

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	20/03/2018 17:48
Date Of Accident	18/03/2018 13:45
Exact Location Of Accident	CARPARK OF BLK 84 BEDOK NORTH ST 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX9644M
Insured/Policyholder	
Name Of Registered Owner	KOO GEOK KAN
NRIC No	S2576134J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90289685
Alternative Phone No	OTHERS-90289685

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY 2.4 AUTO ABS AIRBAG
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5082270563-01
Cover Note Number	

Driver

Name of Driver	NG KIM TECK
NRIC No	S1315035D
Date Of Birth	03/01/1958
Occupation	INDOOR
Date Of Driving Pass	24/04/1979
Driving Experience	38 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90289685
Fax Number	
Contact Number	OTHERS-90289685
Email Address	NOEMAIL

Address	BLK 765 BEDOK RESERVOIR VIEW #12-259
Postcode	470765
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
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?	NO
Was any other material or property damaged?	NO
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	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20180318/2052

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Sketch Plan

SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
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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) 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:

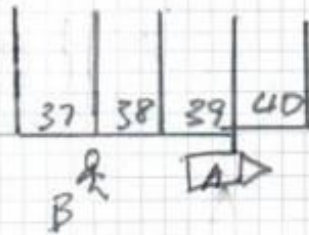
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Sketch Plan #2

SKETCH PLAN

BEDOK NORTH STREET 4
car park of BLK 84



A - SJX9646M
B - Pedestrian

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls Refer to the Police Report -
T/20180318/2052

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.:

SPRINKL Reporting Form 3.0

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180318/2052

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Report No. T/20180318/2052

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

CONTINUATION OF REPORT

Driver Name	NG KIM TECK	ID No.	S1315035D
Related Vehicle	SJX9644M (Car)	Contact No.	90289685
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 18/03/2018 at about 1345 hrs, I was reversing my vehicle (SJX9644M) as another vehicle was coming out of a parking lot at Blk 84 Bedok North St 4. I checked my rear view mirror and my blindspot before reversing and I reversed when there were no cars. I turned back after that and when I saw that there was still not enough space for the vehicle to come out from the parking lot, I let go of my brake a little and I heard some noise coming from the rear of my vehicle. I braked immediately and came out of the car. I realized that I had knocked onto an elderly woman and I asked if she was alright. She said her leg was in pain and I helped her to the shade as she said that it was hot. One of the passerby then called for the police and ambulance and awhile later, the police and ambulance came to the scene. The ambulance then conveyed the elderly woman away after checking on her. The police then advised me to lodge a police report.

I wish to state that the elderly woman came out from between a van and a lorry and I could not see her from my rear view mirror.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180318/2052

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3

Report No. T/20180318/2052

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
18/03/2018 15:15

Vide Report No.:
G/20180318/0139

Station Diary No.:
48

Informant's Particulars

Name of Informant: NG KIM TECK		Address: APT BLK 765 BEDOK RESERVOIR VIEW #12-259 SINGAPORE 470765	
ID Type / ID No.: NRIC NO / S1315035D		Contact No.: Home/Office: Mobile: 90289685	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 60	Date of Birth: 03/01/1958	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: COFFEESHOP HELPER		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 18/03/2018 13:45	Type of Location: Car Park
Location: Along Road 1 BEDOK NORTH STREET 4 carpark of Blk 84 Bedok North St 4				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow:	Traffic Control:	Traffic Volume:		
Type of Collision: Moving Vehicle Against - Pedestrian				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJX9644M	Car					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20180318/2052

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Report No. T/20180318/2052

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

CONTINUATION OF REPORT

Driver			ID No.	S1315035D
Name	NG KIM TECK		Contact No.	90289685
Related Vehicle	SJX9644M (Car)		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Hospital/Clinic	NIL		Date Discharge	NIL
Date Treatment	NIL		Degree of Injury	NIL
No. of Days granted Medical Leave	NIL			

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I wish to state that the elderly woman came out from between a van and a lorry and I could not see her from my rear view mirror.

Police Report



SINGAPORE
POLICE FORCE



T/20180318/2052

Police Station Of Origin:
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30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20180318/2052

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:

G /

Sgt 2 ONG YU XIANG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 YEO KIA HUAT

Contact No.: 65476325

SINGAPORE
POLICE FORCE

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:

18/03/2018 15:15

Classification Of Case: