097641805
Cover Note Number	
Driver	
Name of Driver	NG BOON KIAN
NRIC No	S7119427B
Date Of Birth	14/06/1971
Occupation	OUTDOOR
Date Of Driving Pass	11/05/1992
Driving Experience	25 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81218878
Fax Number	PS-1450.00.1 W VIZ-45400.00
Contact Number	OTHERS-81218878
	PACE A LEAD OF THE PACE AND A SHARE AND A

KEN\_NBK@YAHOO.COM

Address

BLK 890A TAMPINES AVENUE 1

#14-311

Postcode

521890

OWNER

Was driver an employee of the Insured's Company NO

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

NO COLLISION

Weather Conditions

CLEAR

Road Surface

ambulance?

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

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)

1

**Details of Police Action** 

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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

SLP2582Y

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)

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 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.
- 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 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)
  - (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.

Policynolder's Signature Date & Time: / 9

Driver's Signature

(If driver is not the policyholder)

Date & Time: 19/3/

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No .:

DESCRIBE CIRCUMSTANCE	MANUSCHI II MANUSCHI BEILANDE SALES
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DECLARATION

We declare the foregoing particulars are true in every respect.

Polo Molder's Signature Date & Time: 19/3/18

Driver's Signature (If driver is not the policyholder) Date & Time: 19/5/18

NRIC/FIN No.:

Reporting Centre Personnel's Signature
Name:



Our Ref: MT/CA/TP/020/0984198-001/A/LC

12 Mar 2018

CERTIFICATE OF POSTING REMINDER

JAS & KEN FASHION BLK 890A #14-311 TAMPINES AVENUE 1 TAMPINES GREENTERRACE SINGAPORE 521890

Dear Policyholder

CLAIM NUMBER: MT/0984198-001 ACCIDENT INVOLVING SLU9917T / SLP2582Y on 26 Feb 2018

We refer to our letter of 01 Mar 2018.

We have yet to receive your report on the accident. We would like to inform you that under your motor insurance policy, you have to report within 24 hours or the next working day after the accident, even if there is no damage to your vehicle. If you have not done so, please report the accident to any of our reporting centres immediately. Otherwise, we may not be able to handle the claim on your behalf.

We reserve the rights to seek recovery from you and/or your driver if we are bound by law or statute to settle the third party injury claim.

If you have any queries, please contact Azhari at 6430 7925 or email us at motor@income.com.sg.

Yours sincerely

Jenny Pe

Deputy Vice President

Motor Insurance



Our Ref Date

TP/IP/13463/2018 : 13 March 2018

URGENT

Traffic Police

10 Ubi Avenue 3 Singapore 408865

Tel +65 6547 6310 Fax +65 6547 4883 www.police.gov.sg

Tampines Avenue 1 **Tampines Green Terrace** Blk 890 #14-311 Singapore 520890

Dear Sir / Madam

ACCIDENT INVOLVING SLP2582Y and SLU9917T ALONG TAMPINES STREET 81 BLK 824 LOT 20 OSCP ON 26 FEBRUARY 2018 @ 11.53 PM

Our investigations showed that you are the registered owner / driver of SLU9917T, which is alleged to have been involved in a minor RTA hit and run accident.

- You are required to provide the particulars of the driver on the above date and time within 14 days of receipt of this letter. Under the provisions of the Road Traffic Act, it is an offence not to provide the driver's particulars, and the owner can be liable to a fine of up to \$1,000/- or 6 months' imprisonment.
- In addition, please inform the driver to lodge an online Police Report of a Traffic Accident (NP168) using SingPass via the SPF Electronic Police Centre 1 (http://www.police.gov.sg/epc). Alternatively, the report may be lodged at any Police Post or Neighbourhood Police Centre. Do note that failure to lodge a report may have an adverse effect against the involved party.
- The information given by the driver in the report will be carefully considered. The driver may not be called upon an interview if the information provided is sufficient for our investigation. If you have video evidence, you can send it to the Investigation Officer (IO) via email Lee\_ming\_cai@spf.gov.sg. If the file size is too big, you can make arrangements with IO Philip Lee at his office number 6547 6960 for a convenient method of retrieval.

Yours faithfully,

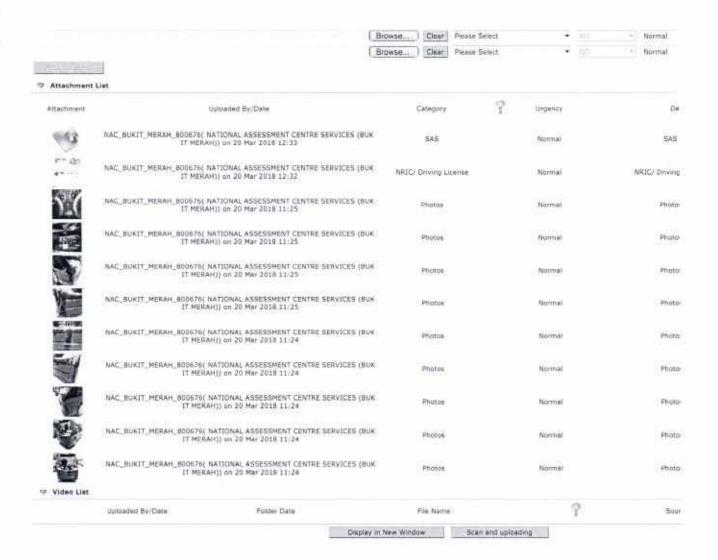
# TAN CHEE SING (ASP) CHIEF INVESTIGATION OFFICER / TRAFFIC POLICE

This is a computer-generated letter. No signature is required.

Name :	NRIC / FIN / PP No.	Address :			
Contact No :					
I affirm that the information I gave above is true and correct.					
P. Market P. St. St. St. St. St. St. St. St. St. St	The second secon				

<sup>1</sup> For the purpose of lodging this report, please select "Yes" for "Was anyone injured?" under "Step 2: Accident Info", even if you are not injured because another involved party was injured. For similar reason, please select 'Slight' for "Degree of Injury" under "Step 4: Person Involved".

talm Handling						
ccident MT/0984198						
folicy No.	5097641805	Vehicle Nr.	SLU9917T		GST Registration No.	
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Address 4	SINGAPORE 521890	Address Type	Singapore a		THE COME	
Unit No.	14-211	Related Policy Number	509764180	8		
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Unnamed driver Name		Driver NRIC			Driving Experience	
Register Date of Driver License	E.	Driver Age			The second second	
Contact No. (Mobile)		Contact No.(Office)			Contact No.(Home)	
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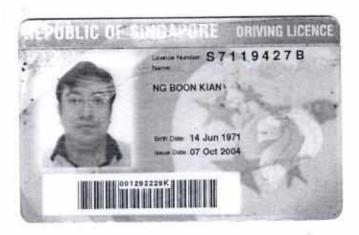
# AGCIDENT STATEMENT

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SCCIDENT DATE! 26/ 21/18 1(00/MM/YYY), TIM	AE: ( 1/5 < )(HH:MM)
ACCIDENT DATE: 1 20/ 12 100/MM/TT	- 1
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LOCATION: 824 Target	
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BINSURANCE COMPANYI NTUC	
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CONTINUE TO 3.4 IF DRIVER ALSO POLICY HO	XTG#A/I
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(Including divice) , it in a country a school	2 CONTACT! SC13 159-)
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WAS ANYBODY INJURED (YES / NO)	
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email = Ken-NBK@ Yahaa (00)

fax = VIECO







YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Motor cars < 3000 kg with <7 passengers, exclusive of the driver; and motor tractors restricts < 2500 kg

11 May 1992

Licence No: 871194278

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